

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2014"/> | | 512200.08 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 327160.02 | |
| (c) Total Receipts (from Line 19) | 32748.07 | 675816.60 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 359908.09 | 1188016.68 |
| 7. Total Disbursements (from Line 31)..... | 34521.95 | 862630.54 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 325386.14 | 325386.14 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY 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)

Write or Type Committee Name

AMALGAMATED TRANSIT UNION - 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)..... | 4114.87 | 36280.69 |
| (ii) Unitemized | 28633.20 | 639194.17 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 32748.07 | 675474.86 |
| (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) | 32748.07 | 675474.86 |
| 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.)..... | 0.00 | 341.74 |
| 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))..... ▶ | 32748.07 | 675816.60 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 32748.07 | 675816.60 |

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 | 71.95 | 519.50 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 71.95 | 519.50 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | -1000.00 | 591600.00 |
| 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 | 35450.00 | 270511.04 |
| 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)) .. | 34521.95 | 862630.54 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 34521.95 | 862630.54 |

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) | 32748.07 | 675474.86 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 32748.07 | 675474.86 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 71.95 | 519.50 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 71.95 | 519.50 |

**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 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

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

A. JOHN G CAMPANELLA
Full Name (Last, First, Middle Initial)

Mailing Address 213 DOWNING ROAD

City SOMERDALE State NJ Zip Code 08083-2615

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

Name of Employer AMALGAMATED TRANSIT UNION Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 01 / 2014

Transaction ID : 6480274

Amount of Each Receipt this Period
 50.00

B. STEPHEN KNESTAUT
Full Name (Last, First, Middle Initial)

Mailing Address 3 INDIAN ROAD

City WEST DEPTFORD State NJ Zip Code 08096-3310

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

Name of Employer N J TRANSIT BUS OPERATIONS INC Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 01 / 2014

Transaction ID : 6480275

Amount of Each Receipt this Period
 50.00

C. RONALD L COX
Full Name (Last, First, Middle Initial)

Mailing Address 8514 S SHYROCK RD

City GLASFORD State IL Zip Code 61533-9458

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

Name of Employer GREATER PEORIA MASS TRAN DIST Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : 6481427

Amount of Each Receipt this Period
 10.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 110.00 |
| 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 7 OF 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. RAYMOND B MESSIER
 Full Name (Last, First, Middle Initial)
 Mailing Address 9198 WATER ROAD
 City State Zip Code
 COTATI CA 94931-4271
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GOLDEN GATE BRIDGE HIGHWAY TRAN OPERATOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 632.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014
Transaction ID : 6481476
 Amount of Each Receipt this Period
 55.00

B. FREDA BRAYLOCK
 Full Name (Last, First, Middle Initial)
 Mailing Address 56120 QUINCE ROAD
 City State Zip Code
 SOUTH BEND IN 46619-4400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SOUTH BEND PUBLIC TRANS COPR OPERATOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014
Transaction ID : 6498821
 Amount of Each Receipt this Period
 14.00

C. FREDA BRAYLOCK
 Full Name (Last, First, Middle Initial)
 Mailing Address 56120 QUINCE ROAD
 City State Zip Code
 SOUTH BEND IN 46619-4400
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SOUTH BEND PUBLIC TRANS COPR OPERATOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014
Transaction ID : 6498860
 Amount of Each Receipt this Period
 7.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 76.00
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 82 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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

A. STEPHEN M PALONIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 231 PARKEDGE ROAD
 City State Zip Code
 PITTSBURGH PA 15220-2600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PORT AUTH-ALLEG - PAT TRANSIT OPERATOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 208.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2014
Transaction ID : 6500358
 Amount of Each Receipt this Period
 20.84

B. SABATINO DINARDO
 Full Name (Last, First, Middle Initial)
 Mailing Address 2022 Chateau St.
 City State Zip Code
 Pittsburgh PA 15233-1139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AMALGAMATED TRANSIT UNION OPERATOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 208.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2014
Transaction ID : 6500359
 Amount of Each Receipt this Period
 20.84

C. Jeffrey S DiPerna
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 FALCON RIDGE DRIVE
 City State Zip Code
 NO HUNTINGDON PA 15642-2307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PORT AUTH-ALLEG - PAT TRANSIT OPERATOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 208.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2014
Transaction ID : 6500360
 Amount of Each Receipt this Period
 20.84

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 62.52 |
| 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 9 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. BRYON S SHANE
Full Name (Last, First, Middle Initial)

Mailing Address 708 HERRON AVE
APT 1

City VERONA State PA Zip Code 15147-1331

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

Name of Employer PORT AUTH-ALLEG - PAT TRANSIT Occupation OPERATOR

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
10 / 03 / 2014

Transaction ID : 6500361

Amount of Each Receipt this Period
210.00

B. KEVIN M COLE
Full Name (Last, First, Middle Initial)

Mailing Address 51 NORTH STREET

City CRANSTON State RI Zip Code 02920-1724

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2014

Transaction ID : 6502003

Amount of Each Receipt this Period
7.00

C. ROBERT E DAVIS JR
Full Name (Last, First, Middle Initial)

Mailing Address 82 VILLAGE DRIVE

City RIVERSIDE State RI Zip Code 02915-3951

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2014

Transaction ID : 6502052

Amount of Each Receipt this Period
7.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 35.50

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 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. FRANCIS F PLUTZNER
Full Name (Last, First, Middle Initial)

Mailing Address 361 DOROC AVENUE

City CRANSTON State RI Zip Code 02910-2921

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 222.00

Date of Receipt 10 / 04 / 2014
Transaction ID : 6502054

Amount of Each Receipt this Period 6.00

B. OWEN C SWEETLAND
Full Name (Last, First, Middle Initial)

Mailing Address 139 ROUNDS AVENUE

City RIVERSIDE State RI Zip Code 02915-1737

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 04 / 2014
Transaction ID : 6502098

Amount of Each Receipt this Period 10.00

C. RICHARD P BUTLER
Full Name (Last, First, Middle Initial)

Mailing Address 11 HARDING AVENUE

City JOHNSTON State RI Zip Code 02919-5010

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt 10 / 04 / 2014
Transaction ID : 6502133

Amount of Each Receipt this Period 6.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 22.00

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 11 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. VIRGINIA A MOFFITT
 Full Name (Last, First, Middle Initial)
 Mailing Address 90 GRANT AVE
 City CRANSTON State RI Zip Code 02920-7718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2014
Transaction ID : 6502136
 Amount of Each Receipt this Period
 10.00

B. ARTHUR OLINK
 Full Name (Last, First, Middle Initial)
 Mailing Address 58 DALTON STREET
 City RUMFORD State RI Zip Code 02916-2804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 204.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2014
Transaction ID : 6502153
 Amount of Each Receipt this Period
 6.00

C. JOSE R BATISTA
 Full Name (Last, First, Middle Initial)
 Mailing Address 129 LABIN ST
 City PROVIDENCE State RI Zip Code 02909-0000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 238.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2014
Transaction ID : 6502184
 Amount of Each Receipt this Period
 7.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 23.00
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 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. WILLIAM MELGAR

Mailing Address 41 SUSSEX STREET

City Providence State RI Zip Code 02908-1716

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt 10 / 04 / 2014
Transaction ID : 6502187

Amount of Each Receipt this Period 6.00

Full Name (Last, First, Middle Initial)
B. MAURICE HOWIE

Mailing Address 125 PRAIRIE AVENUE

City Providence State RI Zip Code 02905-0000

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 222.00

Date of Receipt 10 / 04 / 2014
Transaction ID : 6502235

Amount of Each Receipt this Period 6.00

Full Name (Last, First, Middle Initial)
C. RAMON HICIANO

Mailing Address 46 LINCOLN AVENUE

City Cranston State RI Zip Code 02920-7743

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 222.00

Date of Receipt 10 / 04 / 2014
Transaction ID : 6502250

Amount of Each Receipt this Period 6.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 18.00

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 13 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. CHRISTOPHER LEMIRE
Full Name (Last, First, Middle Initial)

Mailing Address 110 KICKEMUIT ROAD

City WARREN State RI Zip Code 02885-1928

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 222.00

Date of Receipt 10 / 04 / 2014
Transaction ID : 6502255

Amount of Each Receipt this Period 6.00

B. RUTH SULLIVAN
Full Name (Last, First, Middle Initial)

Mailing Address 68 NARRAGANSETT AVENUE

City TIVERTON State RI Zip Code 02878-4620

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 407.00

Date of Receipt 10 / 04 / 2014
Transaction ID : 6502259

Amount of Each Receipt this Period 11.00

C. ERIC ST PIERRE
Full Name (Last, First, Middle Initial)

Mailing Address 46 HIGH STREET

City WARWICK State RI Zip Code 02886-1256

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 04 / 2014
Transaction ID : 6502263

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 37.00

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 14 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

Full Name (Last, First, Middle Initial)
A. THOMAS MILLS

Mailing Address 96 VEAZIE STREET

City Providence State RI Zip Code 02908-2457

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 297.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2014

Transaction ID : 6502264

Amount of Each Receipt this Period
 18.00

Full Name (Last, First, Middle Initial)
B. CHARLES E WILLIS

Mailing Address 267 OLD COUNTY ROAD

City SMITHFIELD State RI Zip Code 02917-0000

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2014

Transaction ID : 6502273

Amount of Each Receipt this Period
 6.00

Full Name (Last, First, Middle Initial)
C. DENNIS CONNOLLY

Mailing Address 69 WHITEROCK ROAD
P O BOX 66

City WESTERLY State RI Zip Code 02891-1249

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 362.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2014

