

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.
UTILITY WORKERS UNION OF AMERICA COPE

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** **CITY** **STATE** **ZIP CODE**
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) 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) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day **POST-Election** Report for the: General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer MICHAEL COLEMAN

Signature of Treasurer MICHAEL COLEMAN [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

UTILITY WORKERS UNION OF AMERICA 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="2016"/>		<input type="text" value="183134.51"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="195620.49"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="12292.10"/>	<input type="text" value="25278.08"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="207912.59"/>	<input type="text" value="208412.59"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5600.00"/>	<input type="text" value="6100.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="202312.59"/>	<input type="text" value="202312.59"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

UTILITY WORKERS UNION OF AMERICA COPE

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2490.22	2693.60
(ii) Unitemized	9801.88	21584.48
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	12292.10	24278.08
(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)	12292.10	24278.08
12. Transfers From Affiliated/Other Party Committees.....	0.00	1000.00
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.).....	0.00	0.00
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))..... ▶	12292.10	25278.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	12292.10	25278.08

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	2500.00
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	3100.00	3600.00
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)) ..	5600.00	6100.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5600.00	6100.00

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)	12292.10	24278.08
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12292.10	24278.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
UTILITY WORKERS UNION OF AMERICA COPE

A. GERALD ACOSTA
Full Name (Last, First, Middle Initial)

Mailing Address 407 E. SAINT JOHN ROAD

City PHOENIX State AZ Zip Code 85022

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

Name of Employer UWUA Occupation NATINAL REP.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **249.24**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 29 / 2016

Transaction ID : SA11AI.6249

Amount of Each Receipt this Period
124.62

Memo Item
 PAYROLL DEDUCTION

B. MARK BROOKS
Full Name (Last, First, Middle Initial)

Mailing Address 521 CENTRAL AVENUE

City NASHVILLE State TN Zip Code 37211

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

Name of Employer UWUA Occupation NATL. REP.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **274.40**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 29 / 2016

Transaction ID : SA11AI.6250

Amount of Each Receipt this Period
137.20

Memo Item
 PAYROLL DEDUCTION

C. KELLY COOPER
Full Name (Last, First, Middle Initial)

Mailing Address 520 MCNEILAN ROAD

City WEST UNION State OH Zip Code 45693

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

Name of Employer UWUA Occupation EXB MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **228.68**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 29 / 2016

Transaction ID : SA11AI.6251

Amount of Each Receipt this Period
114.34

Memo Item
 PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....	376.16
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
UTILITY WORKERS UNION OF AMERICA COPE

A. RICHARD COSSELL
Full Name (Last, First, Middle Initial)

Mailing Address 284 MT. ETNA ROAD

City SMITHTON State PA Zip Code 15479

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

Name of Employer UWUA Occupation NATL REP.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **228.68**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.6252

Amount of Each Receipt this Period
 114.34

Memo Item
PAYROLL DEDUCTION

B. PATRICK DILLON
Full Name (Last, First, Middle Initial)

Mailing Address 3534 TWIN SPRUCE DR.

City KALAMAZOO State MI Zip Code 49004

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

Name of Employer UWUA Occupation EXB MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **327.24**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.6245

Amount of Each Receipt this Period
 163.62

Memo Item
EXB MEMBER CONTRIBUTION

C. JOHN DUFFY
Full Name (Last, First, Middle Initial)

Mailing Address 286 HOWARD ST.

City WASHINGTON TOWNSHIP State NJ Zip Code 07676

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

Name of Employer Utility Workers Union of Ameri Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **399.86**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 29 / 2016

Transaction ID : SA11AI.6254

Amount of Each Receipt this Period
 196.48

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... **474.44**

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

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

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

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NAME OF COMMITTEE (In Full)
UTILITY WORKERS UNION OF AMERICA COPE

A. SHAWN GARVEY
Full Name (Last, First, Middle Initial)
Mailing Address 16 GRAND AVENUE

City LYNBROOK	State NY	Zip Code 11563
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FEC ID number of contributing federal political committee. **C**

Name of Employer UWUA	Occupation NATL. REPR.
--------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
249.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	29	/	2016

Transaction ID : SA11AI.6255

Amount of Each Receipt this Period
124.62

Memo Item
PAYROLL DEDUCTION

B. JAMES GENNETT
Full Name (Last, First, Middle Initial)
Mailing Address 319 DIANA COURT

City BENSONVILLE	State IL	Zip Code 60106
---------------------	-------------	-------------------

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

Name of Employer UWUA	Occupation NATL. REPR.
--------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
249.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	29	/	2016

Transaction ID : SA11AI.6256

Amount of Each Receipt this Period
124.62

Memo Item
PAYROLL DEDUCTION

C. RICHARD HARKINS
Full Name (Last, First, Middle Initial)
Mailing Address 21557 SHEFFIELD

City FARMINGTON HILLS	State MI	Zip Code 48335
--------------------------	-------------	-------------------

