

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines AMALGAMATED TRANSIT UNION-COPE

ADDRESS (number and street) 5025 WISCONSIN AVE. N.W. WASHINGTON DC 20016

2. FEC IDENTIFICATION NUMBER C00032995 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special. Election on 11 07 2006 in the State of. (d) 30-Day Post -Election Report for the: General, Runoff, Special. Election on in the State of

5. Covering Period 10 01 2006 through 10 18 2006

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 Mr. Oscar Owens Signature of Treasurer Electronically Filed by Mr. Oscar Owens Date 10 26 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
AMALGAMATED TRANSIT UNION-COPE

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 1 | 8 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | | | | | |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|-----------|
| 6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 6 | | 104302.24 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 6 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 71095.01 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 30143.02 | 397858.80 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 101238.03 | 502161.04 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 29500.00 | 430423.01 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 71738.03 | 71738.03 | | | | | | | | |
| 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**

Write or Type Committee Name
AMALGAMATED TRANSIT UNION-COPE

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

 To:

| | |
|---|---|
| M | M |
| 1 | 0 |

| | |
|---|---|
| D | D |
| 1 | 8 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 6 |

| 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 | 2678.51 | 14335.41 |
| (i) Itemized (use Schedule A) | 27464.51 | 380128.60 |
| (ii) Unitemized | 30143.02 | 394464.01 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 30143.02 | 394464.01 |
| 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 | 500.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 2894.79 |
| 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 Transfer (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)) | 30143.02 | 397858.80 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 30143.02 | 397858.80 |

DETAILED SUMMARY PAGE

of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share..... | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures..... | 0.00 | 0.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... | 0.00 | 0.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 16000.00 | 324800.00 |
| 24. Independent Expenditure (use Schedule E) | 0.00 | 1471.36 |
| 25. Coordinated Expenditures Made by Party Committees (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..... | 13500.00 | 104151.65 |
| 30. Federal Election Activity (2 U.S.C 431(20)) | | |
| (a) Shared 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)).. | 29500.00 | 430423.01 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 29500.00 | 430423.01 |

DETAILED SUMMARY PAGE
of Disbursements

| 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) | 30143.02 | 394464.01 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 30143.02 | 394464.01 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 0.00 | 0.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 0.00 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 / 48 |
| | <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

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Melissa A. Adams | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 4120 34th Avenue South | | Transaction ID: SA11A1.13741 |
| City State Zip Code Seattle WA 98118 | Amount of Each Receipt this Period 25.00 | |
| 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 ▼ 225.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Mr. Paul J. Bachtel | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 8513 Main Street #203 | | Transaction ID: SA11A1.13729 |
| City State Zip Code Edmonds WA 98026 | Amount of Each Receipt this Period 50.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County Metro Transit | Occupation Transit Employee | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 223.50 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Mr. Paul A. Baenen | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 9525 College Way North | | Transaction ID: SA11A1.13754 |
| City State Zip Code Seattle WA 98103 | Amount of Each Receipt this Period 30.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County Metro Transit | Occupation Transit Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 270.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 105.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 / 48 |
| | <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

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Mr. Joseph J. Bahorich | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 6 |
| Mailing Address 5253 Duncan Street | | Transaction ID: SA11A1.13698 |
| City State Zip Code Pittsburgh PA 15201 | Amount of Each Receipt this Period 20.84 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Port Authority of Allegheny | Occupation Transit 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. Mr. Robert H. Baker | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 |
| Mailing Address 6400 Oakley Terrace | | Transaction ID: SA11A1.13684 |
| City State Zip Code Frederick MD 21701 | Amount of Each Receipt this Period 42.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Amalgamated Transit Union | Occupation International Vice President | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 378.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Mr. Harold R. Bakke | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 4123 Francis Avenue North | | Transaction ID: SA11A1.13706 |
| City State Zip Code Seattle WA 98103-7730 | Amount of Each Receipt this Period 25.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County Metro Transit | Occupation Transit 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) ▶ | 87.84 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 / 48 |
| | <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

