

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

ADDRESS (number and street) ▼

501 3rd St NW

☐ Check if different than previously reported. (ACC)

Washington

DC

20001

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00002089

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☒ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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 Annie Hill

Signature of Treasurer

Annie Hill

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 03 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y 03 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> 2015		3159399.63
(b) Cash on Hand at Beginning of Reporting Period.....	3557842.35	
(c) Total Receipts (from Line 19) .....	352513.35	994039.93
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	3910355.70	4153439.56
7. Total Disbursements (from Line 31) .....	145491.60	388575.46
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	3764864.10	3764864.10
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



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

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	5

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

6471.48

9145.50

(ii) Unitemized .....

345191.87

961076.56

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

351663.35

970222.06

(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) ..... ►

351663.35

970222.06

## 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.....

850.00

23490.53

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

327.34

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ►

352513.35

994039.93

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ►

352513.35

994039.93

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	6655.71	63248.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6655.71	63248.78
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-15000.00	98500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	153835.89	226826.68
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	145491.60	388575.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	145491.60	388575.46

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	351663.35	970222.06
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	351663.35	970222.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	6655.71	63248.78
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	6655.71	63248.78

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

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

FOR LINE NUMBER: PAGE 6 OF 44  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STEVEN P ABBOTT**

Mailing Address 369 CALIFORNIA ST

City  
WATERLOO

State  
IA

Zip Code  
50703-5329

FEC ID number of contributing  
federal political committee.

C

Name of Employer

QWEST COMMUNICATIONS

Occupation

NETWORK TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 25 / 2015

Transaction ID : C23687821

Amount of Each Receipt this Period

100.00

\* Payroll Deduction: \$50 Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. LAWRENCE R. COHEN**

Mailing Address 501 3RD ST NW

City  
WASHINGTON

State  
DC

Zip Code  
20001-2760

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMM. WORKERS OF AMER.

Occupation

CWA President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.58

Date of Receipt

03 / 19 / 2015

Transaction ID : C23619740

Amount of Each Receipt this Period

74.86

\* Payroll Deduction: \$37.43 Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. RONALD D COLLINS**

Mailing Address 4816 43RD ST NW

City  
WASHINGTON

State  
DC

Zip Code  
20016-4019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMM. WORKERS OF AMER.

Occupation

SVC REP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 19 / 2015

Transaction ID : C23660428

Amount of Each Receipt this Period

100.00

\* Payroll Deduction: \$50 Bi-Weekly

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

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

274.86

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 7 OF 44

(check only one)

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ROBERT E DECKER**

Mailing Address 7044 IVY HILL DR

City

WARRENTON

State

VA

Zip Code

20187-9526

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VERIZON-BELL ATLANTIC SOUTH VA

Occupation

CABLE SPLICING TECHN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2015

Transaction ID : C23666871

Amount of Each Receipt this Period

104.00

\* Payroll Deduction: \$52 Weekly

Full Name (Last, First, Middle Initial)

**B. AUDREY L DEGUIO**

Mailing Address 6909 UPHAM ST

City

ARVADA

State

CO

Zip Code

80003-3437

FEC ID number of contributing  
federal political committee.

C

Name of Employer

QWEST COMMUNICATIONS

Occupation

NETWORK TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 25 / 2015

Transaction ID : C23690377

Amount of Each Receipt this Period

90.00

\* Payroll Deduction: \$45 Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. TRACEY DUFFIN**

Mailing Address 13839 GULLANE DR

City

WOODBIDGE

State

VA

Zip Code

22191-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VERIZON-BELL ATLANTIC SOUTH MD

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2015

Transaction ID : C23666937

Amount of Each Receipt this Period

75.00

\* Payroll Deduction: \$15 Weekly

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

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

269.00

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 8 OF 44  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

<p>Full Name (Last, First, Middle Initial)  <b>A. NICOLINE EINTHOVEN</b></p> <p>Mailing Address 106 MERIDEN AVE</p> <p>City State Zip Code          EWING NJ 08618-1920</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation          NJ STATE EMPLOYEES ADMN CLERICAL Information Requested</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">350.00</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">03 / 27 / 2015</span></p> <p><b>Transaction ID : C23617210</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">150.00</span></p> <p>* Payroll Deduction: \$150 Bi-Weekly</p>		
<p>Full Name (Last, First, Middle Initial)  <b>B. ERIN FAGAN</b></p> <p>Mailing Address 3034 FAIRFIELD ST</p> <p>City State Zip Code          PHILADELPHIA PA 19136-1120</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation          NJ STATE EMPLOYEES ADMN CLERICAL Information Requested</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">315.00</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">03 / 02 / 2015</span></p> <p><b>Transaction ID : C23618576</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">45.00</span></p>		
<p>Full Name (Last, First, Middle Initial)  <b>C. ERIN FAGAN</b></p> <p>Mailing Address 3034 FAIRFIELD ST</p> <p>City State Zip Code          PHILADELPHIA PA 19136-1120</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation          NJ STATE EMPLOYEES ADMN CLERICAL Information Requested</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">315.00</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">03 / 12 / 2015</span></p> <p><b>Transaction ID : C23618575</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">45.00</span></p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">240.00</span>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;"></span>		