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

Name of Employer UWUA	Occupation EXB MEMBER
--------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
327.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	29	/	2016

Transaction ID : SA11AI.6246

Amount of Each Receipt this Period
163.62

Memo Item
EXB MEMBER CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	412.86
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 9 OF 14
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UTILITY WORKERS UNION OF AMERICA COPE

Full Name (Last, First, Middle Initial)
A. JAMES HARRISON

Mailing Address 3539 ARMOUR

City PORT HURON State MI Zip Code 48060

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

Name of Employer UTILITY WORKERS UNION OF AMERI Occupation NATL. REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **249.24**

Date of Receipt
02 / 29 / 2016

Transaction ID : SA11AI.6257

Amount of Each Receipt this Period
124.62

Memo Item
PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)
B. ROBERT HOUSER

Mailing Address 42 RAVENWOOD BLVD

City BARNEGAT State NJ Zip Code 08005

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

Name of Employer UWUA Occupation NATL. REP.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **249.24**

Date of Receipt
02 / 29 / 2016

Transaction ID : SA11AI.6258

Amount of Each Receipt this Period
124.62

Memo Item
PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)
C. DANIEL HURLEY

Mailing Address 101 ARBUTUS AVENUE

City BRAINTREE State MA Zip Code 02184

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

Name of Employer UTILITY WORKERS UNION OF AMERI Occupation NATL. REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **249.24**

Date of Receipt
02 / 29 / 2016

Transaction ID : SA11AI.6259

Amount of Each Receipt this Period
124.62

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ▶ **373.86**

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

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

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

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NAME OF COMMITTEE (In Full)
UTILITY WORKERS UNION OF AMERICA COPE

A. LEONIDAS LABELLE
Full Name (Last, First, Middle Initial)

Mailing Address 1977 YALE AVENUE

City WILLIAMSPORT State PA Zip Code 17701

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

Name of Employer Utility Workers Union of Ameri Occupation National Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 249.24

Date of Receipt 02 / 29 / 2016
Transaction ID : SA11AI.6261

Amount of Each Receipt this Period 124.62

Memo Item
PAYROLL DEDUCTION

B. JAMES LEWIS
Full Name (Last, First, Middle Initial)

Mailing Address 2120 LONDERGRAN STREET

City PITTSBURGH State PA Zip Code 15216

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

Name of Employer UWUA Occupation NAT. REP.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 249.24

Date of Receipt 02 / 29 / 2016
Transaction ID : SA11AI.6262

Amount of Each Receipt this Period 124.62

Memo Item
PAYROLL DEDUCTION

C. ROBERT MAHONEY
Full Name (Last, First, Middle Initial)

Mailing Address 217 PONDEROSA AVENUE

City HANOVER State MA Zip Code 02339

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

Name of Employer UWUA Occupation NATL. REP.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 249.24

Date of Receipt 02 / 29 / 2016
Transaction ID : SA11AI.6263

Amount of Each Receipt this Period 124.62

Memo Item
PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional).....▶	373.86
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 12 OF 14
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
UTILITY WORKERS UNION OF AMERICA COPE

A. CARL WOOD
Full Name (Last, First, Middle Initial)
Mailing Address 10103 LIVE OAK AVENUE
City CHERRY VALLEY State CA Zip Code 92223
FEC ID number of contributing federal political committee. **C**
Name of Employer UWUA Occupation NATL. REP.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 236.60

Date of Receipt 02 / 29 / 2016
Transaction ID : SA11AI.6266
Amount of Each Receipt this Period 118.30
 Memo Item
PAYROLL DEDUCTION

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

Date of Receipt
Amount of Each Receipt this Period
 Memo Item

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

Date of Receipt
Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	118.30
TOTAL This Period (last page this line number only).....	2490.22

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
UTILITY WORKERS UNION OF AMERICA COPE

Full Name (Last, First, Middle Initial)

A. DWIGHT EVANS FOR CONGRESS

Mailing Address 7254 LIMEKILN PIKE

City PHILADELPHIA State PA Zip Code 19138

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 10 / 2016

Transaction ID : SB23.6184

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

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

2500.00

2500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
UTILITY WORKERS UNION OF AMERICA COPE

Full Name (Last, First, Middle Initial)

A. CECILIA AGUIAR-CURRY FOR ASSEMBLY 2016

Mailing Address P.O. BOX 1173

City WINTERS State CA Zip Code 95694

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : **SB29.6180**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ERVIN FOR STATE SENATE 2016

Mailing Address 118 CHESTNUT PLACE

City FULLERTON State CA Zip Code 92832

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2016

Transaction ID : **SB29.6182**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. KEVIN PARSONS FOR HOUSE OF DELEGATES

Mailing Address 5101 VENERABLE AVENUE
APT B

City CHARLESTON State WV Zip Code 25304

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 05 / 2016

Transaction ID : **SB29.6178**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

3000.00