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Mr. Robert E. Bangs | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 2411 South 248th Street #D-12 | | Transaction ID: SA11A1.13707 |
| City State Zip Code Kent WA 98032-4070 | Amount of Each Receipt this Period 25.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County Metro Transit | Occupation Transit operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 225.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Ms. Bernice F. Barnes | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 6 |
| Mailing Address 4714 Gunther Street | | Transaction ID: SA11A1.13759 |
| City State Zip Code Capitol Heights MD 20743-3925 | Amount of Each Receipt this Period 25.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Wash. Metro. Area Trans. Auth. | Occupation Transit operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 225.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Garcell Bullock | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 6 |
| Mailing Address 9132-8th Avenue | | Transaction ID: SA11A1.13762 |
| City State Zip Code Inglewood CA 90305 | Amount of Each Receipt this Period 12.50 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer LA City Metro Trans. Auth. | Occupation Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 237.50 | |

| | |
|--|-------|
| 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) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 / 48 |
| | <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"/> | <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

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Mr. Anthony R. Caldart | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 6 |
| Mailing Address 901 Rolling Rock Road | | Transaction ID: SA11A1.13701 |
| City State Zip Code Pittsburgh PA 15234 | Amount of Each Receipt this Period 1.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Port Authority of Allegheny Co | Occupation transit operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 254.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Mr. Ray H. Campbell | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 28648 226th Avenue SE | | Transaction ID: SA11A1.13708 |
| City State Zip Code Maple Valley WA 98038 | Amount of Each Receipt this Period 27.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County Metro Transit | Occupation Transit Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 242.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Ms Lisa B. Carter | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 6705 Flora Avenue, South | | Transaction ID: SA11A1.13743 |
| City State Zip Code Seattle WA 98108 | Amount of Each Receipt this Period 50.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County Metro Transit | Occupation Transit worker | |
| 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) ▶ | 78.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 / 48 |
| | <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

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Ms Mary E. Cavaliere | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 5705 236th Street, SW | | Transaction ID: SA11A1.13756 |
| City State Zip Code Mount Lake Terrace WA 98043 | Amount of Each Receipt this Period 25.00 | |
| 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 ▼ 225.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Ms Vida D. Chatman | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 4912 42nd Avenue, S | | Transaction ID: SA11A1.13732 |
| City State Zip Code Seattle WA 98118 | Amount of Each Receipt this Period 25.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County DOT-Metro Transit | Occupation Transit Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 210.70 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Mr. William G. Clifford | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 161 22nd Avenue | | Transaction ID: SA11A1.13722 |
| City State Zip Code Seattle WA 98122-6035 | Amount of Each Receipt this Period 24.60 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County Metro Transit | Occupation Transit Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 220.30 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 74.60 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 / 48 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Mr. Charles Cook | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 |
| Mailing Address P.O. Box 5322 | | Transaction ID: SA11A1.13683 |
| City State Zip Code Petaluma CA 94955 | Amount of Each Receipt this Period 42.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Amalgamated Transit Union | Occupation International Vice President | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 378.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Mr. Edward J. Craig | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 14018 SE 121st Street | | Transaction ID: SA11A1.13723 |
| City State Zip Code Renton WA 98059 | Amount of Each Receipt this Period 25.32 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County Metro Transit | Occupation Transit operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 227.88 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Mr. Mark J. De Bord | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 12510 Valley Avenue East | | Transaction ID: SA11A1.13739 |
| City State Zip Code Puyallup WA 98372 | Amount of Each Receipt this Period 30.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County Metro Transit | Occupation Transit Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 270.00 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 97.32 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 / 48 |
| | <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"/> | <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. Full Name (Last, First, Middle Initial)
Mr. Joseph G. De Fluri

Mailing Address 26420 197th Place SE

City State Zip Code
Kent WA 98042

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

Name of Employer King County Metro Transit Occupation Transit 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
1 0 / 0 9 / 2 0 0 6

Transaction ID: SA11A1.13731

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Robyn E. Diehl

Mailing Address 18247 1st Avenue, South #G1

City State Zip Code
Seattle WA 98148

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

Name of Employer King County DOT, Metro Transit Occupation Transit employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 6

Transaction ID: SA11A1.13746

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Sabatino DiNardo, Jr.