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. ERIN FAGAN**

Mailing Address 3034 FAIRFIELD ST

City

PHILADELPHIA

State

PA

Zip Code

19136-1120

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NJ STATE EMPLOYEES ADMN CLERICAL

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

03 / 17 / 2015

Transaction ID : C23618577

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

## **B. SEAN GARY**

Mailing Address 405 N. MARGUERITA AVE #6

City

ALHAMBRA

State

CA

Zip Code

91801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PACIFIC BELL TEL CO

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 06 / 2015

Transaction ID : C23691620

Amount of Each Receipt this Period

100.00

\* Payroll Deduction: \$100 Monthly

Full Name (Last, First, Middle Initial)

## **C. MICHEAL J GENDRON**

Mailing Address 14 GULL STREET

City

HAUPPAUGE

State

NY

Zip Code

11788-1103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VERIZON-BELL ATLANTIC NORTH

Occupation

TELECOMMUNICATIONS T

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

03 / 31 / 2015

Transaction ID : C23639659

Amount of Each Receipt this Period

100.00

\* Payroll Deduction: \$20 Weekly

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

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

245.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. N M HALL**

Mailing Address 1431 GARDENSIDE DR

City  
DALLAS

State  
TX

Zip Code  
75217-3325

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SBC - SOUTH WESTERN BELL

Occupation

COMMUNICATIONS CONSU

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2015

Transaction ID : C23681614

Amount of Each Receipt this Period

195.00

\* Payroll Deduction: \$195 Monthly

Full Name (Last, First, Middle Initial)

**B. E A HARRIS**

Mailing Address 505 RIVERBEND BLVD

City

SAINT ALBANS

State

WV

Zip Code

25177-3574

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMM. WORKERS OF AMER.

Occupation

OPR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2015

Transaction ID : C23658474

Amount of Each Receipt this Period

80.00

\* Payroll Deduction: \$40 Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. ANN L. HILL**

Mailing Address 8718 GREENGRASS WAY

City

PARKER

State

CO

Zip Code

80134-3943

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMM. WORKERS OF AMER.

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2015

Transaction ID : C23691539

Amount of Each Receipt this Period

200.00

\* Payroll Deduction: \$100 Bi-Weekly

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

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

475.00

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

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FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

<p>Full Name (Last, First, Middle Initial)  <b>A. TERRI HILL</b></p> <p>Mailing Address 16 LEXINGTON DRIVE</p> <p>City State Zip Code          CLAYMONT DE 19703-0000</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation          VERIZON-BELL ATLANTIC DELAWARE SWITCH EQUIP TECH</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">210.00</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">03 / 31 / 2015</span></p> <p><b>Transaction ID : C23697434</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">75.00</span></p> <p>* Payroll Deduction: \$15 Weekly</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. THEODORE IZZO</b></p> <p>Mailing Address 4 DWYER LANE</p> <p>City State Zip Code          WAPPINGER FAL NY 12590-0000</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation          VERIZON-BELL ATLANTIC NORTH Information Requested</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">280.00</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">03 / 31 / 2015</span></p> <p><b>Transaction ID : C23647546</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p> <p>* Payroll Deduction: \$20 Weekly</p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. REGINALD JONES</b></p> <p>Mailing Address 40 WEAVER STREET</p> <p>City State Zip Code          SUMMIT NJ 07901</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation          NJ STATE EMPLOYEES ADMN CLERICAL FAMILY SERVICE SPECIALIST</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">203.00</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">03 / 27 / 2015</span></p> <p><b>Transaction ID : C23617771</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">87.00</span></p> <p>* Payroll Deduction: \$87 Bi-Weekly</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><span style="border: 1px solid black; padding: 2px;">262.00</span></p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p><span style="border: 1px solid black; padding: 2px;"></span></p>	

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JAMES C. JOYCE**

Mailing Address 122 WEED ST

City  
NEW CANAAN

State Zip Code  
CT 06840-6115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INTL (CWA STAFF)

Occupation

Technical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

03 / 19 / 2015

Transaction ID : C23701609

Amount of Each Receipt this Period

125.00

\* Payroll Deduction: \$62.5 Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. JOHN KLEIN**

Mailing Address 505 DELAWARE AVE. SUITE 201

City  
BUFFALO

State Zip Code  
NY 14202-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KALEIDA HEALTH SYSTEM

Occupation

RN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

03 / 19 / 2015

Transaction ID : C23652497

Amount of Each Receipt this Period

80.00

\* Payroll Deduction: \$40 Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. SHAWN LUDWIG**

Mailing Address 237 READING AVE

City  
BARRINGTON

State Zip Code  
NJ 08007-1127

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NJ STATE EMPLOYEES ADMN CLERICAL

