

# 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

Amalgamated Transit Union - COPE

ADDRESS (number and street) 10000 New Hampshire Ave.

Check if different than previously reported. (ACC) Silver Spring MD 20903

2. **FEC IDENTIFICATION NUMBER ▼** C C00032995 **CITY ▲** **STATE ▲** **ZIP CODE ▲**

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

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

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

<input checked="" type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

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

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on M M M / D D D / Y Y Y Y Y Y in the State of  

(d) 30-Day **POST-Election** Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
--	---------------------------------------	--

Election on M M M / D D D / 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 01 / 01 / 2020 through M M M / D D D / Y Y Y Y Y Y 01 / 31 / 2020

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 Costa, John, , ,

Signature of Treasurer Costa, John, , , *[Electronically Filed]* Date M M M / D D D / Y Y Y Y Y Y 02 / 19 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Amalgamated Transit Union - COPE**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		476117.79
(b) Cash on Hand at Beginning of Reporting Period.....	476117.79	
(c) Total Receipts (from Line 19) .....	75252.17	75252.17
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	551369.96	551369.96
7. Total Disbursements (from Line 31).....	97258.02	97258.02
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	454111.94	454111.94
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

Amalgamated Transit Union - COPE

Report Covering the Period: From: 01 / 01 / 2020 To: 01 / 31 / 2020

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).....	225.00	225.00
(ii) Unitemized .....	50647.17	50647.17
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	50872.17	50872.17
(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) .....	50872.17	50872.17
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	24380.00	24380.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	75252.17	75252.17
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	75252.17	75252.17

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	18.02	18.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	18.02	18.02
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	43500.00	43500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	53740.00	53740.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	97258.02	97258.02
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	97258.02	97258.02

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	50872.17	50872.17
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	50872.17	50872.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	18.02	18.02
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	18.02	18.02

**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 15  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Amalgamated Transit Union - COPE**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Price, Kenneth, J, ,

Mailing Address 15648 11T AVENUE SW

City Burien	State WA	Zip Code 98166
----------------	-------------	-------------------

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

Name of Employer (for Individual) KING COUNTY DOT-METRO TRANSIT	Occupation (for Individual) OPERATOR
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01	/	24	/	2020

**Transaction ID : VSGZEK165H1**

Amount of Each Receipt this Period  
225.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	225.00

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

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

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NAME OF COMMITTEE (In Full)  
**Amalgamated Transit Union - COPE**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Broward County Board of County Commissioners**

Mailing Address 115 S Andrews Ave  
Ste 203

City Fort Lauderdale State FL Zip Code 33301-1801

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
24380.00

Date of Receipt  
01 / 06 / 2020

**Transaction ID : VSGZEKN7C10**

Amount of Each Receipt this Period  
24380.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	24380.00
<b>TOTAL</b> This Period (last page this line number only).....	24380.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17

Transaction ID : VSGZEKN7C10

Funds deposited in error (Refunded 1/24/20)

Form/Schedule:

Transaction ID:



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Amalgamated Transit Union - COPE**

Full Name (Last, First, Middle Initial) <b>A. Al Lawson for Congress</b>		Date of Disbursement MM / DD / YYYY 01 / 17 / 2020
Mailing Address 400 N Adams St		FEC Identification Number <b>C</b> C00460261 <b>Transaction ID : VSG06A0F32</b> Amount of Each Disbursement this Period 2500.00
City Tallahassee	State FL	
Zip Code 32301-1162		Memo Item <input type="checkbox"/>
Purpose of Disbursement Contribution		
Candidate Name <b>Lawson, Alfred, , , Jr.</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 05	

Full Name (Last, First, Middle Initial) <b>B. Barragan for Congress</b>		Date of Disbursement MM / DD / YYYY 01 / 20 / 2020
Mailing Address 1840 S Gaffey St # 421		FEC Identification Number <b>C</b> C00577353 <b>Transaction ID : VSG06A0FEH</b> Amount of Each Disbursement this Period 2000.00
City San Pedro	State CA	
Zip Code 90731-5324		Memo Item <input type="checkbox"/>
Purpose of Disbursement Contribution		
Candidate Name <b>Barragan, Nanette, , ,</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 44	