Mailing Address 5347 Page Drive

City State Zip Code
Pittsburgh PA 15236

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

Name of Employer Port Authority Allegheny Co Occupation Transit employee

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.40

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.13697

Amount of Each Receipt this Period
20.84

SUBTOTAL of Receipts This Page (optional) ► 95.84

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 / 48 |
| | <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. Full Name (Last, First, Middle Initial)
Mr. Jeffrey S. DiPerna

Mailing Address 130 Falcon Ridge Drive

City State Zip Code
North Huntingdon PA 15642

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

Name of Employer Port Authority of Allegheny Co
Occupation Transit worker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.40

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.13695

Amount of Each Receipt this Period
20.84

B. Full Name (Last, First, Middle Initial)
Mr. Robert J. Dowd

Mailing Address P.O. Box 24362

City State Zip Code
Seattle WA 98124-0362

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

Name of Employer King County Metro Transit
Occupation Transit 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
1 0 / 0 9 / 2 0 0 6

Transaction ID: SA11A1.13730

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Mr. Edward W. Duffy

Mailing Address 1214 Broadway Avenue Apt. 4

City State Zip Code
McKees Port PA 15136

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

Name of Employer Port Authority Transit
Occupation 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
1 0 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.13693

Amount of Each Receipt this Period
20.84

| | | |
|--|---|-------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 66.68 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 / 48 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) A. David A. Earle | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | |
| Mailing Address 3723 NE 777th Street #1 | | Transaction ID: SA11A1.13726 | |
| City State Zip Code Seattle WA 98115-8027 | Amount of Each Receipt this Period 25.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer King County DOT-Metro Transit | Occupation Transit operator | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 225.00 | | |

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) B. Mr. Dennis J. Echols | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | |
| Mailing Address 11820 40th Avenue, south | | Transaction ID: SA11A1.13753 | |
| City State Zip Code Tukwila WA 98168 | Amount of Each Receipt this Period 20.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer King Co. DOT-Metro Transit | Occupation Operator | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 220.00 | | |

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) C. Mr. Greg M. Enge | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | |
| Mailing Address 3640 Fawcett Avenue | | Transaction ID: SA11A1.13719 | |
| City State Zip Code Tacoma WA 98408-6846 | Amount of Each Receipt this Period 24.60 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer King County Metro Transit | Occupation Transit Operator | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 217.53 | | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 69.60 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 / 48 |
| | <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

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Mr. David S. Fairbanks | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 8622 202nd SW | | Transaction ID: SA11A1.13718 |
| City State Zip Code Edmonds WA 98026-6644 | Amount of Each Receipt this Period 30.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County Metro Transit | Occupation Transit 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. Mr. Charles A. P. Farrell | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 4340 Cheasty Boulevard South | | Transaction ID: SA11A1.13720 |
| City State Zip Code Seattle WA 98108-1553 | Amount of Each Receipt this Period 20.75 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County Metro Transit | Occupation Transit Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 274.50 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Mr. Stephen S. Farrell | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address 150 Ocean Avenue | | Transaction ID: SA11A1.13757 |
| City State Zip Code Cranston RI 02905 | Amount of Each Receipt this Period 2.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Rhode Island Public Transit Au | Occupation Transit operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 281.00 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 52.75 |
| TOTAL This Period (last page this line number only) ▶ | [] |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 16 / 48 |
| | <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"/> | <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

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Mr. John Franchino | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6 |
| Mailing Address 8751 Stanwell Street | | Transaction ID: SA11A1.13764 |
| City State Zip Code San Diego CA 92126-3211 | Amount of Each Receipt this Period 13.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer ATC Vancorn Inc. of California | Occupation Transit Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 247.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Joseph D. Gaudette | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6 |
| Mailing Address 67 Old Thompson Road | | Transaction ID: SA11A1.13760 |
| City State Zip Code Buxton ME 04093 | Amount of Each Receipt this Period 40.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Greater Portland Transit Dist. | Occupation Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 300.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Mr. Ronald C. Glimm | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 5214 157th Place SW | | Transaction ID: SA11A1.13737 |
| City State Zip Code Edmonds WA 98026-4706 | Amount of Each Receipt this Period 25.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County Metro Transit | Occupation Transit Employee | |
| 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) ▶ | 78.00 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 / 48 |
| | <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