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

03 / 02 / 2015

Transaction ID : C23618643

Amount of Each Receipt this Period

50.00

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

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

255.00

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SHAWN LUDWIG**

Mailing Address 237 READING AVE

City

BARRINGTON

State

NJ

Zip Code

08007-1127

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NJ STATE EMPLOYEES ADMN CLERICAL

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

03 / 12 / 2015

**Transaction ID : C23618642**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. SHAWN LUDWIG**

Mailing Address 237 READING AVE

City

BARRINGTON

State

NJ

Zip Code

08007-1127

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NJ STATE EMPLOYEES ADMN CLERICAL

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

03 / 17 / 2015

**Transaction ID : C23618644**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. STEVE MALDONADO**

Mailing Address 16040 WHITE MOUNTAIN PLACE

City

VICTORVILLE

State

CA

Zip Code

92394

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VERIZON-GTE OF CALIFORNIA

Occupation

CUSTOMER CONTACT ASS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

03 / 31 / 2015

**Transaction ID : C23692500**

Amount of Each Receipt this Period

90.00

\* Payroll Deduction: \$30 Bi-Weekly

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

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

190.00

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. FRANK MATHEWS**

Mailing Address 54449 HICKORY FLATS

City State Zip Code  
 WEST LAFAYETTE OH 43845-9784

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMERITECH

Occupation

Customer Services Sp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2015

**Transaction ID : C23673315**

Amount of Each Receipt this Period

80.00

\* Payroll Deduction: \$40 Monthly

Full Name (Last, First, Middle Initial)

## **B. AARICK MCCLOUD**

Mailing Address 14367 AUBURN ST

City State Zip Code  
 DETROIT MI 48223-2824

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMERITECH

Occupation

ACS Service Rep

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015

**Transaction ID : C23671619**

Amount of Each Receipt this Period

80.00

\* Payroll Deduction: \$80 Monthly

Full Name (Last, First, Middle Initial)

## **C. ANTHONY MISKOWSKI**

Mailing Address 1832 AMWELL RD

City State Zip Code  
 SOMERSET NJ 08873-2790

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NJ STATE EMPLOYEES ADMN CLERICAL

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 22 / 2015

**Transaction ID : C23617304**

Amount of Each Receipt this Period

216.00

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

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

376.00

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. EDWARD MOONEY**

Mailing Address 2602 BERWYN CT

City

VOORHEES

State

NJ

Zip Code

08043-4675

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMM. WORKERS OF AMER.

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 19 / 2015

Transaction ID : C23696835

Amount of Each Receipt this Period

100.00

\* Payroll Deduction: \$50 Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. RAFAEL NAVAR**

Mailing Address 501 3rd Street, NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMM. WORKERS OF AMER.

Occupation

Political Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

03 / 19 / 2015

Transaction ID : C23615966

Amount of Each Receipt this Period

100.00

\* Payroll Deduction: \$50 Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. THOMAS OAKLEY**

Mailing Address 38 COCHRAN AVE

City

SPRINGVILLE

State

NY

Zip Code

14141-1109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VERIZON-BELL ATLANTIC NORTH

Occupation

FIELD TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

03 / 31 / 2015

Transaction ID : C23645237

Amount of Each Receipt this Period

75.00

\* Payroll Deduction: \$15 Weekly

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

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

275.00

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. S R OLVERA**

Mailing Address 312 TRADEWINDS DR 2

City  
SAN JOSE

State Zip Code  
CA 95123-6065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PACIFIC BELL TEL CO

Occupation  
FACILITIES TECHNICIA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2015

Transaction ID : C23694609

Amount of Each Receipt this Period

70.00

\* Payroll Deduction: \$70 Monthly

Full Name (Last, First, Middle Initial)

**B. J.M. OMATSU**

Mailing Address 2971 KETCH PL

City  
OXNARD

State Zip Code  
CA 93035-3246

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
COMM. WORKERS OF AMER.

Occupation  
ASSIGNMENT CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2015

Transaction ID : C23695930

Amount of Each Receipt this Period

80.00

\* Payroll Deduction: \$40 Bi-Weekly

Full Name (Last, First, Middle Initial)

**C. SONDR PERRONE**

Mailing Address 27 GROVE RD

City  
ROCKY POINT

State Zip Code  
NY 11778-8920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VERIZON-BELL ATLANTIC NORTH

Occupation  
FIELD TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

Transaction ID : C23648199

Amount of Each Receipt this Period

75.00

\* Payroll Deduction: \$15 Weekly

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

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

225.00

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. ROBERT PINTO**

Mailing Address 5204 CHERRY HILL DRIVE

City State Zip Code  
 POUGHKEEPSIE NY 12603-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 VERIZON-TELESECTOR RESOURCES

Occupation  
 Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

Transaction ID : C23646951

Amount of Each Receipt this Period

75.00

\* Payroll Deduction: \$15 Weekly

Full Name (Last, First, Middle Initial)

## **B. KEITH PURCE**

Mailing Address 119 SEDGEWICK AVE 3D

City State Zip Code  
 YONKERS NY 10705-2660

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 VERIZON-BELL ATLANTIC NORTH

Occupation  
 TELECOMMUNICATIONS T

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

Transaction ID : C23621949

Amount of Each Receipt this Period

125.00

\* Payroll Deduction: \$25 Weekly

Full Name (Last, First, Middle Initial)

## **C. KRISTINE RAAB**

Mailing Address 1345 MERIDIAN PLACE, NW

City State Zip Code  
 WASHINGTON DC 20010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 COMM. WORKERS OF AMER.