Transaction ID : 6502279

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 34.00

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 15 OF 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. DESIREE MATHIEU
 Full Name (Last, First, Middle Initial)
 Mailing Address 233 WATERMAN AVENUE
 City State Zip Code
 E PROVIDENCE RI 02914-3524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RHODE ISLAND PUBLIC TRANS AUTH OPERATOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 222.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2014
Transaction ID : 6502298
 Amount of Each Receipt this Period
 6.00

B. ROGER LIMA JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 JACKSON ST
 City State Zip Code
 NORTH PROVIDENCE RI 02904-4223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RHODE ISLAND PUBLIC TRANS AUTH OPERATOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 370.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 04 / 2014
Transaction ID : 6502311
 Amount of Each Receipt this Period
 10.00

C. DAVID C MEWING
 Full Name (Last, First, Middle Initial)
 Mailing Address 172 Longfellow St.
 City State Zip Code
 Providence RI 02907-2621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AMALGAMATED TRANSIT UNION OPERATOR
 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
 10 / 04 / 2014
Transaction ID : 6502344
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 26.00
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 17 OF 82 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. CHRIS T ABE | | Date of Receipt |
| Mailing Address 500 QUINCY AVENUE NE | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| RENTON | WA | 98059-4555 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 6504893 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="2500"/> |
| Name of Employer | Occupation | |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="450.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. VELDA D ALEXANDER | | Date of Receipt |
| Mailing Address 2401 E LYNN STREET APT 2 | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| SEATTLE | WA | 98122-0000 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 6504901 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="2100"/> |
| Name of Employer | Occupation | |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="378.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. VERITA D ALEXANDER | | Date of Receipt |
| Mailing Address 5260 21ST AVENUE SW | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| SEATTLE | WA | 98106-1355 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 6504903 |
| <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="12.50"/> |
| Name of Employer | Occupation | |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="225.00"/> | |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="58.50"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**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 18 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. CRAIG N ANDERSON
Full Name (Last, First, Middle Initial)

Mailing Address 24327 118TH COURT SE

City KENT State WA Zip Code 98030-9202

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 02 / 2014
Transaction ID : 6504912

Amount of Each Receipt this Period 12.50

B. LINDA R ANDERSON
Full Name (Last, First, Middle Initial)

Mailing Address 13109 SE 264TH PLACE

City KENT State WA Zip Code 98030-7995

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 02 / 2014
Transaction ID : 6504914

Amount of Each Receipt this Period 12.50

C. GEORGE F ARMSTRONG
Full Name (Last, First, Middle Initial)

Mailing Address 3206 W CONCORD WAY
APT 488

City MERCER ISLAND State WA Zip Code 98040-6225

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 02 / 2014
Transaction ID : 6504921

Amount of Each Receipt this Period 12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 37.50

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 19 OF 82 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. KEVIN P BARTLEIN | | Date of Receipt |
| Mailing Address 1729 WHITMAN AVENUE NE | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Transaction ID : 6504940 |
| RENTON | WA | Amount of Each Receipt this Period |
| Zip Code | | <input type="text" value="15.00"/> |
| 98059-0000 | | |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="270.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. MOHAMMAD-HAS BAZARGAN | | Date of Receipt |
| Mailing Address 521 S WELLER APT 258 | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Transaction ID : 6504943 |
| SEATTLE | WA | Amount of Each Receipt this Period |
| Zip Code | | <input type="text" value="13.00"/> |
| 98104-0000 | | |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="234.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. MARK H BELL | | Date of Receipt |
| Mailing Address 14547 NE 40TH STREET #J201 | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Transaction ID : 6504950 |
| BELLEVUE | WA | Amount of Each Receipt this Period |
| Zip Code | | <input type="text" value="15.00"/> |
| 98007-3383 | | |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | |
| Name of Employer | Occupation | |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="270.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="43.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**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 20 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. STEVEN L BOOTS
Full Name (Last, First, Middle Initial)

Mailing Address 33009 38TH AVENUE SW

City FEDERAL WAY State WA Zip Code 98023-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : 6504970

Amount of Each Receipt this Period
 12.50

B. MELODY A BRUTSCHER
Full Name (Last, First, Middle Initial)

Mailing Address 3625 BEACH DRIVE SW #9

City SEATTLE State WA Zip Code 98116-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : 6504995

Amount of Each Receipt this Period
 20.00

C. RACHAEL E BUCHANAN
Full Name (Last, First, Middle Initial)

Mailing Address 9212 45TH AVENUE SW APT #11

City SEATTLE State WA Zip Code 98136-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : 6504997

Amount of Each Receipt this Period
 12.50

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 45.00 |
| 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 21 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. MICHAEL R BURR | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 02 / 2014 |
| Mailing Address 11 I STREET SE | | Transaction ID : 6504999 |
| City AUBURN | State WA | Zip Code 98002-5657 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 15.00 | |
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 270.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. ERIC K BUTLER | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 02 / 2014 |
| Mailing Address 8860 122ND COURT SE | | Transaction ID : 6505001 |
| City NEW CASTLE | State WA | Zip Code 98056-0000 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 15.00 | |
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 270.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. TAYLORE T CALDWELL | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 02 / 2014 |
| Mailing Address 2416 54TH PLACE SW APT 1 | | Transaction ID : 6505005 |
| City SEATTLE | State WA | Zip Code 98116-1847 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 12.50 | |
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 225.00 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 42.50 |
| 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 22 OF 82 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. RAY H CAMPBELL | | Date of Receipt 10 / 02 / 2014 Transaction ID : 6505008 |
| Mailing Address 28648 226TH AVENUE SE | | Amount of Each Receipt this Period 22.00 |
| City MAPLE VALLEY | State WA | Zip Code 98038-0000 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 22.00 |
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 396.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. MICHAEL CHILDS | | Date of Receipt 10 / 02 / 2014 Transaction ID : 6505028 |
| Mailing Address 2815 Second Ave. Suite 230 | | Amount of Each Receipt this Period 15.00 |
| City Seattle | State WA | Zip Code 98121-1261 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 15.00 |
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 270.00 | |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. WILLIAM G CLIFFORD | | Date of Receipt 10 / 02 / 2014 Transaction ID : 6505037 |
| Mailing Address 161 22ND AVENUE | | Amount of Each Receipt this Period 15.10 |
| City SEATTLE | State WA | Zip Code 98122-6035 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 15.10 |
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 271.80 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 52.10 |
| 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 23 OF 82 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. WILLIAM M COCKERHAM | | Date of Receipt |
| Mailing Address PO BOX 417 | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| KINGSTON | WA | 98346-0417 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 6505039 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | <input type="text" value="12.50"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="212.50"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. EDWARD J CRAIG | | Date of Receipt |
| Mailing Address 1420 NW GILMAN BLVD #2285 | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| ISSAQUAN | WA | 98027-0000 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 6505055 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | <input type="text" value="12.66"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="227.88"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. CALVIN E CUMMINGS | | Date of Receipt |
| Mailing Address 1407-50TH STREET NE | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| AUBURN | WA | 98002-0000 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 6505061 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | <input type="text" value="20.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="360.00"/> | |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="45.16"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 24 OF 82 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. MARK J DE BORD
Full Name (Last, First, Middle Initial)

Mailing Address 12510 VALLEY AVENUE E

| | | |
|------------------|-------------|------------------------|
| City PUYALLUP | State WA | Zip Code 98372-0000 |
|------------------|-------------|------------------------|

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

| | |
|---|------------------------|
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR |
|---|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 02 | | 2014 |

Transaction ID : 6505082

Amount of Each Receipt this Period
15.00

B. JOSEPH G DE FLURI
Full Name (Last, First, Middle Initial)

Mailing Address 26420 197TH PLACE SE

| | | |
|-------------------|-------------|------------------------|
| City COVINGTON | State WA | Zip Code 98042-5020 |
|-------------------|-------------|------------------------|

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

| | |
|---|------------------------|
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR |
|---|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 02 | | 2014 |

Transaction ID : 6505083

Amount of Each Receipt this Period
12.50

C. WARREN C DOLAN II
Full Name (Last, First, Middle Initial)

Mailing Address 1220 NE 97TH STREET

| | | |
|-----------------|-------------|------------------------|
| City SEATTLE | State WA | Zip Code 98115-2228 |
|-----------------|-------------|------------------------|

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

| | |
|---|------------------------|
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR |
|---|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 02 | | 2014 |

Transaction ID : 6505099

Amount of Each Receipt this Period
12.50

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 40.00 |
| 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 25 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. MICHAEL C DONOW
Full Name (Last, First, Middle Initial)

Mailing Address 328 NO MADISON STREET

| | | |
|----------------|-------------|------------------------|
| City MONROE | State WA | Zip Code 98272-1820 |
|----------------|-------------|------------------------|

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

| | |
|---|------------------------|
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR |
|---|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 02 | | 2014 |

Transaction ID : 6505100

Amount of Each Receipt this Period
15.00

B. JEFF D DOPPMANN
Full Name (Last, First, Middle Initial)

Mailing Address P O BOX 86

| | | |
|-----------------|-------------|------------------------|
| City SEATTLE | State WA | Zip Code 98111-0086 |
|-----------------|-------------|------------------------|

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

| | |
|---|------------------------|
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR |
|---|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 02 | | 2014 |

Transaction ID : 6505101

Amount of Each Receipt this Period
12.50

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

Mailing Address 3638 S ALASKA

| | | |
|----------------|-------------|------------------------|
| City TACOMA | State WA | Zip Code 98418-1815 |
|----------------|-------------|------------------------|

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

| | |
|---|------------------------|
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR |
|---|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 02 | | 2014 |