Full Name (Last, First, Middle Initial) <b>C. Elaine for Congress</b>		Date of Disbursement MM / DD / YYYY 01 / 09 / 2020
Mailing Address PO Box 66191		FEC Identification Number <b>C</b> C00664375 <b>Transaction ID : VSG06A0CQ</b> Amount of Each Disbursement this Period 2500.00
City Virginia Beach	State VA	
Zip Code 23466-6191		Memo Item <input type="checkbox"/>
Purpose of Disbursement Contribution		
Candidate Name <b>Luria, Elaine, , ,</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA	District: 02	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Amalgamated Transit Union - COPE**

**A. Friends Of Dick Durbin**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1949

City Springfield State IL Zip Code 62705-1949

Purpose of Disbursement Contribution

Candidate Name **DURBIN, RICHARD J, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: IL District: 00

Date of Disbursement: 01 / 28 / 2020

FEC Identification Number: **C00148999**  
Transaction ID : **VSG06A0H57**  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**B. Friends Of Sherrod Brown**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 15293

City Washington State DC Zip Code 20003-0293

Purpose of Disbursement Contribution

Candidate Name **Brown, Sherrod, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify) ▼

State: OH District:

Date of Disbursement: 01 / 22 / 2020

FEC Identification Number: **C00264697**  
Transaction ID : **VSG06A0FXG**  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. Mario Diaz-Balart For Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address 8724 SW 72nd St # 420

City Miami State FL Zip Code 33173-3512

Purpose of Disbursement Contribution

Candidate Name **Diaz-Balart, Mrio, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: FL District: 25

Date of Disbursement: 01 / 22 / 2020

FEC Identification Number: **C00376087**  
Transaction ID : **VSG06A0FXI**  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 12500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Amalgamated Transit Union - COPE**

Full Name (Last, First, Middle Initial)

**A. Max Rose for Congress**

Mailing Address PO Box 100496

City  
Staten Island

State  
NY

Zip Code  
10310-0496

Purpose of Disbursement  
Contribution

Candidate Name

**Rose, Max, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: NY District: 11

Date of Disbursement

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

FEC Identification Number

**C** C00652248

**Transaction ID : VSG06A0G69**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. PETE AGUILAR FOR CONGRESS**

Mailing Address PO Box 10954

City  
San Bernardino

State  
CA

Zip Code  
92423-0954

Purpose of Disbursement  
Contribution

Candidate Name

**AGUILAR, PETE, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify)

State: CA District: 31

Date of Disbursement

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

FEC Identification Number

**C** C00510461

**Transaction ID : VSG06A0F2P**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Price for Congress**

Mailing Address PO Box 1986

City  
Raleigh

State  
NC

Zip Code  
27602-1986

Purpose of Disbursement  
Contribution

Candidate Name

**Price, David, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: NC District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	6		2	0	2	0

FEC Identification Number

**C** C00195628

**Transaction ID : VSG06A0ER:**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

9000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Amalgamated Transit Union - COPE**

Full Name (Last, First, Middle Initial) <b>A. Robin Kelly For Congress</b>		Date of Disbursement MM / DD / YYYY 01 / 28 / 2020
Mailing Address PO Box 6953		FEC Identification Number C00539866 <b>Transaction ID : VSG06A0H56</b> Amount of Each Disbursement this Period 2500.00
City Chicago	State IL	Zip Code 60680-6953
Purpose of Disbursement Contribution		Category/ Type
Candidate Name <b>Kelly, Robin, , ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 02	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. Rosen for Nevada</b>		Date of Disbursement MM / DD / YYYY 01 / 09 / 2020
Mailing Address PO Box 27195		FEC Identification Number C00606939 <b>Transaction ID : VSG06A0CM7</b> Amount of Each Disbursement this Period 2500.00
City Las Vegas	State NV	Zip Code 89126-1195
Purpose of Disbursement Contribution		Category/ Type
Candidate Name <b>Rosen, Jacky, , ,</b>		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NV	District:	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. Transportation Trades Department AFL-CIO Political Action Committee (TTD/PAC)</b>		Date of Disbursement MM / DD / YYYY 01 / 24 / 2020
Mailing Address 815 16th St NW FI 4		FEC Identification Number C00280909 <b>Transaction ID : VSG06A0G8:</b> Amount of Each Disbursement this Period 5000.00
City Washington	State DC	Zip Code 20006-4101
Purpose of Disbursement Contribution		Category/ Type
Candidate Name Transportation Trades Department AFL-CIO Political Action Committee (TTD/PAC)		
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:	
<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**Amalgamated Transit Union - COPE**