Occupation  
 RESEARCHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 19 / 2015

Transaction ID : C23678339

Amount of Each Receipt this Period

80.00

\* Payroll Deduction: \$40 Bi-Weekly

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

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

280.00

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. DENNIS REITER**

Mailing Address 76 EMBER LN

City

WILLINGBORO

State

NJ

Zip Code

08046-2422

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NJ STATE EMPLOYEES ADMN CLERICAL

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2015

Transaction ID : C23617313

Amount of Each Receipt this Period

270.00

Full Name (Last, First, Middle Initial)

## **B. JOY R. ROBERTS**

Mailing Address N9648 BETTS RD

City

EAGLE

State

WI

Zip Code

53119-1943

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMERITECH

Occupation

Operator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2015

Transaction ID : C23674093

Amount of Each Receipt this Period

100.00

\* Payroll Deduction: \$50 Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. CLINTON ROGERS**

Mailing Address 4023 N 42ND ST

City

MILWAUKEE

State

WI

Zip Code

53216-1613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMERITECH SERV INC

Occupation

Maintenance Administ

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2015

Transaction ID : C23673978

Amount of Each Receipt this Period

80.00

\* Payroll Deduction: \$40 Bi-Weekly

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

450.00

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

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. AL-HADID ROLLINS**

Mailing Address 4032 SAPLING WAY

City  
TRIANGLE

State Zip Code  
VA 22172-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VERIZON-BELL ATLANTIC SOUTH MD

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

**Transaction ID : C23666670**

Amount of Each Receipt this Period

72.50

\* Payroll Deduction: \$14.5 Weekly

Full Name (Last, First, Middle Initial)

## **B. STEPHEN SCHEMBS**

Mailing Address 3321 MILITARY RD, NW

City  
Washington

State Zip Code  
DC 20015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
COMM. WORKERS OF AMER.

Occupation  
Legislative/Political Coordinator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2015

**Transaction ID : C23699598**

Amount of Each Receipt this Period

150.00

\* Payroll Deduction: \$75 Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. MICHAEL SCHULTE**

Mailing Address 30778 MOROSO DR

City  
WARREN

State Zip Code  
MI 48088-5849

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERITECH

Occupation  
CUSTOMER SERVICE SPEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2015

**Transaction ID : C23671795**

Amount of Each Receipt this Period

80.00

\* Payroll Deduction: \$40 Bi-Weekly

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

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

302.50

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. LISA SHAFER**

Mailing Address 15345 MAHAN CT

City State Zip Code  
Moorpark CA 93021-3202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CWA Local 9575

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2015

Transaction ID : C23695904

Amount of Each Receipt this Period

108.00

\* Payroll Deduction: \$36 Bi-Weekly

Full Name (Last, First, Middle Initial)

## **B. CHRISTOPHER M. SHELTON**

Mailing Address 929 DEAN AVE

City State Zip Code  
BRONX NY 10465-1609

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMM. WORKERS OF AMER.

Occupation

STAFF REP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2015

Transaction ID : C23624436

Amount of Each Receipt this Period

80.00

\* Payroll Deduction: \$40 Bi-Weekly

Full Name (Last, First, Middle Initial)

## **C. JANA SMITH**

Mailing Address 1619 S IVORY CIR  
UNITH

City State Zip Code  
AURORA CO 80017-5043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMM. WORKERS OF AMER.

Occupation

LOCAL OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2015

Transaction ID : C23701385

Amount of Each Receipt this Period

70.00

\* Payroll Deduction: \$35 Bi-Weekly

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

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

258.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

<p>Full Name (Last, First, Middle Initial)  <b>A. DIANNE SPENCE-BROWN</b></p> <p>Mailing Address 333 WEST STATE STREET  APT 8-G</p> <p>City TRENTON State NJ Zip Code 08618-5902</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer NJ STATE EMPLOYEES ADMN CLERICAL Occupation Information Requested</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  465.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  03 / 22 / 2015</p> <p><b>Transaction ID : C23617319</b></p> <p>Amount of Each Receipt this Period  460.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. DIANNE SPENCE-BROWN</b></p> <p>Mailing Address 333 WEST STATE STREET  APT 8-G</p> <p>City TRENTON State NJ Zip Code 08618-5902</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer NJ STATE EMPLOYEES ADMN CLERICAL Occupation Information Requested</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  465.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  03 / 27 / 2015</p> <p><b>Transaction ID : C23617320</b></p> <p>Amount of Each Receipt this Period  5.00</p> <p>* Payroll Deduction: \$5 Bi-Weekly</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. DAN SPINOSI</b></p> <p>Mailing Address 112 E MITHOFF ST</p> <p>City COLUMBUS State OH Zip Code 43206-3542</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AMERITECH Occupation Information Requested</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  269.22</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  03 / 06 / 2015</p> <p><b>Transaction ID : C23673135</b></p> <p>Amount of Each Receipt this Period  76.92</p> <p>* Payroll Deduction: \$76.92 Monthly</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		541.92
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CAROL L SUMMERLYN**

Mailing Address PO BOX 3997

City

PORTSMOUTH

State

VA

Zip Code

23701-0997

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMM. WORKERS OF AMER.