Transaction ID : 6505104

Amount of Each Receipt this Period
12.50

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 40.00 |
| 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 26 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. ERIC J DUMADAG
Full Name (Last, First, Middle Initial)

Mailing Address 11033 MERIDIAN DRIVE SE

City EVERETT State WA Zip Code 98208-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : 6505109

Amount of Each Receipt this Period
 12.50

B. JOHN E EATON
Full Name (Last, First, Middle Initial)

Mailing Address 4634 365TH AVENUE SE

City FALL CITY State WA Zip Code 98024-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : 6505120

Amount of Each Receipt this Period
 25.00

C. GREG M ENGE
Full Name (Last, First, Middle Initial)

Mailing Address 3640 SOUTH FAWCETT

City TACOMA State WA Zip Code 98418-6846

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 221.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : 6505127

Amount of Each Receipt this Period
 12.30

SUBTOTAL of Receipts This Page (optional)..... ▶ 49.80

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 27 OF 82 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. DAVID S FAIRBANKS | | Date of Receipt |
| Mailing Address 8622 202ND SW | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| EDMONDS | WA | 98026-6644 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 6505133 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="21.00"/> |
| Name of Employer | Occupation | |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="378.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. GALUFA FETUI | | Date of Receipt |
| Mailing Address 2652 SW 335TH PLACE | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| FEDERAL WAY | WA | 98023-0000 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 6505139 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="17.50"/> |
| Name of Employer | Occupation | |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="315.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. JACOB S FRYAR | | Date of Receipt |
| Mailing Address 2346 NE 94TH STREET | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| SEATTLE | WA | 98115-0000 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 6505159 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="12.50"/> |
| Name of Employer | Occupation | |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="225.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="51.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text" value=""/> |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 28 OF 82 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. VALARIE K GALLEGOS | | Date of Receipt M M / D D / Y Y Y Y Y 10 / 02 / 2014 Transaction ID : 6505165 |
| Mailing Address 3101 SE 10TH STREET | | Amount of Each Receipt this Period 30.00 |
| City RENTON | State WA | Zip Code 98058-2932 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 540.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. MARILYN P GARY | | Date of Receipt M M / D D / Y Y Y Y Y 10 / 02 / 2014 Transaction ID : 6505167 |
| Mailing Address 2405 S STAR LAKE ROAD APT 65-303 | | Amount of Each Receipt this Period 15.00 |
| City FEDERAL WAY | State WA | Zip Code 98003-0000 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 270.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. LEOLA F GILBERT | | Date of Receipt M M / D D / Y Y Y Y Y 10 / 02 / 2014 Transaction ID : 6505175 |
| Mailing Address 15107 SE 179TH STREET APT 2D | | Amount of Each Receipt this Period 12.50 |
| City RENTON | State WA | Zip Code 98058-0000 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 212.50 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 57.50 |
| 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 29 OF 82 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. DIANE L GIMENEZ
Full Name (Last, First, Middle Initial)

Mailing Address 11726 14TH AVENUE SO

| | | |
|-----------------|-------------|------------------------|
| City SEATTLE | State WA | Zip Code 98168-0000 |
|-----------------|-------------|------------------------|

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

| | |
|---|------------------------|
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR |
|---|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.48

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 02 | | 2014 |

Transaction ID : 6505179

Amount of Each Receipt this Period
13.36

B. RONALD C GLIMM
Full Name (Last, First, Middle Initial)

Mailing Address 5214 157TH PLACE SW

| | | |
|-----------------|-------------|------------------------|
| City EDMONDS | State WA | Zip Code 98026-4706 |
|-----------------|-------------|------------------------|

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

| | |
|---|------------------------|
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR |
|---|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 02 | | 2014 |

Transaction ID : 6505183

Amount of Each Receipt this Period
12.50

C. STACY A GOSBY
Full Name (Last, First, Middle Initial)

Mailing Address 3713 S 257TH STREET

| | | |
|--------------|-------------|------------------------|
| City KENT | State WA | Zip Code 98032-0000 |
|--------------|-------------|------------------------|

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

| | |
|---|------------------------|
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR |
|---|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 02 | | 2014 |

Transaction ID : 6505191

Amount of Each Receipt this Period
15.00

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 40.86 |
| 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 30 OF 82 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. KATHERINE F GRAINGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 15108 SE 179TH STREET #3N
 City RENTON State WA Zip Code 98058-0000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 02 / 2014
Transaction ID : 6505195
 Amount of Each Receipt this Period 12.50

B. KELLY A GRAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 22655 NE 5TH PLACE
 City SAMMAMISH State WA Zip Code 98074-0000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 02 / 2014
Transaction ID : 6505197
 Amount of Each Receipt this Period 12.50

C. MICHAEL A HALL
 Full Name (Last, First, Middle Initial)
 Mailing Address 23621 - 112TH AVENUE SE H-204
 City KENT State WA Zip Code 98031-0000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 02 / 2014
Transaction ID : 6505216
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
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 31 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. ESTHER L HANKERSON | | Date of Receipt |
| Mailing Address 23005 NE 150TH | | M M M / D D D / Y Y Y Y Y Y 10 / 02 / 2014 |
| City State Zip Code WOODINVILLE WA 98072-7209 | | Transaction ID : 6505217 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 15.00 |
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 270.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. PATRICIA C HARDIN | | Date of Receipt |
| Mailing Address 2518 136TH STREET SE | | M M M / D D D / Y Y Y Y Y Y 10 / 02 / 2014 |
| City State Zip Code MILL CREEK WA 98012-4617 | | Transaction ID : 6505219 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 17.50 |
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 315.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. JAMES E HARPER | | Date of Receipt |
| Mailing Address 32801-29TH AVENUE SW | | M M M / D D D / Y Y Y Y Y Y 10 / 02 / 2014 |
| City State Zip Code FEDERAL WAY WA 98023-0000 | | Transaction ID : 6505220 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 25.00 |
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 450.00 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 57.50 |
| 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 32 OF 82 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. AUDREY R HEDSTROM | | Date of Receipt |
| Mailing Address 22413 11TH AVENUE SE | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City State Zip Code KENT WA 98031-0000 | | Transaction ID : 6505230 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer Occupation KING COUNTY DOT-METRO TRANSIT OPERATOR | | <input type="text" value="2500"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| | <input type="text" value="450.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. ALAN R HEPWORTH | | Date of Receipt |
| Mailing Address 23325 91ST AVENUE S #NN203 | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City State Zip Code KENT WA 98031-2953 | | Transaction ID : 6505237 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer Occupation KING COUNTY DOT-METRO TRANSIT OPERATOR | | <input type="text" value="15.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| | <input type="text" value="270.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. JAMES L HERMANSON JR | | Date of Receipt |
| Mailing Address PO BOX 15546 | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City State Zip Code SEATTLE WA 98115-0000 | | Transaction ID : 6505238 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer Occupation KING COUNTY DOT-METRO TRANSIT OPERATOR | | <input type="text" value="12.50"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| | <input type="text" value="225.00"/> | |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="52.50"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 33 OF 82 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. EVON F HOLDEN
Full Name (Last, First, Middle Initial)

Mailing Address 7201 SOUTH 120TH STREET

| | | |
|-----------------|-------------|------------------------|
| City SEATTLE | State WA | Zip Code 98178-0000 |
|-----------------|-------------|------------------------|

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

| | |
|---|------------------------|
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR |
|---|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | | 02 | | 2014 |

Transaction ID : 6505248

Amount of Each Receipt this Period
12.50

B. TOYA L HUDSON
Full Name (Last, First, Middle Initial)

Mailing Address 4930 SW 319TH LANE
APT G-204

| | | |
|---------------------|-------------|------------------------|
| City FEDERAL WAY | State WA | Zip Code 98023-3715 |
|---------------------|-------------|------------------------|

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

| | |
|---|------------------------|
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR |
|---|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | | 02 | | 2014 |

Transaction ID : 6505259

Amount of Each Receipt this Period
15.00

C. MARGARET HUGHES-BROWN
Full Name (Last, First, Middle Initial)

Mailing Address 14125 SE 282ND STREET

| | | |
|--------------|-------------|------------------------|
| City KENT | State WA | Zip Code 98042-3916 |
|--------------|-------------|------------------------|

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

| | |
|---|------------------------|
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR |
|---|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
212.50

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | | 02 | | 2014 |

Transaction ID : 6505261

Amount of Each Receipt this Period
12.50

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 40.00 |
| 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 34 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. JERRY L JACOBS
Full Name (Last, First, Middle Initial)

Mailing Address 2112 NO 41ST

| | | |
|-----------------|-------------|------------------------|
| City SEATTLE | State WA | Zip Code 98103-8316 |
|-----------------|-------------|------------------------|

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

| | |
|---|------------------------|
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR |
|---|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 02 | | 2014 |

Transaction ID : 6505273

Amount of Each Receipt this Period
25.00

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

Mailing Address 4019 SW 327TH

| | | |
|---------------------|-------------|------------------------|
| City FEDERAL WAY | State WA | Zip Code 98023-0000 |
|---------------------|-------------|------------------------|

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

| | |
|---|------------------------|
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR |
|---|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 02 | | 2014 |

Transaction ID : 6505276

Amount of Each Receipt this Period
20.00

C. R CRAIG JEFFERSON
Full Name (Last, First, Middle Initial)

Mailing Address 12718 48TH AVENUE

| | | |
|--------------------|-------------|------------------------|
| City MARYSVILLE | State WA | Zip Code 98271-8619 |
|--------------------|-------------|------------------------|

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

| | |
|---|------------------------|
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR |
|---|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
261.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 02 | | 2014 |