**A. Van Hollen for Senate**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: MM / DD / YYYY  
01 / 09 / 2020

Mailing Address: 10605 Concord St Ste 202  
City: Kensington State: MD Zip Code: 20895-2526

Purpose of Disbursement: Contribution  
Candidate Name: Van Hollen, Chris, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2022  
 Primary  General  Other (specify) ▼

State: MD District:   
FEC Identification Number: C00573758  
Transaction ID: VSG06A0CQI  
Amount of Each Disbursement this Period: 5000.00  
 Memo Item

**B.**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: MM / DD / YYYY

Mailing Address  
City: State: Zip Code:

Purpose of Disbursement  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:   
FEC Identification Number: C  
Amount of Each Disbursement this Period:  
 Memo Item

**C.**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: MM / DD / YYYY

Mailing Address  
City: State: Zip Code:

Purpose of Disbursement  
Candidate Name  
Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:   
FEC Identification Number: C  
Amount of Each Disbursement this Period:  
 Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	43500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Amalgamated Transit Union - COPE**

**A. Broward County Board of County Commissioners**

Full Name (Last, First, Middle Initial)

Mailing Address 115 S Andrews Ave  
Ste 203

City Fort Lauderdale State FL Zip Code 33301-1801

Purpose of Disbursement Refund for Funds Deposited in Error

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 02 / 2020

FEC Identification Number: C

Transaction ID : VSG06A0B8F

Amount of Each Disbursement this Period: 24360.00

Memo Item

**B. Broward County Board of County Commissioners**

Full Name (Last, First, Middle Initial)

Mailing Address 115 S Andrews Ave  
Ste 203

City Fort Lauderdale State FL Zip Code 33301-1801

Purpose of Disbursement Refund for Funds Deposited in Error

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 24 / 2020

FEC Identification Number: C

Transaction ID : VSG06A0JD8

Amount of Each Disbursement this Period: 24380.00

Memo Item

**C. Friends of Jeff Waldstreicher**

Full Name (Last, First, Middle Initial)

Mailing Address 1215 E Fort Ave  
Ste 303

City Baltimore State MD Zip Code 21230-5281

Purpose of Disbursement Non-Federal Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 07 / 2020

FEC Identification Number: C

Transaction ID : VSG06A09P4

Amount of Each Disbursement this Period: 2500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 51240.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Amalgamated Transit Union - COPE**

Full Name (Last, First, Middle Initial)  
**A. Friends of Jim Rosapepe**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		07		2020

Mailing Address PO Box 700

FEC Identification Number

**C** [ ]  
**Transaction ID : VSG06A0BDK**  
 Amount of Each Disbursement this Period  
 [ ] 2500.00

City College Park State MD Zip Code 20741-0700

Purpose of Disbursement  
Non-Federal Contribution

[ ]  
Category/  
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Sittenfeld for Cincinnati**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		09		2020

Mailing Address 100 E Central Pkwy Ste 514

FEC Identification Number

**C** [ ]  
**Transaction ID : VSG06A0CR7**  
 Amount of Each Disbursement this Period  
 [ ] 1000.00

City Cincinnati State OH Zip Code 45202-7257

Purpose of Disbursement  
Non-Federal Contribution

[ ]  
Category/  
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Wilson4Assessor**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		24		2020

Mailing Address PO Box 1491

FEC Identification Number

**C** [ ]  
**Transaction ID : VSG06A0JD!**  
 Amount of Each Disbursement this Period  
 [ ] - 1000.00

City Auburn State WA Zip Code 98071-1491

Purpose of Disbursement  
Voided Check from 9/9/19

[ ]  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2019  Primary  General  Other (specify) ▼  
 State: District:

Memo Item

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

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

2500.00
53740.00