

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM
AUG 14 1 55 PM '96



Amalgamated Transit Union

5025 Wisconsin Ave., N.W., Washington, D.C. 20016-4139
202-537-1645 Fax 202-244-7824

Office of the International Secretary-Treasurer

August 14, 1996

Public Records Office
Federal Election Commission
999 E Street, NW
Washington, DC 20463

Dear Sir or Madam:

Enclosed please find a copy of the August 1996 report covering the period of July 1, 1996 through July 31, 1996 for Amalgamated Transit Union - COPE.

Trusting this meets with your satisfaction, I am

Sincerely,

Oliver W. Green
International Secretary-
Treasurer/COPE Director

/fsg
Enclosure

9249 0303 0742 00000000



REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

AUG 14 1 55 PM '96

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Amalgamated Transit Union - COPE		2. FEC IDENTIFICATION NUMBER C00032995
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 5025 Wisconsin Avenue, NW		
CITY, STATE and ZIP CODE Washington, DC 20016		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

Monthly Report Due On:

- February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31

- Twelfth day report preceding _____
(Type of Election)
election on _____ in the State of _____
- Thirtieth day report following the General Election on _____
in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
7/1/96 through 7/31/96		
6. (a) Cash on Hand January 1, 19 96		\$ 123,638.94
(b) Cash on Hand at Beginning of Reporting Period	\$ 195,682.51	
(c) Total Receipts (from Line 19)	\$ 49,291.78	\$ 363,255.24
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 244,974.29	\$ 486,894.18
7. Total Disbursements (from Line 30)	\$ 47,340.00	\$ 289,259.89
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 197,634.29	\$ 197,634.29
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ NONE	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ NONE	

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

Type or Print Name of Treasurer

Oliver W. Green

Signature of Treasurer

Oliver W. Green

Date

8/14/96

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

FEC FORM 3X

(revised 9/83)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 28**

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
Amalgamated Transit Union - COPE		FROM 7/1/96	TO 7/31/96	
		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	1,806.55	6,297.55	11(a)(i)
ii.	Unitemized	46,708.03	352,816.91	11(a)(ii)
iii.	Total (add i and ii) >	48,514.58	359,114.46	11(b)
b.	Political Party Committees			11(c)
c.	Other Political Committees (such as PACs)			11(d)
d.	Total Contributions (add a ii, b and c) >	48,514.58	359,114.46	12
12.	Transfers From Affiliated/Other Party Committees			13
13.	All Loans Received			14
14.	Loan Repayments Received			15
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			16
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			17
17.	Other Federal Receipts (Dividends, Interest, etc.)	777.20	4,140.78	18
18.	Transfers from Nonfederal Account for Joint Activity			19
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	49,291.78	363,255.24	20
20.	Total Federal Receipts (subtract line 18 from line 19) >	49,291.78	363,255.24	
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(i)
i.	Federal Share			21(b)
ii.	Non-Federal Share	240.00	744.00	21(c)
b.	Other Federal Operating Expenditures			22
c.	Total Operating Expenditures (add a i, a ii, and b) >	240.00	744.00	23
22.	Transfers to Affiliated/Other Party Committees		91,615.89	24
23.	Contributions to Federal Candidates/Committees and Other Political Committees	46,100.00	197,850.00	25
24.	Independent Expenditures (use Schedule E)			26
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			27
26.	Loan Repayments Made			28(a)
27.	Loans Made			28(b)
28.	Refunds of Contributions To:			28(c)
a.	Individuals/Persons Other Than Political Committees			28(d)
b.	Political Party Committees			29
c.	Other Political Committees (such as PACs)			30
d.	Total Contribution Refunds (add a, b and c) >	1,000.00	9,050.00	31
29.	Other Disbursements			
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	47,340.00	289,259.89	
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	47,340.00	289,259.89	
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	48,514.58	359,114.46	
33.	Total Contribution Refunds (from line 28d)	---	---	
34.	Net Contributions (other than loans)(subtract line 33 from 32)	48,514.58	359,114.46	
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	240.00	744.00	
36.	Offsets to Operating Expenditures (from line 15)	---	---	
37.	Net Operating Expenditures (subtract line 36 from 35) >	240.00	744.00	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 4

FOR LINE NUMBER 11 (a) (1)

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NAME OF COMMITTEE (In Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barle W. Putnam 9116 Coronado Terrace Fairfax, VA 22031	Amalgamated Transit Union		-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation General Counsel - Retired		
	Aggregate Year-to-Date > \$ 250.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eugene F. Edwards P. O. Box 1265 Medical Lake, WA, 99022	Retired		-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator - Retired		
	Aggregate Year-to-Date > \$ 250.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William G. McLean 594 Lochbury Court San Jose, CA 95123	Santa Clara County Transit District	7/11/96	26.89
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator		
	Aggregate Year-to-Date > \$ 211.86		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Loretta A. Springer 1600 Decker Avenue San Martin, CA 95046	Santa Clara County Transit District	7/11/96	25.66
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator		
	Aggregate Year-to-Date > \$ 202.28		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John W. Campbell 5259 Running Bear Drive San Jose, CA 95136	Santa Clara County Transit District	7/11/96	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator		
	Aggregate Year-to-Date > \$ 400.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Madonna T. Baxter 4410 Fremont Street Boise, ID 83706	Boise Urban Stages		-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator		
	Aggregate Year-to-Date > \$ 205.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Craig D. Whitehead 6346 Montgomery Road, #14 Cincinnati, OH 45213	SW Ohio Regional Transit Authority	7/12/96	45.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator		
	Aggregate Year-to-Date > \$ 225.00		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 4
FOR LINE NUMBER 11 (a) (1)