Transaction ID : 6505283

Amount of Each Receipt this Period
14.50

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 59.50 |
| 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 35 OF 82 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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

A. PHYLLIS G JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 360 TAYLOR AVENUE NW
 APT 303
 City RENTON State WA Zip Code 98057-5148
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 02 / 2014
Transaction ID : 6505297
 Amount of Each Receipt this Period 25.00

B. ALEXANDER N KEETON
 Full Name (Last, First, Middle Initial)
 Mailing Address 27821 32ND PLACE SOUTH
 City AUBURN State WA Zip Code 98001-0000
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 02 / 2014
Transaction ID : 6505326
 Amount of Each Receipt this Period 12.50

C. KELVIN D KELLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 8603 51ST COURT SW
 City UNIVERSITY PLACE State WA Zip Code 98467-0000
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 02 / 2014
Transaction ID : 6505327
 Amount of Each Receipt this Period 25.00

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 62.50 |
| 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 36 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. ERNEST J KING
Full Name (Last, First, Middle Initial)

Mailing Address 11407 SE 180TH PLACE

City RENTON State WA Zip Code 98055-6530

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 02 / 2014
Transaction ID : 6505335

Amount of Each Receipt this Period 12.50

B. DALE L KOPPERDAHL
Full Name (Last, First, Middle Initial)

Mailing Address 11819 SE 171ST LANE #R301

City RENTON State WA Zip Code 98058-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 02 / 2014
Transaction ID : 6505344

Amount of Each Receipt this Period 25.00

C. SAMUEL LEAANA
Full Name (Last, First, Middle Initial)

Mailing Address 1217 H STREET SE

City AUBURN State WA Zip Code 98002-6729

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 378.00

Date of Receipt 10 / 02 / 2014
Transaction ID : 6505363

Amount of Each Receipt this Period 21.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 58.50

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 37 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. HAROLD R LEMMON
Full Name (Last, First, Middle Initial)

Mailing Address 3224 S 136TH STREET

City TUKWILA State WA Zip Code 98168-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : 6505367

Amount of Each Receipt this Period
 12.50

B. RICHARD L LEONARD
Full Name (Last, First, Middle Initial)

Mailing Address 6114 SO BANGOR STREET

City SEATTLE State WA Zip Code 98178-2431

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : 6505369

Amount of Each Receipt this Period
 20.00

C. RAYMOND A MANNING
Full Name (Last, First, Middle Initial)

Mailing Address 13328 23RD AVENUE NE

City SEATTLE State WA Zip Code 98125-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : 6505410

Amount of Each Receipt this Period
 12.50

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 45.00 |
| 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 38 OF 82 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

Full Name (Last, First, Middle Initial)
A. MICHAEL J MARTINI

Mailing Address 2015 S 301ST STREET

City FEDERAL WAY State WA Zip Code 98003-4237

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : 6505417

Amount of Each Receipt this Period
15.00

Full Name (Last, First, Middle Initial)
B. MARVIN R MCDONALD

Mailing Address 2415 THORNDYKE AVENUE W #402

City SEATTLE State WA Zip Code 98199-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **243.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : 6505435

Amount of Each Receipt this Period
13.50

Full Name (Last, First, Middle Initial)
C. CHARLES N MILLER

Mailing Address 738 34TH AVENUE

City SEATTLE State WA Zip Code 98122-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **282.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : 6505453

Amount of Each Receipt this Period
21.00

| | |
|--|--------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 49.50 |
| 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 39 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. ROBERT E MOORE
Full Name (Last, First, Middle Initial)

Mailing Address 14511 SE 252ND PLACE

City KENT State WA Zip Code 98042-3415

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : 6505469

Amount of Each Receipt this Period
 16.00

B. MICHAEL J MOORE
Full Name (Last, First, Middle Initial)

Mailing Address 5936 S 149TH STREET

City TUKWILA State WA Zip Code 98168-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : 6505472

Amount of Each Receipt this Period
 12.50

C. LISA A NICHOL
Full Name (Last, First, Middle Initial)

Mailing Address 30136-53RD AVENUE S

City AUBURN State WA Zip Code 98001-0621

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : 6505494

Amount of Each Receipt this Period
 12.50

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 41.00 |
| 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 40 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. LATONYA D PLUMMER-GREASON | | Date of Receipt |
| Mailing Address 16316 18TH AVE E | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| TACOMA | WA | 98445-0000 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 6505541 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | <input type="text" value="15.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="210.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. RACHEL A PRICE | | Date of Receipt |
| Mailing Address 5935 FAUNTLEROY WAY SW #C | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| SEATTLE | WA | 98136-1797 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 6505549 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | <input type="text" value="17.50"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="315.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. JOSEPH F REED | | Date of Receipt |
| Mailing Address 11424 1ST AVENUE S UNIT 304 | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| SEATTLE | WA | 98168-0000 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 6505568 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | <input type="text" value="15.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="270.00"/> | |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="47.50"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 41 OF 82 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. JOSEPH P RIVERS
Full Name (Last, First, Middle Initial)

Mailing Address 22732 126TH PLACE SE

City State Zip Code
KENT WA 98031-0000

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

Name of Employer Occupation
KING COUNTY DOT-METRO TRANSIT OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
10 / 02 / 2014
Transaction ID : 6505578

Amount of Each Receipt this Period
12.50

B. RUDY A ROBINSON
Full Name (Last, First, Middle Initial)

Mailing Address 1706 SOUTH 48TH STREET

City State Zip Code
TACOMA WA 98408-0000

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

Name of Employer Occupation
KING COUNTY DOT-METRO TRANSIT OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
10 / 02 / 2014
Transaction ID : 6505580

Amount of Each Receipt this Period
12.50

C. JENNIFER M ROUTLEY-STROHM
Full Name (Last, First, Middle Initial)

Mailing Address 20424 11TH DRIVE SE

City State Zip Code
BOTHELL WA 98012-0000

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

Name of Employer Occupation
KING COUNTY DOT-METRO TRANSIT OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
10 / 02 / 2014
Transaction ID : 6505592

Amount of Each Receipt this Period
12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 37.50

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 42 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. BRIAN L SHERLOCK | | Date of Receipt |
| Mailing Address 1557 NE 171ST STREET | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| SHORELINE | WA | 98155-0000 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 6505626 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | <input type="text" value="12.50"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="225.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. DEBORAH L SNIDER | | Date of Receipt |
| Mailing Address 9020 MEADOW ROAD SW | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| TACOMA | WA | 98499-0000 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 6505645 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | <input type="text" value="15.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="255.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. ALANA E SOREM | | Date of Receipt |
| Mailing Address 19853 25TH AVENUE NE #314 | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| SHORELINE | WA | 98155-1364 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 6505646 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | <input type="text" value="20.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="360.00"/> | |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="47.50"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**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 43 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. SCOTT A SPENCER
Full Name (Last, First, Middle Initial)

Mailing Address 600 N 85TH APT 312

City SEATTLE State WA Zip Code 98103-3869

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 02 / 2014
Transaction ID : 6505649

Amount of Each Receipt this Period 12.50

B. WILLIAM J SPIVEY
Full Name (Last, First, Middle Initial)

Mailing Address 135-26TH AVENUE E

City SEATTLE State WA Zip Code 98112-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 238.50

Date of Receipt 10 / 02 / 2014
Transaction ID : 6505650

Amount of Each Receipt this Period 13.25

C. VICKIE S STANLEY
Full Name (Last, First, Middle Initial)

Mailing Address 12511 NE 154TH STREET

City WOODINVILLE State WA Zip Code 98072-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 02 / 2014
Transaction ID : 6505654

Amount of Each Receipt this Period 12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 38.25

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 44 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. PATRICK G STEVENS
Full Name (Last, First, Middle Initial)

Mailing Address 809 3RD STREET NE

City PUYALLUP State WA Zip Code 98431-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : 6505658

Amount of Each Receipt this Period
 12.50

B. STANLEY C STRAKER
Full Name (Last, First, Middle Initial)

Mailing Address 721 ASHLEY COURT E

City BUCKLEY State WA Zip Code 98321-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : 6505664

Amount of Each Receipt this Period
 20.00

C. JUSTIN C SWANSON
Full Name (Last, First, Middle Initial)

Mailing Address 7414A 142ND AVENUE E

City SUMNER State WA Zip Code 98390-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2014

Transaction ID : 6505675

Amount of Each Receipt this Period
 12.50

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 45.00 |
| 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 45 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. JEFF M SWENSON
Full Name (Last, First, Middle Initial)

Mailing Address 511 E ROY #214

City SEATTLE State WA Zip Code 98102-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 02 / 2014
Transaction ID : 6505677

Amount of Each Receipt this Period 12.50

B. THERESA L TOBIN
Full Name (Last, First, Middle Initial)

Mailing Address 19001 96TH AVENUE COURT E

City PUYALLUP State WA Zip Code 98375-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 02 / 2014
Transaction ID : 6505697

Amount of Each Receipt this Period 25.00

C. ROGENE H TOLSON
Full Name (Last, First, Middle Initial)

Mailing Address 21210 38TH AVENUE EAST

City SPANAWAY State WA Zip Code 98387-6866

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 378.00

Date of Receipt 10 / 02 / 2014
Transaction ID : 6505698

Amount of Each Receipt this Period 21.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 58.50