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2304.22

Date of Receipt

03 / 19 / 2015

Transaction ID : C23664639

Amount of Each Receipt this Period

35.00

\* Payroll Deduction: \$17.5 Bi-Weekly

Full Name (Last, First, Middle Initial)

**B. CAROL L SUMMERLYN**

Mailing Address PO BOX 3997

City

PORTSMOUTH

State

VA

Zip Code

23701-0997

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COMM. WORKERS OF AMER.

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2304.22

Date of Receipt

03 / 22 / 2015

Transaction ID : C23664638

Amount of Each Receipt this Period

800.20

Full Name (Last, First, Middle Initial)

**C. STEVEN THIEMANN**

Mailing Address 23 WINDSOR TER

City

YONKERS

State

NY

Zip Code

10701-1713

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VERIZON-BELL ATLANTIC NORTH

Occupation

FIELD TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

03 / 31 / 2015

Transaction ID : C23622181

Amount of Each Receipt this Period

100.00

\* Payroll Deduction: \$20 Weekly

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

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

935.20

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. BRANDLE TRIGG**

Mailing Address 6829 WOODCREEPER DR

City State Zip Code  
 ROANOKE VA 24019-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 VERIZON-BELL ATLANTIC SOUTH MD

Occupation  
 Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2015

Transaction ID : C23665399

Amount of Each Receipt this Period

75.00

\* Payroll Deduction: \$15 Weekly

Full Name (Last, First, Middle Initial)

## **B. KONYA VARNER**

Mailing Address 202 VINE LANE  
 LEFT

City State Zip Code  
 AMHERST NY 14228

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 FLINT HILL TECHNICAL UNIT

Occupation  
 Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2015

Transaction ID : C23653398

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

## **C. KONYA VARNER**

Mailing Address 202 VINE LANE  
 LEFT

City State Zip Code  
 AMHERST NY 14228

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 FLINT HILL TECHNICAL UNIT

Occupation  
 Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2015

Transaction ID : C23653399

Amount of Each Receipt this Period

12.00

\* Payroll Deduction: \$6 Monthly

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

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

117.00

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. KONYA VARNER**

Mailing Address 202 VINE LANE  
LEFT

City State Zip Code  
AMHERST NY 14228

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FLINT HILL TECHNICAL UNIT

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2015

**Transaction ID : C23653400**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

## **B. SANDRA WELCH-GOINS**

Mailing Address 11029 QUAILRIDGE CT APT 10

City State Zip Code  
CINCINNATI OH 45240-4639

FEC ID number of contributing  
federal political committee.

C

Name of Employer

B-WAY CORPORATION

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2015

**Transaction ID : C23704512**

Amount of Each Receipt this Period

80.00

\* Payroll Deduction: \$80 Monthly

Full Name (Last, First, Middle Initial)

## **C. JEFFREY WHITEHAIR**

Mailing Address 4923 UXTON CT

City State Zip Code  
STERLING HEIGHTS MI 48310-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMERITECH

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2015

**Transaction ID : C23671820**

Amount of Each Receipt this Period

70.00

\* Payroll Deduction: \$70 Monthly

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

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

180.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

<p>Full Name (Last, First, Middle Initial)  <b>A. J. D. WILLIAMS</b></p> <p>Mailing Address 1501 S WESTMORELAND</p> <p>City State Zip Code          DESOTO TX 75115-8517</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation          SBC - SOUTH WESTERN BELL COMMUNICATIONS TECHN</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">240.00</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">03 / 31 / 2015</span></p> <p><b>Transaction ID : C23681379</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">240.00</span></p>		
<p>Full Name (Last, First, Middle Initial)  <b>B. R G YOUNG</b></p> <p>Mailing Address 105 ELM STREET</p> <p>City State Zip Code          SOUTH CHARLESTON WV 25303-1614</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation          VERIZON-BELL ATLANTIC NTKW SERVICE ASSISTANT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">220.00</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">03 / 25 / 2015</span></p> <p><b>Transaction ID : C23658281</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">80.00</span></p> <p>* Payroll Deduction: \$20 Monthly</p>		
<p>Full Name (Last, First, Middle Initial)  <b>C.</b></p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;"></span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;"></span></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;"></span></p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">320.00</span>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">6471.48</span>		