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NAME OF COMMITTEE (In Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul R. Mathews 6406 Kinights of Columbus North Little Rock, AR 72118	Central Arkansas Trans.		-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator	Aggregate Year-to-Date > \$ 250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Larry J. Hanley 40-D Dinsmore Street Staten Island, NY 10314	New York City Transit Authority	7/23/96	280.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator	Aggregate Year-to-Date > \$ 900.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lawrence Labrocco 1701 85th Street Brooklyn, New York 11214	New York City Transit Authority	7/23/96	168.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator	Aggregate Year-to-Date > \$ 504.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Victor Suarez 300 Bard Avenue Staten Island, NY 10310	New York City Transit Authority	7/23/96	380.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator	Aggregate Year-to-Date > \$ 330.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David J. Toomey 144 Ocean Avenue N. Middletown, NY 07748	New York City Transit Authority	7/23/96	80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator	Aggregate Year-to-Date > \$ 330.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James W. Wilson 34 LaGuardia Avenue Staten Island, NY 10314	New York City Transit Authority	7/23/96	120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator	Aggregate Year-to-Date > \$ 360.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rita F. Jensen P.O. Box 53 Staten Island, NY 10309	New York City Transit Authority	7/23/96	120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator	Aggregate Year-to-Date > \$ 465.00	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 4
FOR LINE NUMBER 11 (a) (i)

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NAME OF COMMITTEE (In Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Vincent Mecca 2 Delafield Place Staten Island, NY 10310	New York City Transit Authority	7/23/96	120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator		
	Aggregate Year-to-Date > \$	360.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John C. Goldstein 3058 North Stowell Avenue Milwaukee, WI 53211	Milwaukee Transport Service, Inc.	7/22/96	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator		
	Aggregate Year-to-Date > \$	240.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lloyd Perkins, Sr. 4171 North 20th Street Milwaukee, WI 53209	Milwaukee Transport Service, Inc.	7/22/96	52.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator		
	Aggregate Year-to-Date > \$	208.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Richard T Zaib 83-57 118th Street Kew Gardens, NY 11415	New York City Transit Authority	7/8/96	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator		
	Aggregate Year-to-Date > \$	500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Holly Douglas 1015 Olive Street Indianapolis, IN 46203	Indianapolis Public Transportation Corp.	-	-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator		
	Aggregate Year-to-Date > \$	260.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Charles L. Pettus 6737 Kincheloe Avenue Baltimore, MD 21207	Mass Transit Administration	7/	-0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator		
	Aggregate Year-to-Date > \$	250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Theodore N. Closter 609 South Hayden Drive Escondido, CA 92027	San Diego Transit Corporation	7/29/96	25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator		
	Aggregate Year-to-Date > \$	337.00	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 4

FOR LINE NUMBER 11 (a) (i)

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NAME OF COMMITTEE (in Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jerry L. Kleiboecker 5015 Comanche, #L La Mesa, CA 91941	San Diego Transit Corporation	7/29/96	44.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator	Aggregate Year-to-Date > \$ 295.00	
B. Full Name, Mailing Address and ZIP Code Ivey Glenn Smith 701 Alicia Court Garner, NC 27529	Name of Employer Tri-State Transit Authority	Date (month, day, year)	Amount of Each Receipt this Period -0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator - Retired	Aggregate Year-to-Date > \$ 300.00	
C. Full Name, Mailing Address and ZIP Code Paul Eugene Owsley 1034 Bradford Place West Des Moines, IA 50266	Name of Employer Greyhound Lines, Inc.	Date (month, day, year)	Amount of Each Receipt this Period -0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation Operator - Retired	Aggregate Year-to-Date > \$ 250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1,806.55

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NationsBank 1501 Pennsylvania Avenue, NW Washington, DC 20013	Lamp Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	7/31/96	240.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	240.00

2025 RELEASE UNDER E.O. 14176

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 5

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
96 Coyne for Congress Committee P.O. Box 81064 Cleveland, OH 44181 OH	Campaign Contribution	7/2/96	800.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Judy Hancock for Congress Committee P.O. Box 7037 Shawnee Mission, KS 66207-0307 KS	Campaign Contribution	7/2/96	500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Dan Williams for Congress P.O. Box 2837 Boise, ID 83701-2837 ID	Campaign Contribution	7/3/96	500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Coyne for Congress P.O. Box 75214 Washington, DC 20013-5214 PA	Campaign Contribution	7/3/96	1,000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Citizens for John Oliver 38 Ivy Street, SE Washington, DC 20003 MA	Campaign Contribution	7/3/96	1,000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Boswell for Congress Committee 1401 North Jefferson, #D Indianola, IA 50125 IA	Campaign Contribution	7/3/96	500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Democratic Legislative Campaign Comm. 430 South Capitol Street, SE Washington, DC 20003 DC	Campaign Contribution	7/5/96	2,000.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		
Friends of Dick Durbin P.O. Box 75214 Washington, DC 20013-5214 IL	Campaign Contribution	7/9/96	2,500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Congressman Bart Gordon Committee P.O. Box 2008 Murfreesboro, TN 37133 TN	Campaign Contribution	7/9/96	1,000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 21 OF 5