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 46 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. JEREMY B UNE | | Date of Receipt |
| Mailing Address 31600 12TH AVENUE SW | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| FEDERAL WAY | WA | 98023-4706 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 6505711 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="15.00"/> |
| Name of Employer | Occupation | |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="255.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. JIMMY O VANN | | Date of Receipt |
| Mailing Address 3223 S MONROE STREET | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| TACOMA | WA | 98409-0000 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 6505716 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="25.00"/> |
| Name of Employer | Occupation | |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="450.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. DAVID S WAGGONER | | Date of Receipt |
| Mailing Address 360 NW Dogwood St. K204 | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| Issaquah | WA | 98027-2724 |
| FEC ID number of contributing federal political committee. | | Transaction ID : 6505721 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| | | <input type="text" value="25.00"/> |
| Name of Employer | Occupation | |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="450.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="65.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text" value=""/> |

**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 47 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. JERRY WALLACE | | Date of Receipt |
| Mailing Address 2815 Second Ave. Suite 230 | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City Seattle | State WA | Zip Code 98121-1261 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 6505725 |
| Name of Employer AMALGAMATED TRANSIT UNION | Occupation OPERATOR | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | <input type="text" value="25.00"/> |
| | <input type="text" value="425.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. DONALD L WARD | | Date of Receipt |
| Mailing Address 2538 S RAYMOND ST | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City SEATTLE | State WA | Zip Code 98108-0000 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 6505728 |
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | <input type="text" value="1.67"/> |
| | <input type="text" value="356.68"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. CAREY P WATSON | | Date of Receipt |
| Mailing Address 17905 140TH LANE NE #115 | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City WOODINVILLE | State WA | Zip Code 98072-6803 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 6505732 |
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | <input type="text" value="21.00"/> |
| | <input type="text" value="351.00"/> | |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="47.67"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**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 48 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. CHRIS W WICK | | Date of Receipt |
| Mailing Address 14114 SE 192 STREET | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| RENTON | WA | 98058-0000 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 6505751 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | <input type="text" value="12.50"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="225.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. KELLY R WICKHAM | | Date of Receipt |
| Mailing Address 6706 N VAN DE CAR RD SE | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| PORT ORCHARD | WA | 98367-8506 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 6505752 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | <input type="text" value="25.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="450.00"/> | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. EDWARD N WILLIAMS JR | | Date of Receipt |
| Mailing Address 11109 NE 124TH LANE #B-307 | | <input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| KIRKLAND | WA | 98034-0000 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : 6505760 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| KING COUNTY DOT-METRO TRANSIT | OPERATOR | <input type="text" value="15.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="270.00"/> | |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="52.50"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**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 49 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. RUTH WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 13041 15TH NE

City SEATTLE State WA Zip Code 98125-4023

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
10 / 02 / 2014
Transaction ID : 6505766

Amount of Each Receipt this Period
20.00

B. RICHARD P WOOD
Full Name (Last, First, Middle Initial)

Mailing Address 8921 1ST STREET NE H204

City LAKE STEVENS State WA Zip Code 98258-8943

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
10 / 02 / 2014
Transaction ID : 6505776

Amount of Each Receipt this Period
12.50

C. GREG M WOODFILL
Full Name (Last, First, Middle Initial)

Mailing Address 123 SW 108TH

City SEATTLE State WA Zip Code 98146-2341

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
10 / 02 / 2014
Transaction ID : 6505777

Amount of Each Receipt this Period
12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00

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 50 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

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

Mailing Address 4610 MERIDIAN AVENUE N

City SEATTLE State WA Zip Code 98103-6936

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 595.85

Date of Receipt 10 / 02 / 2014
Transaction ID : 6505791

Amount of Each Receipt this Period 35.00

B. JOSEPH J BAHORICH
Full Name (Last, First, Middle Initial)

Mailing Address 3013 WOODVIEW DRIVE

City ALLISON PARK State PA Zip Code 15101-3943

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

Name of Employer PORT AUTH-ALLEG - PAT TRANSIT Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.40

Date of Receipt 10 / 03 / 2014
Transaction ID : 6509870

Amount of Each Receipt this Period 20.84

C. SASCHA CRAIG
Full Name (Last, First, Middle Initial)

Mailing Address 606 JAMES STREET

City TURTLE CREEK State PA Zip Code 15145-1549

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

Name of Employer PORT AUTH-ALLEG - PAT TRANSIT Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 229.30

Date of Receipt 10 / 03 / 2014
Transaction ID : 6509910

Amount of Each Receipt this Period 20.84

SUBTOTAL of Receipts This Page (optional)..... ▶ 76.68

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 51 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. MARY JO NEUMONT
Full Name (Last, First, Middle Initial)

Mailing Address 376 Anawanda Ave.

City Pittsburgh State PA Zip Code 15228-2439

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

Name of Employer AMALGAMATED TRANSIT UNION Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
10 / 03 / 2014
Transaction ID : 6509959

Amount of Each Receipt this Period
37.50

B. JEFFREY PEARSON
Full Name (Last, First, Middle Initial)

Mailing Address 716 FIFTH STREET

City WEST ELIZABETH State PA Zip Code 15088

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

Name of Employer PORT AUTH-ALLEG - PAT TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.40

Date of Receipt
10 / 03 / 2014
Transaction ID : 6509965

Amount of Each Receipt this Period
20.84

C. NANCY J REED
Full Name (Last, First, Middle Initial)

Mailing Address 70 CASTLE SHANNON BLVD

City PITTSBURGH State PA Zip Code 15228-2202

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

Name of Employer AMALGAMATED TRANSIT UNION Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 443.25

Date of Receipt
10 / 03 / 2014
Transaction ID : 6509967

Amount of Each Receipt this Period
49.25

SUBTOTAL of Receipts This Page (optional)..... ▶ 107.59

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 52 OF 82 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. JOHN GRIFFIN
Full Name (Last, First, Middle Initial)

Mailing Address 347 PENNVIEW DRIVE

City State Zip Code
PITTSBURGH PA 15235-4429

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

Name of Employer Occupation
PORT AUTH-ALLEG - PAT TRANSIT OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.40

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 09 / 2014

Transaction ID : 6510270

Amount of Each Receipt this Period
208.84

B. SHARON KELLY-VRONTOS
Full Name (Last, First, Middle Initial)

Mailing Address 115 LARCHWOOD DRIVE

City State Zip Code
TURTLE CREEK PA 15145-1125

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

Name of Employer Occupation
PORT AUTH-ALLEG - PAT TRANSIT OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 09 / 2014

Transaction ID : 6510274

Amount of Each Receipt this Period
25.00

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

Mailing Address 2022 Chateau St.

City State Zip Code
Pittsburgh PA 15233-1139

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

Name of Employer Occupation
AMALGAMATED TRANSIT UNION OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 09 / 2014

Transaction ID : 6510279

Amount of Each Receipt this Period
42.00

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 87.84 |
| 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 53 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. Wayne Melanson
Full Name (Last, First, Middle Initial)

Mailing Address P O BOX 9544

City NORTH DARTMOUTH State MA Zip Code 02747

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

Name of Employer UNION STREET BUS COM INC JOINT Occupation OPR

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
 10 / 09 / 2014

Transaction ID : 6510572

Amount of Each Receipt this Period
20.00

B. CLYDE L BECKHAM JR
Full Name (Last, First, Middle Initial)

Mailing Address 5951 14TH STREET

City SACRAMENTO State CA Zip Code 95822-2907

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

Name of Employer SACRAMENTO REG TRANSIT DIST Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 06 / 2014

Transaction ID : 6513258

Amount of Each Receipt this Period
25.00

C. VICTOR M GUERRA
Full Name (Last, First, Middle Initial)

Mailing Address 3929 TULE STREET

City WEST SACRAMENTO State CA Zip Code 95691-0000

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

Name of Employer SACRAMENTO REG TRANSIT DIST Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 06 / 2014

Transaction ID : 6513266

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **70.00**

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 54 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. DEBORAH VINYARD | | Date of Receipt M M / D D / Y Y Y Y Y 10 / 06 / 2014 Transaction ID : 6513376 |
| Mailing Address 6923 Lakewood Dr. W Suite B1 | | Amount of Each Receipt this Period 208.84 |
| City Tacoma | State WA | Zip Code 98467-3221 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer AMALGAMATED TRANSIT UNION | Occupation OPERATOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 208.40 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. PATRICIA R BROGAN | | Date of Receipt M M / D D / Y Y Y Y Y 10 / 06 / 2014 Transaction ID : 6513443 |
| Mailing Address 547 DWILLARD | | Amount of Each Receipt this Period 10.00 |
| City KALAMAZOO | State MI | Zip Code 49048-2253 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer AMALGAMATED TRANSIT UNION | Occupation OPERATOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 350.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. NAOMI I MABON | | Date of Receipt M M / D D / Y Y Y Y Y 10 / 06 / 2014 Transaction ID : 6513461 |
| Mailing Address 424 S DRAKE ROAD | | Amount of Each Receipt this Period 10.00 |
| City KALAMAZOO | State MI | Zip Code 49009-0000 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer AMALGAMATED TRANSIT UNION | Occupation OPERATOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 350.00 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 40.84 |
| 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 55 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. DEBRA K SOLOMON
Full Name (Last, First, Middle Initial)

Mailing Address 606 W SUNRISE CT

City SHELTON State WA Zip Code 98584-0000

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

Name of Employer GRAYS HARBOR COMPANY Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 06 / 2014

Transaction ID : 6513514

Amount of Each Receipt this Period
 30.00

B. KAREN D STITES
Full Name (Last, First, Middle Initial)

Mailing Address 2708 CHRRY STREET

City HOQUIAM State WA Zip Code 98550-0000

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

Name of Employer GRAYS HARBOR COMPANY Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 06 / 2014

Transaction ID : 6513549

Amount of Each Receipt this Period
 30.00

C. RONALD L COX
Full Name (Last, First, Middle Initial)

Mailing Address 8514 S SHYROCK RD

City GLASFORD State IL Zip Code 61533-9458

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

Name of Employer GREATER PEORIA MASS TRAN DIST Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2014