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. Ann for Austin Campaign**

Mailing Address PO Box 150815

City State Zip Code  
 Austin TX 78715

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 04 2015

**Transaction ID : C23595240**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

## **B. CWA District 6 PEC**

Mailing Address The Terrace, Building One  
 2600 Via Fortuna, Ste. 260

City State Zip Code  
 Austin TX 78746

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

23340.53

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 04 2015

**Transaction ID : C23595242**

Amount of Each Receipt this Period

700.00

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

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

850.00

850.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CWA Local 6450**

Mailing Address 600 SW Jefferson Suite 201

City Lees Summit      State MO      Zip Code 64063

Purpose of Disbursement  
Reimb. for Membership COPE Fundraising

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03      25      2015
**Transaction ID : D29040**

Amount of Each Disbursement this Period

417.44

Full Name (Last, First, Middle Initial)

**B. D.C. Treasurer**
Mailing Address Ben Franklin Station  
P.O. Box 679

City Washington      State DC      Zip Code 20044-0679

Purpose of Disbursement  
DC Tax Payment

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03      13      2015
**Transaction ID : D29083**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. NGP Software, Inc.**

Mailing Address 1101 15TH STREET, NW, SUITE 500

City Washington      State DC      Zip Code 20005

Purpose of Disbursement  
FEC Reporting Software

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03      04      2015
**Transaction ID : D29042**

Amount of Each Disbursement this Period

2150.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2817.44

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Olson Hagel and Fishburn**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	3				3	1						2	0	1	5

Mailing Address 555 CAPITOL MALL STE 1425

City	State	Zip Code
SACRAMENTO	CA	95814-4602

**Transaction ID : D29053**Purpose of Disbursement  
Legal Retainer Fee

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

23.82

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. Public Affairs Support Services**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	3				3	1						2	0	1	5

Mailing Address 1950 Roland Clarke Place, Suite 30

City	State	Zip Code
Reston	VA	20191

**Transaction ID : D29055**Purpose of Disbursement  
CWA-COPE Compliance Review

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

823.18

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)

**C. Public Affairs Support Services**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	3				0	4						2	0	1	5

Mailing Address 1950 Roland Clarke Place, Suite 30

City	State	Zip Code
Reston	VA	20191

**Transaction ID : D29073**Purpose of Disbursement  
CWA-COPE Compliance Review

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1203.75

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:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2050.75



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Gallego for Arizona**

Mailing Address PO Box 1710

City	State	Zip Code
Phoenix	AZ	85001

Purpose of Disbursement  
Federal Candidate Contribution 2014

Candidate Name

**Ruben Gallego**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2015

**Transaction ID : D28881**

Amount of Each Disbursement this Period

-5000.00
----------

VOID CK 22625 Orig 7/14

Full Name (Last, First, Middle Initial)

**B. KIRKPATRICK FOR ARIZONA**

Mailing Address PO BOX 12011

City	State	Zip Code
Casa Grande	AZ	85130

Purpose of Disbursement  
Federal Candidate Contribution 2014

Candidate Name

**Ann Kirkpatrick**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2015

**Transaction ID : D28879**

Amount of Each Disbursement this Period

-5000.00
----------

VOID CK 22574 Orig 6/14

Full Name (Last, First, Middle Initial)

**C. KYRSTEN SINEMA FOR CONGRESS**

Mailing Address PO BOX 25879

City	State	Zip Code
Tempe	AZ	85285

Purpose of Disbursement  
Federal Candidate Contribution 2014

Candidate Name

**KYRSTEN SINEMA**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2015

**Transaction ID : D28880**

Amount of Each Disbursement this Period

-2500.00
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VOID CK 22581 Orig 6/14

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

-12500.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 44

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. RON BARBER FOR CONGRESS**

Mailing Address PO BOX 57715

City	State	Zip Code
Tucson	AZ	85732

Purpose of Disbursement  
Federal Candidate Contribution 2014

Candidate Name

**Ronald Barber**

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: AZ	District: 08

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

011

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2015

**Transaction ID : D28878**

Amount of Each Disbursement this Period

-2500.00
----------

VOID CK 22579 Orig 6/14

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

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) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

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) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-2500.00
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-15000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Adrienne Bell Campaign**

Mailing Address 10223 Broadway - Suite P315

City	State	Zip Code
Pearland	TX	77584

Purpose of Disbursement  
Non-Federal Candidate Contrib 2015

Candidate Name

**Adrienne BELL**Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2015

**Transaction ID : D29050**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. ADT LLC**

Mailing Address 1501 Yamato Road

City	State	Zip Code
Boca Raton	FL	33431

Purpose of Disbursement  
Refund of Mistaken Deposit

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

**Transaction ID : D29084**

Amount of Each Disbursement this Period

5585.89
---------

Full Name (Last, First, Middle Initial)

**C. Alan Rosen Campaign**

Mailing Address PO Box 270191

City	State	Zip Code
Houston	TX	77277

Purpose of Disbursement  
Non-Federal Candidate Contrib 2016

Candidate Name

**Alan Rosen**Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2015

**Transaction ID : D29077**

Amount of Each Disbursement this Period

500.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7085.89
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Alison for Kentucky**