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Chuck Jolly for Congress P.O. Box 25366 Chattanooga, TN 37422	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/10/96	500.00
Tom Horton for Congress P.O. Box 3066 Merrifield, VA 22116	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/10/96	1,000.00
Weinberg for Congress P.O. Box 510 Sperryville, VA 22740	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/10/96	500.00
Friends of Carl Levin 236 Massachusetts Avenue, NE, #202 Washington, DC 20002	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/11/96	1,000.00
Baccera for Congress P.O. Box 75214 Washington, DC 20013-5214	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/18/96	1,000.00
Friends of Jerry Klecaka P.O. Box 75214 Washington, DC 20013-5214	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/18/96	1,000.00
Hoosiers for Tim Roemer 4301 Wilson Blvd. Arlington, VA 22203-1860	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/18/96	500.00
Committee to Elect Winston Bryant- US Senate P.O. Box 340B3 Little Rock, AR 72283	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/18/96	1,000.00
Abercrombie for Congress P.O. Box 2884 Washington, DC 20013	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/18/96	500.00

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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PAGE 3 OF 5

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

Amalgamated Transit Union - CUPA

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Lee Rasch P.O. Box 65 LaCrosse, WI 54602	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/18/96	500.00
Thurman for Congress 3610 38th Street, NW, #F270 Washington, DC 20016	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/18/96	500.00
Elect Kucinich to Congress 10674 Lorain Avenue Cleveland, OH 44111	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/18/96	350.00
Wellstone for Senate P.O. Box 65588 St. Paul, MN 55165	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/18/96	450.00
Friends of Senator Carl Levin P.O. Box 47368 Oak Park, MI 48237	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/18/96	1,000.00
Lofgren for Congress 1401 Parkmoor Avenue San Jose, CA 95126	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/18/96	3,000.00
Connie Caliazzo DeJuliis for Congress P.O. Box 7768 Essex, MD 21221	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/18/96	2,500.00
Baesler for Congress P.O. Box 2884 Washington, DC 20013	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/18/96	500.00
Martin Frost Campaign Committee P.O. Box 4219 Dallas, TX 75208	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/19/96	1,500.00

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Bud Cramer 4301 Wilson Blvd. Arlington, VA 22203-1860 AL	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/19/96	500.00
Coles for Congress, Inc. 2617 Sandy Plains Road, Suite C Marietta, GA 30066 GA	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/19/96	5,000.00
Bill Martini for Congress 1064 Pompton Avenue Cedar Grove, NJ 07009 NJ	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/96	1,500.00
Price for Congress P.O. Box 1986 Raleigh, NC 27602 NC	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/96	1,000.00
Quinn for Congress 1212 North Vernon Street Arlington, VA 22201 NY	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/96	1,500.00
Bob Ney for Congress 1212 North Vernon Street Arlington, VA 22201 OH	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/96	1,500.00
Friends of Bennie Thompson P.O. Box 100 Bolton, MS 39041 MS	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/96	1,000.00
Friends of Senator Carl Levin P.O. Box 4736B Oak Park, MI 48237 MI	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/96	1,000.00
Trotter for Congress Committee P.O. Box 3069 Clarksville, TN 37043-3069 TN	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/96	500.00

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ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

Amalgamated Transit Union - COPE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Patrick Kennedy P.O. Box 1356 Providence, RI 02901	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/96	2,000.00
Hoffman for Congress Committee 107 1/2 East Main Collinsville, IL 62234	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/96	500.00
Friends of Tom Strickland, Inc. 1761 Ogden Street Denver, CO 80218	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/96	1,000.00
Diana DeGette for Congress, Inc. 770 Grant Street, Suite 218 Denver, CO 80203	Campaign Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/96	500.00
Ellen Tauscher for Congress P.O. Box 2889 Danville, CA 94526	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/96	500.00
Dugan for Congress 25 NW Minnesota, Suite 5 Bend, OR 97701	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/96	1,000.00

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46,100.00

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ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

Amalgamated Transit Union - COPE

COPE - 1035 - 1035

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Knoll for Treasurer P.O. Box 4524 Pittsburgh, PA 15205 PA	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/96	500.00
B. Full Name, Mailing Address and ZIP Code Committee to Elect Michael C. Smith 2636 Timberglen Drive Wexford, PA 15090 PA	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/96	250.00
C. Full Name, Mailing Address and ZIP Code Committee to Elect Mike Veon P.O. Box 555 Federal Square Station Harrisburg, PA 17108 PA	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/96	250.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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Federal Election Commission
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