Transaction ID : 6513563

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 56 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. ESKER C BILGER JR
Full Name (Last, First, Middle Initial)

Mailing Address 2015 HUNTCLIFF DRIVE

City State Zip Code
GAMBRILLS DC 21054-0000

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

Name of Employer Occupation
WASH METRO AREA TRANSIT AUTH OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 11 / 2014

Transaction ID : 6513572

Amount of Each Receipt this Period
250.00

B. JACKIE L JETER
Full Name (Last, First, Middle Initial)

Mailing Address 711 HAACK PLACE

City State Zip Code
UPPER MARLBORO MD 20774-2164

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

Name of Employer Occupation
WASH METRO AREA TRANSIT AUTH OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 11 / 2014

Transaction ID : 6513574

Amount of Each Receipt this Period
75.00

C. ROLAND H JETER
Full Name (Last, First, Middle Initial)

Mailing Address 711 HAACK PLACE

City State Zip Code
UPPER MARLBORO MD 20774-2164

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

Name of Employer Occupation
WASH METRO AREA TRANSIT AUTH OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 11 / 2014

Transaction ID : 6513576

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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 57 OF 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. JIMMIE L MC COY

Mailing Address **PO BOX 5823**

City State Zip Code
CLEVELAND IL 44101-0000

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

Name of Employer Occupation
GREYHOUND LINES INC OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 / /
10 / 11 / 2014

Transaction ID : 6513580

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Christopher Graham

Mailing Address **615 West Genesee St.**

City State Zip Code
Syracuse NY 13204-2303

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

Name of Employer Occupation
AMALGAMATED TRANSIT UNION OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
307.84

Date of Receipt
 / /
10 / 11 / 2014

Transaction ID : 6513699

Amount of Each Receipt this Period
38.48

Full Name (Last, First, Middle Initial)
C. STEVEN F BECKER

Mailing Address **125 S. St.
Unit 343**

City State Zip Code
Vernon CT 06066-4468

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

Name of Employer Occupation
AMALGAMATED TRANSIT UNION OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 / /
10 / 10 / 2014

Transaction ID : 6513749

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **563.48**

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 58 OF 82 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. STEVEN F BECKER
Full Name (Last, First, Middle Initial)

Mailing Address 125 S. St.
Unit 343

City State Zip Code
Vernon CT 06066-4468

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

Name of Employer Occupation
AMALGAMATED TRANSIT UNION OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 10 / 2014
Transaction ID : 6513754

Amount of Each Receipt this Period
25.00

B. MARY FULLER
Full Name (Last, First, Middle Initial)

Mailing Address 19129 RAILROAD AVE

City State Zip Code
SONOMA CA 95476-6168

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

Name of Employer Occupation
GOLDEN GATE BRIDGE HIGHWAY TRAN OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 10 / 2014
Transaction ID : 6514017

Amount of Each Receipt this Period
25.00

C. CLIFFORD GARDNER
Full Name (Last, First, Middle Initial)

Mailing Address 70 WILLOW AVENUE

City State Zip Code
FAIRFAX CA 94930-1246

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

Name of Employer Occupation
GOLDEN GATE BRIDGE HIGHWAY TRAN OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 10 / 2014
Transaction ID : 6514019

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.00

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 59 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. PHILLIP GRAY JR
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2301

City SAN RAFAEL State CA Zip Code 94912-2301

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

Name of Employer GOLDEN GATE BRIDGE HIGHWAY TRAN Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 10 / 2014

Transaction ID : 6514022

Amount of Each Receipt this Period
30.00

B. RICK HENDERSON
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 7432

City COTATI State CA Zip Code 94931-7432

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

Name of Employer GOLDEN GATE BRIDGE HIGHWAY TRAN Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 10 / 2014

Transaction ID : 6514032

Amount of Each Receipt this Period
25.00

C. MICHAEL R LESESNE
Full Name (Last, First, Middle Initial)

Mailing Address 9522 CAMELOT DRIVE

City WINDSOR State CA Zip Code 95492-7973

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

Name of Employer GOLDEN GATE BRIDGE HIGHWAY TRAN Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 10 / 2014

Transaction ID : 6514051

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.00

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 60 OF 82 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. WILFRED M OWENS | | Date of Receipt M M / D D / Y Y Y Y Y 10 / 10 / 2014 |
| Mailing Address 336 OHIO STREET | | Transaction ID : 6514072 |
| City VALLEJO | State CA | Zip Code 94590-5053 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer GOLDEN GATE BRIDGE HIGHWAY TRAN | Occupation OPERATOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 420.00 | |
| | | Amount of Each Receipt this Period 420.00 |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. BETH PECK | | Date of Receipt M M / D D / Y Y Y Y Y 10 / 10 / 2014 |
| Mailing Address 185 North Redwood Dr. Suite 220 | | Transaction ID : 6514076 |
| City San Rafael | State CA | Zip Code 94903-1980 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer AMALGAMATED TRANSIT UNION | Occupation OPERATOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 405.00 | |
| | | Amount of Each Receipt this Period 45.00 |

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. KEVIN D THOMPSON | | Date of Receipt M M / D D / Y Y Y Y Y 10 / 10 / 2014 |
| Mailing Address PO BOX 1399 | | Transaction ID : 6514102 |
| City WINDSOR | State CA | Zip Code 95492-1399 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer GOLDEN GATE BRIDGE HIGHWAY TRAN | Occupation OPERATOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 225.00 | |
| | | Amount of Each Receipt this Period 25.00 |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 112.00 |
| 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 61 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

Full Name (Last, First, Middle Initial)
A. JOHNNY S WEEKLY

Mailing Address 1612 BIRCHWOOD COURT

| | | |
|---------------|-------|------------|
| City | State | Zip Code |
| SAN FRANCISCO | CA | 94134-3163 |

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

| | |
|---------------------------------|------------|
| Name of Employer | Occupation |
| GOLDEN GATE BRIDGE HIGHWAY TRAN | OPR |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2014
Transaction ID : 6514110

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. JOHN M HINK

Mailing Address 1008 DAMON COURT

| | | |
|------------|-------|------------|
| City | State | Zip Code |
| SANTA ROSA | CA | 95401-5336 |

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

| | |
|---------------------------------|------------|
| Name of Employer | Occupation |
| GOLDEN GATE BRIDGE HIGHWAY TRAN | OPERATOR |

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
 10 / 10 / 2014
Transaction ID : 6514171

Amount of Each Receipt this Period
21.00

Full Name (Last, First, Middle Initial)
C. RONALD L COX

Mailing Address 8514 S SHYROCK RD

| | | |
|----------|-------|------------|
| City | State | Zip Code |
| GLASFORD | IL | 61533-9458 |

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

| | |
|-------------------------------|------------|
| Name of Employer | Occupation |
| GREATER PEORIA MASS TRAN DIST | OPERATOR |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2014
Transaction ID : 6514504

Amount of Each Receipt this Period
10.00

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 56.00 |
| 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 62 OF 82 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. Paul B Neil
Full Name (Last, First, Middle Initial)

Mailing Address 1701 157TH AVENUE NE
#A101

City BELLEVUE State WA Zip Code 98008-2777

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 14 / 2014

Transaction ID : 6514513

Amount of Each Receipt this Period
25.00

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

Mailing Address 8513 MAIN STREET
#203

City EDMONDS State WA Zip Code 98026-6940

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 14 / 2014

Transaction ID : 6514514

Amount of Each Receipt this Period
25.00

C. Clint C DeVoss Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 3225 GALVIN RD

City CENTRALIA State WA Zip Code 98531-9061

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 14 / 2014

Transaction ID : 6514515

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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 63 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. Judy Young
Full Name (Last, First, Middle Initial)

Mailing Address 7603 SOUTH 112TH STREET

| | | |
|-----------------|-------------|------------------------|
| City SEATTLE | State WA | Zip Code 98178-3227 |
|-----------------|-------------|------------------------|

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

| | |
|---|------------------------|
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR |
|---|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 14 | | 2014 |

Transaction ID : 6514516

Amount of Each Receipt this Period
25.00

B. Neal Safrin
Full Name (Last, First, Middle Initial)

Mailing Address 5451 NE 203RD PLACE

| | | |
|--------------------------|-------------|------------------------|
| City LAKE FOREST PARK | State WA | Zip Code 98155-0000 |
|--------------------------|-------------|------------------------|

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

| | |
|---|------------------------|
| Name of Employer KING COUNTY DOT-METRO TRANSIT | Occupation OPERATOR |
|---|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 14 | | 2014 |

Transaction ID : 6514517

Amount of Each Receipt this Period
25.00

C. MARLA A HENINGTON
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 391

| | | |
|-----------------|-------------|------------------------|
| City DECATUR | State IL | Zip Code 62525-0000 |
|-----------------|-------------|------------------------|

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

| | |
|--|------------------------|
| Name of Employer PROGRESSIVE TRANSP SVC INC | Occupation OPERATOR |
|--|------------------------|

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 |
| 10 | | 14 | | 2014 |

Transaction ID : 6514535

Amount of Each Receipt this Period
10.00

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 60.00 |
| 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 65 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. JOHNNY SALAZAR
Full Name (Last, First, Middle Initial)

Mailing Address 141 JEFFERSON STREET
#B

City CHULA VISTA State CA Zip Code 91910-1372

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

Name of Employer SAN DIEGO TRANSIT CORP Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 14 / 2014
Transaction ID : 6515790