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Mr. Joseph H. Gotcher | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6 |
| Mailing Address 918 La Presa Avenue | | Transaction ID: SA11A1.13765 |
| City State Zip Code Spring Valley CA 91977-4341 | Amount of Each Receipt this Period 20.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer ATC Vancorn Inc. of California | Occupation Transit Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 300.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Ms Brigitte Graupe | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 342 North 71st | | Transaction ID: SA11A1.13745 |
| City State Zip Code Seattle WA 98103-5224 | Amount of Each Receipt this Period 25.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County DOT - Metro Transit | Occupation Transit Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 225.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Ms Debbie A. Green | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 2020 E. 63rd Street | | Transaction ID: SA11A1.13748 |
| City State Zip Code Tacoma WA 98404 | Amount of Each Receipt this Period 50.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County DOT Metro Transit | Occupation Transit Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 220.15 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 95.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 18 / 48 |
| | <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. Full Name (Last, First, Middle Initial)
Ms Esther L. Hankerson

Mailing Address 23005 NE 150th

City State Zip Code
Woodinville WA 98072

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

Name of Employer
King County DOT-Metro Transit

Occupation
Transit Operator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 9 / 2 0 0 6

Transaction ID: SA11A1.13721

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Mr Lawrence Hanley

Mailing Address 40-D Dinsmore Street

City State Zip Code
Staten Island NY 10314

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

Name of Employer
Amalgamated Transit Union

Occupation
International Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
378.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: SA11A1.13690

Amount of Each Receipt this Period
42.00

C. Full Name (Last, First, Middle Initial)
Mr. Donald T. Hansen

Mailing Address 12016 Bronson Street, SE

City State Zip Code
Tenino WA 98589

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

Name of Employer
Amalgamated Transit Union

Occupation
International Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
378.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: SA11A1.13682

Amount of Each Receipt this Period
42.00

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 109.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 19 / 48 |
| | <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

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Ms Karen Head | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 |
| Mailing Address 1930 New Hampshire Avenue, NW #18 | | Transaction ID: SA11A1.13687 |
| City State Zip Code Washington DC 20009 | Amount of Each Receipt this Period 25.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Amalgamated Transit Union | Occupation Attorney | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 225.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Ronald J. Heintzman | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 |
| Mailing Address 12126 Meridian Road, NE | | Transaction ID: SA11A1.13689 |
| City State Zip Code Mt. Angel OR 97362 | Amount of Each Receipt this Period 45.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Amalgamated Transit Union | Occupation International Vice President | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 405.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. James L. Hermanson, Jr. | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 901 Taylor Avenue N. #306 | | Transaction ID: SA11A1.13717 |
| City State Zip Code Seattle WA 98109 | Amount of Each Receipt this Period 25.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King Co. DOT - DOT Metro Trans | Occupation transit 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) ▶ | 95.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 / 48 |
| | <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

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. Ms Regina D. Jackson | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | |
| Mailing Address P.O. Box 1138 | | Transaction ID: SA11A1.13755 | |
| City State Zip Code Maple Valley WA 98038 | | Amount of Each Receipt this Period 50.00 | |
| 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 ▼ 430.00 | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) B. Mr. Jerry L. Jacobs | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | |
| Mailing Address 2112 North 41st | | Transaction ID: SA11A1.13727 | |
| City State Zip Code Seattle WA 98103 | | Amount of Each Receipt this Period 35.00 | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer King County Metro Transit | | Occupation Transit Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 235.84 | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) C. Ms Penny W. Jacobson | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | |
| Mailing Address 108 5th Avenue S #4L | | Transaction ID: SA11A1.13751 | |
| City State Zip Code Seattle WA 98104 | | Amount of Each Receipt this Period 25.00 | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer King Co DOT - Metro Transit | | Occupation transit 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) ▶ | 110.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 21 / 48 |
| | <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. Full Name (Last, First, Middle Initial)
Mr. Richard W. Johnson

Mailing Address 15833 West Carrabean Lane

City State Zip Code
Surprise AZ 85379

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

Name of Employer ATC Phoenix Transit Nec. Occupation Transit Operator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 6

Transaction ID: SA11A1.13767

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
Mr. Paul Kaplan

Mailing Address P.O. Box 2561

City State Zip Code
Boca Raton FL 33427

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

Name of Employer Palm Tran, Inc. Occupation transit operator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 6

Transaction ID: SA11A1.13769

Amount of Each Receipt this Period
60.00

C. Full Name (Last, First, Middle Initial)
Mr. Kenneth R. Kirk

Mailing Address 1236 Spring Water Drive

City State Zip Code
Lancaster TX 75134

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

Name of Employer Amalgamated Transit Union Occupation International Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: SA11A1.13691