Mailing Address P.O. Box 1867

City	State	Zip Code
Lexington	KY	40588

Purpose of Disbursement  
Non-Federal Candidate Contrib 2015

Candidate Name

**Alison Lunderman Grimes**Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

State: KY District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

**Transaction ID : D29087**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. ANDY BESHEAR FOR ATTORNEY GENERAL**

Mailing Address PO BOX 4633

City	State	Zip Code
Louisville	KY	40204

Purpose of Disbursement  
Non-Federal Candidate Contrib 2015

Candidate Name

**ANDY BESHEAR**Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☒ General  
☐ Other (specify) ▼

State: KY District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

**Transaction ID : D29058**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Austin for Mayor**

Mailing Address 2483 Alexandria Place Parkway

City	State	Zip Code
Saint Louis	MO	63136

Purpose of Disbursement  
Non-Federal Candidate Contrib 2015

Candidate Name

**Yolanda Austin**Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2015

**Transaction ID : D29056**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00
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	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

500.00

2500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Citizens for Patricia Bynes**

Mailing Address 10044F Neville Walk

City	State	Zip Code
Saint Louis	MO	63136

Purpose of Disbursement  
Non-Federal Candidate Contrib 2015

Candidate Name

**Patricia Bynes**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2015

**Transaction ID : D29071**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. CODY RAY WHEELER FOR CITY COUNCIL**

Mailing Address 2007 South Rayburn Ct

City	State	Zip Code
Pasadena	TX	77502

Purpose of Disbursement  
Non-Federal Candidate Contrib 2015

Candidate Name

**CODY R WHEELER**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2015

**Transaction ID : D29068**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Conway Overly for Kentucky**

Mailing Address 221 S. Hurstbourne Parkway, Suite

City	State	Zip Code
Louisville	KY	40222

Purpose of Disbursement  
Non-Federal Candidate Contrib 2015

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: KY District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2015

**Transaction ID : D29054**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 36 OF 44

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CWA DISTRICT 1 PAC-Non Fed.**

Mailing Address 80 PINE STREET, 37TH FLOOR

City	State	Zip Code
New York	NY	10005

Purpose of Disbursement  
Non-Federal Committee Contrib 2015

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2015

**Transaction ID : D29052**

Amount of Each Disbursement this Period

45000.00
----------

Full Name (Last, First, Middle Initial)

**B. CWA District 4 PEC (Illinois)**

Mailing Address 20525 Center Ridge Road Suite 700

City	State	Zip Code
Rocky River	OH	44116

Purpose of Disbursement  
Non-Federal Committee 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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

**Transaction ID : D29091**

Amount of Each Disbursement this Period

15000.00
----------

Full Name (Last, First, Middle Initial)

**C. CWA Michigan Action Committee**

Mailing Address 20525 Center Ridge Rd. #700

City	State	Zip Code
Cleveland	OH	44116

Purpose of Disbursement  
Non-Federal Committee Contrib 2015

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) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2015

**Transaction ID : D29044**

Amount of Each Disbursement this Period

5000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

65000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 44

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CWA Ohio Legislative Action Committee**

Mailing Address 20525 Center Ridge Road, #700

City	State	Zip Code
Cleveland	OH	44116

Purpose of Disbursement  
Non-Federal Committee Contrib 2015

011

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2015

**Transaction ID : D29045**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. CWA Ohio Legislative Action Committee**

Mailing Address 20525 Center Ridge Road, #700

City	State	Zip Code
Cleveland	OH	44116

Purpose of Disbursement  
Non-Federal Committee Contrib 2015

011

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2015

**Transaction ID : D29069**

Amount of Each Disbursement this Period

300.00
--------

Full Name (Last, First, Middle Initial)

**C. CWA Ohio Legislative Action Committee**

Mailing Address 20525 Center Ridge Road, #700

City	State	Zip Code
Cleveland	OH	44116

Purpose of Disbursement  
Non-Federal Committee Contrib 2015

011

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2015

**Transaction ID : D29088**

Amount of Each Disbursement this Period

2300.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4600.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 38 OF 44

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CWA Ohio Legislative Action Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		13		2015

Mailing Address 20525 Center Ridge Road, #700

City	State	Zip Code
Cleveland	OH	44116

**Transaction ID : D29080**Purpose of Disbursement  
Non-Federal Committee Contrib 2015

011

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1250.00

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. CWA Wisconsin Legislative Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2015

Mailing Address 20525 Center Ridge Road, Room 700

City	State	Zip Code
Cleveland	OH	44116

**Transaction ID : D29072**Purpose of Disbursement  
Non-Federal Committee Contrib 2015

011

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

2500.00

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)

**C. DALLAS COUNTY DEMOCRATIC PARTY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2015

Mailing Address 4209 PARRY AVENUE

City	State	Zip Code
DALLAS	TX	75223

**Transaction ID : D29048**Purpose of Disbursement  
Non-Federal Committee Contrib 2015

011

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

10000.00

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: TX District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

13750.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 39 OF 44

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Fannie Lou Hamer Coalition**