Amount of Each Receipt this Period
20.00

B. PATRICIA R BROGAN
Full Name (Last, First, Middle Initial)

Mailing Address 547 DWILLARD

City KALAMAZOO State MI Zip Code 49048-2253

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

Name of Employer AMALGAMATED TRANSIT UNION Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 14 / 2014
Transaction ID : 6515835

Amount of Each Receipt this Period
10.00

C. NAOMI I MABON
Full Name (Last, First, Middle Initial)

Mailing Address 424 S DRAKE ROAD

City KALAMAZOO State MI Zip Code 49009-0000

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

Name of Employer AMALGAMATED TRANSIT UNION Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 14 / 2014
Transaction ID : 6515851

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.00

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 66 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. JOSE R BATISTA
Full Name (Last, First, Middle Initial)

Mailing Address 129 LABIN ST

City Providence State RI Zip Code 02909-0000

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt 10 / 11 / 2014
Transaction ID : 6516404

Amount of Each Receipt this Period 7.00

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

Mailing Address 9 OVERLOOK ROAD

City NARRAGANSETT State RI Zip Code 02882-1245

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 222.00

Date of Receipt 10 / 11 / 2014
Transaction ID : 6516446

Amount of Each Receipt this Period 6.00

C. KEVIN M COLE
Full Name (Last, First, Middle Initial)

Mailing Address 51 NORTH STREET

City CRANSTON State RI Zip Code 02920-1724

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 259.00

Date of Receipt 10 / 11 / 2014
Transaction ID : 6516451

Amount of Each Receipt this Period 7.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 20.00

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 67 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. DENNIS CONNOLLY | | Date of Receipt M M / D D / Y Y Y Y Y 10 / 11 / 2014 Transaction ID : 6516452 |
| Mailing Address 69 WHITEROCK ROAD P O BOX 66 | | Amount of Each Receipt this Period 10.00 |
| City WESTERLY | State RI | Zip Code 02891-1249 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer RHODE ISLAND PUBLIC TRANS AUTH | Occupation OPERATOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 372.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. ROBERT E DAVIS JR | | Date of Receipt M M / D D / Y Y Y Y Y 10 / 11 / 2014 Transaction ID : 6516469 |
| Mailing Address 82 VILLAGE DRIVE | | Amount of Each Receipt this Period 7.50 |
| City RIVERSIDE | State RI | Zip Code 02915-3951 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer RHODE ISLAND PUBLIC TRANS AUTH | Occupation OPERATOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 262.50 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. ADRIAN J. DELGADO | | Date of Receipt M M / D D / Y Y Y Y Y 10 / 11 / 2014 Transaction ID : 6516482 |
| Mailing Address 182 GROSVENOR AVENUE | | Amount of Each Receipt this Period 12.00 |
| City EAST PROVIDENCE | State RI | Zip Code 02914-3616 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer RHODE ISLAND PUBLIC TRANS AUTH | Occupation OPERATOR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 342.00 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 29.50 |
| 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 68 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. RAMON HICIANO
Full Name (Last, First, Middle Initial)

Mailing Address 46 LINCOLN AVENUE

City CRANSTON State RI Zip Code 02920-7743

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt 10 / 11 / 2014
Transaction ID : 6516547

Amount of Each Receipt this Period 6.00

B. CHRISTOPHER LEMIRE
Full Name (Last, First, Middle Initial)

Mailing Address 110 KICKEMUIT ROAD

City WARREN State RI Zip Code 02885-1928

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt 10 / 11 / 2014
Transaction ID : 6516585

Amount of Each Receipt this Period 6.00

C. ROGER LIMA JR
Full Name (Last, First, Middle Initial)

Mailing Address 4 JACKSON ST

City NORTH PROVIDENCE State RI Zip Code 02904-4223

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt 10 / 11 / 2014
Transaction ID : 6516590

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 22.00

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 69 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. DESIREE MATHIEU
Full Name (Last, First, Middle Initial)

Mailing Address 233 WATERMAN AVENUE

City State Zip Code
E PROVIDENCE RI 02914-3524

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

Name of Employer Occupation
RHODE ISLAND PUBLIC TRANS AUTH OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt
10 / 11 / 2014
Transaction ID : 6516605

Amount of Each Receipt this Period
6.00

B. WILLIAM MELGAR
Full Name (Last, First, Middle Initial)

Mailing Address 41 SUSSEX STREET

City State Zip Code
PROVIDENCE RI 02908-1716

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

Name of Employer Occupation
RHODE ISLAND PUBLIC TRANS AUTH OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 222.00

Date of Receipt
10 / 11 / 2014
Transaction ID : 6516620

Amount of Each Receipt this Period
6.00

C. THOMAS MILLS
Full Name (Last, First, Middle Initial)

Mailing Address 96 VEAZIE STREET

City State Zip Code
PROVIDENCE RI 02908-2457

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

Name of Employer Occupation
RHODE ISLAND PUBLIC TRANS AUTH OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 306.00

Date of Receipt
10 / 11 / 2014
Transaction ID : 6516625

Amount of Each Receipt this Period
9.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 21.00

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 70 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. VIRGINIA A MOFFITT
Full Name (Last, First, Middle Initial)

Mailing Address 90 GRANT AVE

City CRANSTON State RI Zip Code 02920-7718

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2014

Transaction ID : 6516626

Amount of Each Receipt this Period
 10.00

B. ARTHUR OLINK
Full Name (Last, First, Middle Initial)

Mailing Address 58 DALTON STREET

City RUMFORD State RI Zip Code 02916-2804

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

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
 10 / 11 / 2014

Transaction ID : 6516643

Amount of Each Receipt this Period
 6.00

C. FRANCIS F PLUTZNER
Full Name (Last, First, Middle Initial)

Mailing Address 361 DOROC AVENUE

City CRANSTON State RI Zip Code 02910-2921

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2014

Transaction ID : 6516665

Amount of Each Receipt this Period
 6.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 22.00

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 71 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. ERIC ST PIERRE
Full Name (Last, First, Middle Initial)

Mailing Address 46 HIGH STREET

City WARWICK State RI Zip Code 02886-1256

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 620.00

Date of Receipt 10 / 11 / 2014
Transaction ID : 6516721

Amount of Each Receipt this Period 20.00

B. RUTH SULLIVAN
Full Name (Last, First, Middle Initial)

Mailing Address 68 NARRAGANSETT AVENUE

City TIVERTON State RI Zip Code 02878-4620

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 418.00

Date of Receipt 10 / 11 / 2014
Transaction ID : 6516723

Amount of Each Receipt this Period 11.00

C. OWEN C SWEETLAND
Full Name (Last, First, Middle Initial)

Mailing Address 139 ROUNDS AVENUE

City RIVERSIDE State RI Zip Code 02915-1737

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 11 / 2014
Transaction ID : 6516725

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 41.00

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 72 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. DARYL O TATUM
Full Name (Last, First, Middle Initial)

Mailing Address 61 LEDGE ST

City Providence State RI Zip Code 02904-0000

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 222.00

Date of Receipt 10 / 11 / 2014
Transaction ID : 6516729

Amount of Each Receipt this Period 6.00

B. CHARLES E WILLIS
Full Name (Last, First, Middle Initial)

Mailing Address 267 OLD COUNTY ROAD

City SMITHFIELD State RI Zip Code 02917-0000

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt 10 / 11 / 2014
Transaction ID : 6516758

Amount of Each Receipt this Period 6.00

C. GARCELL BULLOCKS
Full Name (Last, First, Middle Initial)

Mailing Address 838 CORIANDER DRIVE APT V

City TORRANCE State CA Zip Code 90502-0000

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

Name of Employer LOS ANGELES CTY METRO TRAN AUT Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.25

Date of Receipt 10 / 06 / 2014
Transaction ID : 6523807

Amount of Each Receipt this Period 12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 24.50

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 73 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

| | | |
|---|--------------------------|--|
| Full Name (Last, First, Middle Initial) A. CARLOS CURIEL JR | | Date of Receipt |
| Mailing Address 12821 N RIM WAY | | <input type="text" value="M M"/> / <input type="text" value="D D"/> / <input type="text" value="Y Y Y Y"/> |
| City RANCHO CUCAMONGA State CA Zip Code 91739-0000 | | Transaction ID : 6523865 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer LOS ANGELES CTY METRO TRAN AUT Occupation OPERATOR | | <input type="text" value=""/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | <input type="text" value="20.00"/> |
| | | <input type="text" value="345.25"/> |

| | | |
|---|--------------------------|--|
| Full Name (Last, First, Middle Initial) B. HAGOP H HAGOPIAN | | Date of Receipt |
| Mailing Address 527 E CHEVY CHASE DRIVE #1 | | <input type="text" value="M M"/> / <input type="text" value="D D"/> / <input type="text" value="Y Y Y Y"/> |
| City GLENDALE State CA Zip Code 91205-0000 | | Transaction ID : 6523989 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer LOS ANGELES CTY METRO TRAN AUT Occupation OPERATOR | | <input type="text" value=""/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | <input type="text" value="20.84"/> |
| | | <input type="text" value="355.28"/> |

| | | |
|---|--------------------------|--|
| Full Name (Last, First, Middle Initial) C. JERRY L HENDERSON | | Date of Receipt |
| Mailing Address 3008 SHERWOOD STREET | | <input type="text" value="M M"/> / <input type="text" value="D D"/> / <input type="text" value="Y Y Y Y"/> |
| City LA PLACE State LA Zip Code 70068-2239 | | Transaction ID : 6532278 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | Amount of Each Receipt this Period |
| Name of Employer LOUISIANA TRANSIT COMPANY INC Occupation OPERATOR | | <input type="text" value=""/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | <input type="text" value="10.00"/> |
| | | <input type="text" value="210.00"/> |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="50.84"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text" value=""/> |