Mailing Address PO Box 8442

City	State	Zip Code
Saint Louis	MO	63132

Purpose of Disbursement  
Non-Federal Committee Contrib 2015

011

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	25	/	2015

**Transaction ID : D29065**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Friends of Ella M. Jones**

Mailing Address 554 Monceau Drive

City	State	Zip Code
Saint Louis	MO	63135

Purpose of Disbursement  
Non-Federal Candidate Contrib 2015

011

Candidate Name

Category/  
Type**ELLA JONES**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	13	/	2015

**Transaction ID : D29064**

Amount of Each Disbursement this Period

7000.00
---------

Full Name (Last, First, Middle Initial)

**C. Garcia For Chicago**

Mailing Address 651 W Washington Blvd

City	State	Zip Code
Chicago	IL	60661

Purpose of Disbursement  
Non-Federal Candidate Contrib 2015

011

Candidate Name

Category/  
Type**Jesus Garcia**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: IL District:

Runoff

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	13	/	2015

**Transaction ID : D29051**

Amount of Each Disbursement this Period

15000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

23000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Greene County Democrats Central Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Mailing Address 1764 S. Fremont Avenue

City	State	Zip Code
Springfield	MO	65804

Purpose of Disbursement  
Non-Federal Committee Contrib 2015

011

Candidate Name

Category/  
Type**Transaction ID : D29041**

Amount of Each Disbursement this Period

200.00
--------

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. Greene County Democrats Central Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2015

Mailing Address 1764 S. Fremont Avenue

City	State	Zip Code
Springfield	MO	65804

Purpose of Disbursement  
Non-Federal Committee Contrib 2015

011

Candidate Name

Category/  
Type**Transaction ID : D29060**

Amount of Each Disbursement this Period

200.00
--------

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)

**C. Greene County Democrats Central Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2015

Mailing Address 1764 S. Fremont Avenue

City	State	Zip Code
Springfield	MO	65804

Purpose of Disbursement  
Non-Federal Committee Contrib 2015

011

Candidate Name

Category/  
Type**Transaction ID : D29081**

Amount of Each Disbursement this Period

200.00
--------

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:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

600.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Hazel Erby for County Council**

Mailing Address 7010 Washington Avenue

City	State	Zip Code
Saint Louis	MO	63130

Purpose of Disbursement  
Non-Federal Candidate Contrib 2014

011

Candidate Name

**Hazel Erby**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State: MO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2015

**Transaction ID : D29043**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Jackson County Democratic Committee**

Mailing Address 308 W. Maple Suite 101

City	State	Zip Code
Independence	MO	64050

Purpose of Disbursement  
Non-Federal Committee Contrib 2015

011

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2015

**Transaction ID : D29079**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Kyle Carter Campaign**

Mailing Address 1 Greenway Plaza, Ste 740

City	State	Zip Code
Houston	TX	77046

Purpose of Disbursement  
Non-Federal Candidate Contrib 2016

011

Candidate Name

**Kyle Carter**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	13	/	2015

**Transaction ID : D29085**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Missouri Progressive Vote Coalition, Inc.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2015

Mailing Address 431 S. Jefferson Ave.

City	State	Zip Code
Springfield	MO	65806

**Transaction ID : D29039**Purpose of Disbursement  
Non-Federal Committee Contrib 2015

011

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

300.00
--------

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. Missouri ProVote**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2015

Mailing Address 5585 Pershing Ave #120

City	State	Zip Code
Saint Louis	MO	63112

**Transaction ID : D29049**Purpose of Disbursement  
Non-Federal Committee Contrib 2015

011

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1500.00
---------

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)

**C. NEVADA STATE AFL-CIO**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2015

Mailing Address 602 E. JOHN STREET

City	State	Zip Code
Carson City	NV	89706

**Transaction ID : D29075**Purpose of Disbursement  
Non-Federal Committee Contrib 2015

011

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

15000.00
----------

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:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

16800.00
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	21b		22		23		24		25		26
	27		28a		28b		28c	X	29		30b

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SOUTH BAY LABOR COUNCIL COMMITTEE**

Mailing Address 2102 ALAMDEN RD STE 114

City	State	Zip Code
San Jose	CA	95125

Purpose of Disbursement  
Non-Federal Committee Contrib 2015

011

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2015

**Transaction ID : D29086**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. Southeast Missouri Central Labor Council**

Mailing Address PO Box 1242

City	State	Zip Code
Cape Girardeau	MO	63702

Purpose of Disbursement  
Non-Federal Committee Contrib 2015

011

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2015

**Transaction ID : D29070**

Amount of Each Disbursement this Period

700.00
--------

Full Name (Last, First, Middle Initial)

**C. Supporters for Lee Smith**

Mailing Address 10044 F Neville Walk

City	State	Zip Code
Saint Louis	MO	63136

Purpose of Disbursement  
Non-Federal Candidate Contrib 2015

011

Candidate Name

Category/  
Type**LEE SMITH**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2015	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: MO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2015

**Transaction ID : D29066**

Amount of Each Disbursement this Period

5000.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶

8200.00
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**TOTAL** This Period (last page this line number only).....▶

153835.89
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