**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 74 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. SAMUEL MACLIES JR
Full Name (Last, First, Middle Initial)

Mailing Address 4635 ROSALIA DRIVE

City NEW ORLEANS State LA Zip Code 70127-0000

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

Name of Employer LOUISIANA TRANSIT COMPANY INC Occupation OPERATOR

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
 10 / 06 / 2014

Transaction ID : 6532286

Amount of Each Receipt this Period
 10.00

B. DONNIE K SMALL SR
Full Name (Last, First, Middle Initial)

Mailing Address 1619 31ST STREET

City KENNER State LA Zip Code 70065-4464

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

Name of Employer LOUISIANA TRANSIT COMPANY INC Occupation OPERATOR

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
 10 / 06 / 2014

Transaction ID : 6532288

Amount of Each Receipt this Period
 10.00

C. LYNETTE C THEODORE
Full Name (Last, First, Middle Initial)

Mailing Address 2064 LINCOLNSHIRE DRIVE

City MARRERO State LA Zip Code 70072-4640

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

Name of Employer LOUISIANA TRANSIT COMPANY INC Occupation OPERATOR

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
 10 / 06 / 2014

Transaction ID : 6532291

Amount of Each Receipt this Period
 10.00

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 30.00 |
| 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 75 OF 82 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. ARNOLD G THOMAS
Full Name (Last, First, Middle Initial)

Mailing Address 1416 ROOSEVELT BLVD

City KENNER State LA Zip Code 70062-6640

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

Name of Employer LOUISIANA TRANSIT COMPANY INC Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 06 / 2014
Transaction ID : 6532292

Amount of Each Receipt this Period 10.00

B. CARLOS A WESTLEY
Full Name (Last, First, Middle Initial)

Mailing Address 1001 ROOSEVELT BOULEVARD

City KENNER State LA Zip Code 70062-0000

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

Name of Employer LOUISIANA TRANSIT COMPANY INC Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 06 / 2014
Transaction ID : 6532294

Amount of Each Receipt this Period 10.00

C. JEFFREY A CASHION
Full Name (Last, First, Middle Initial)

Mailing Address 124 LOBSTER LANE

City CLINTON State TN Zip Code 37716-6188

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

Name of Employer KNOXVILLE TRANS AUTHORITY Occupation OPERATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 202.02

Date of Receipt 10 / 10 / 2014
Transaction ID : 6532326

Amount of Each Receipt this Period 9.62

SUBTOTAL of Receipts This Page (optional)..... ▶ 29.62

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 76 OF 82 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

Full Name (Last, First, Middle Initial)
A. MARY L CRIDER

Mailing Address 216 KIRKWOOD STREET

| | | |
|-------------------|-------------|------------------------|
| City KNOXVILLE | State TN | Zip Code 37914-0000 |
|-------------------|-------------|------------------------|

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

| | |
|---|------------------------|
| Name of Employer KNOXVILLE TRANS AUTHORITY | Occupation OPERATOR |
|---|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
202.02

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 10 | | 2014 |

Transaction ID : 6532331

Amount of Each Receipt this Period
9.62

Full Name (Last, First, Middle Initial)
B. EUNICE SMITH

Mailing Address 306 W. 100th St. #72

| | | |
|------------------|-------------|------------------------|
| City New York | State NY | Zip Code 10025-5333 |
|------------------|-------------|------------------------|

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

| | |
|---|------------------------|
| Name of Employer AMALGAMATED TRANSIT UNION | Occupation OPERATOR |
|---|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 03 | | 2014 |

Transaction ID : 6532665

Amount of Each Receipt this Period
25.00

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 |
|-----|---|-----|---|---------|

Amount of Each Receipt this Period

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 34.62 |
| TOTAL This Period (last page this line number only).....▶ | 4114.87 |

**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 checked="" 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 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. Cybersource Corp.

Mailing Address 1295 Charleston Road

City Mountainview State CA Zip Code 94043

Purpose of Disbursement
Bank Fee

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 02 / 2014

Transaction ID : 6533017

Amount of Each Disbursement this Period

71.95

Bank Fee

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

71.95

71.95

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Kurt Schrader For Congress

Mailing Address PO Box 3314

City Oregon City State OR Zip Code 97045

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Kurt Schrader

Category/
Type

Office Sought: House
 Senate
 President
State: OR District: 05

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 10 / 2014

Transaction ID : 6501866

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Eddie Bernice Johnson For Congress

Mailing Address 3102 Maple Avenue, Suite 605

City Dallas State TX Zip Code 75201

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Eddie Johnson

Category/
Type

Office Sought: House
 Senate
 President
State: TX District: 30

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 10 / 2014

Transaction ID : 6501870

Amount of Each Disbursement this Period

1500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Orman For US Senate Inc

Mailing Address PO Box 14814

City Lenexa State KS Zip Code 66285

Purpose of Disbursement
Void - Orman For US Senate Inc check dated 9/23/2014

011

Candidate Name

Gregory Orman

Category/
Type

Office Sought: House
 Senate
 President
State: KS District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 11 / 2014

Transaction ID : 6533918

Amount of Each Disbursement this Period

-5000.00

Void - Orman For US Senate Inc check dated 9/23/2014

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

-1000.00

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

-1000.00

**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)
AMALGAMATED TRANSIT UNION - COPE

Full Name (Last, First, Middle Initial)

A. Friends for Nelson W. Wolff

Mailing Address PO Box 830986

City San Antonio State TX Zip Code 78283

Purpose of Disbursement
Nelson Wolff, BEXAR COUNTY - JUDGE TX

011

Category/
Type

Candidate Name

Nelson W. Wolff

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 02 / 2014

Transaction ID : 6462306

Amount of Each Disbursement this Period

1000.00

Nelson Wolff, BEXAR COUNTY - JUDGE TX

Full Name (Last, First, Middle Initial)

B. Los Angeles County Federation of Labor, AFL-CIO

Mailing Address 2130 W. James M. Wood Blvd.

City Los Angeles State CA Zip Code 90006

Purpose of Disbursement
Contribution

012

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 10 / 2014

Transaction ID : 6501077

Amount of Each Disbursement this Period

25000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Committee to Elect Mike Sells

Mailing Address PO Box 12395

City Everett State WA Zip Code 98206

Purpose of Disbursement
Michael Sells, STATE HOUSE 38th WA

011

Category/
Type

Candidate Name

WA Rep. Michael Sells

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 10 / 2014

Transaction ID : 6501440

Amount of Each Disbursement this Period

950.00

Michael Sells, STATE HOUSE 38th WA

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

26950.00

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

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

Full Name (Last, First, Middle Initial)

A. Washington State Democratic Central Committee

Mailing Address 615 2nd Avenue
Suite 580

City Seattle State WA Zip Code 98104

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 6501442

Amount of Each Disbursement this Period

Contribution

Full Name (Last, First, Middle Initial)

B. Friends to Elect Toni L. Foulkes

Mailing Address 3045 W 63rd St
Suite 1E

City Chicago State IL Zip Code 60629

Purpose of Disbursement
Toni Foulkes, City of Chicago - Alderman 16th IL

Candidate Name

Toni L. Foulkes

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 6501845

Amount of Each Disbursement this Period

Toni Foulkes, City of Chicago - Alderman 16th IL

Full Name (Last, First, Middle Initial)

C. The Committee to Elect Jay C. Hoffman

Mailing Address PO Box 23738

City Belleville State IL Zip Code 62223

Purpose of Disbursement
Jay Hoffman, STATE HOUSE 113th IL

Candidate Name

Jay C. Hoffman

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 6501852

Amount of Each Disbursement this Period

Jay Hoffman, STATE HOUSE 113th IL

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

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

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

Full Name (Last, First, Middle Initial)

A. Citizens for Munoz

Mailing Address 2500 S St Louis Ave

City Chicago State IL Zip Code 60623

Purpose of Disbursement
Ricardo Munoz, City of Chicago - Alderman IL

Candidate Name

Ricardo Munoz

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

011

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 1 | 0 | | 2 | 0 | 1 | 4 |

Transaction ID : 6501858

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Ricardo Munoz, City of Chicago - Alderman IL

Full Name (Last, First, Middle Initial)

B. Committee to Elect Bobby Zirkin

Mailing Address 10995 Owings Mills Blvd
Suite 220

City Owings Mills State MD Zip Code 21117

Purpose of Disbursement
Robert Zirkin, STATE SENATE 11th MD

Candidate Name

MD Sen. Robert Zirkin

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

011

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 1 | 0 | | 2 | 0 | 1 | 4 |

Transaction ID : 6501883

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Robert Zirkin, STATE SENATE 11th MD

Full Name (Last, First, Middle Initial)

C. Friends of Tom Coale

Mailing Address 4739 Columbia Rd

City Ellicott City State MD Zip Code 21042

Purpose of Disbursement
Tom Coale, STATE HOUSE 9th MD

Candidate Name

Tom Coale

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

011

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 1 | 0 | | 2 | 0 | 1 | 4 |

Transaction ID : 6501886

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Tom Coale, STATE HOUSE 9th MD

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

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

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 2 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
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| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Friends of Dana Stein

Mailing Address 3501 Gardenview Rd

City Baltimore State MD Zip Code 21208

Purpose of Disbursement
Dana Stein, STATE HOUSE 11th MD

Candidate Name
MD Del. Dana Stein

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
10 / 10 / 2014

Transaction ID : 6501887

Amount of Each Disbursement this Period

Dana Stein, STATE HOUSE 11th MD

B.

Full Name (Last, First, Middle Initial)

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

C.

Full Name (Last, First, Middle Initial)

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

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

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