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) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 22 / 48 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Mr. Ralph T. Klugh | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 6 |
| Mailing Address 3418 Cedar Glen Drive | | Transaction ID: SA11A1.13702 |
| City State Zip Code Allison Park PA 15101 | Amount of Each Receipt this Period 35.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Port Authority of Allegheny | Occupation transit 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) B. Harold R. Lemmon | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 3224 South 136th | | Transaction ID: SA11A1.13749 |
| City State Zip Code Tukwila WA 98168 | Amount of Each Receipt this Period 25.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County DOT | Occupation operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 225.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Mr. Richard T. Lovata | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 4020 SW 321st Street | | Transaction ID: SA11A1.13750 |
| City State Zip Code Federal Way WA 98023-2461 | Amount of Each Receipt this Period 25.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County DOT - Metro Transit | Occupation Transit 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) ▶ | 85.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 23 / 48 |
| | <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. Full Name (Last, First, Middle Initial) Mr. James L. Mc Cubbin | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 6 |
| Mailing Address 1572 West Hazelwood #3 | | Transaction ID: SA11A1.13768 |
| City State Zip Code Phoenix AZ 85015 | Amount of Each Receipt this Period 40.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer ATC Phoenix Transit | Occupation Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 320.00 | |

| | | |
|---|---|---|
| B. Full Name (Last, First, Middle Initial) Mr. Marvin R. Mc Donald | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 2415 Thorndyke Avenue, W #402 | | Transaction ID: SA11A1.13709 |
| City State Zip Code Seattle WA 98199 | Amount of Each Receipt this Period 27.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County DOT- Metro Transit | Occupation Transit Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 241.00 | |

| | | |
|---|---|---|
| C. Full Name (Last, First, Middle Initial) Mr. Dwayne McKitrick | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 6 |
| Mailing Address 413 Sample Street | | Transaction ID: SA11A1.13699 |
| City State Zip Code Pittsburgh PA 15209-2339 | Amount of Each Receipt this Period 20.84 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Port Authority of Allegheny | Occupation Transit Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 208.40 | |

| | |
|--|-------|
| 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) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 24 / 48 |
| | <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. Full Name (Last, First, Middle Initial)
Mr. William G. Mc Lean

Mailing Address 2350 Greensboro Drive

City State Zip Code
Reno NV 89509

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

Name of Employer Amalgamated Transit Union
Occupation International Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.06

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 6

Transaction ID: SA11A1.13688

Amount of Each Receipt this Period
83.34

B. Full Name (Last, First, Middle Initial)
Mr. Patrick J. McMahon

Mailing Address 3711 North Woodland Circle

City State Zip Code
Gibsonia PA 15044

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

Name of Employer Port Authority Transit
Occupation 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
1 0 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.13692

Amount of Each Receipt this Period
20.84

C. Full Name (Last, First, Middle Initial)
Mr. Joseph V. Mielcarek

Mailing Address 575 Dutch Ridge Road

City State Zip Code
Ellwood City PA 16117

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

Name of Employer Port Authority Transit
Occupation 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
1 0 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.13696

Amount of Each Receipt this Period
20.84

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 125.02 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 25 / 48 |
| | <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. Full Name (Last, First, Middle Initial) Mr. Charles N. Miller | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 738 34th Avenue | | Transaction ID: SA11A1.13735 |
| City State Zip Code Seattle WA 98122-5132 | Amount of Each Receipt this Period 30.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County Metro Transit | Occupation Transit Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 270.00 | |

| | | |
|---|---|---|
| B. Full Name (Last, First, Middle Initial) Mr. Michael J. Moore | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 5719 Olive Avenue SE | | Transaction ID: SA11A1.13736 |
| City State Zip Code Auburn WA 98092 | Amount of Each Receipt this Period 25.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County Metro Transit | Occupation Transit Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 225.00 | |

| | | |
|---|---|---|
| C. Full Name (Last, First, Middle Initial) Mr. Wes R. Moorehead | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address P.O. Box 3011 | | Transaction ID: SA11A1.13733 |
| City State Zip Code Kent WA 98032-0201 | Amount of Each Receipt this Period 19.45 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County Metro Transit | Occupation Transit Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 369.45 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 74.45 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 26 / 48 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) A. Mr. Tommy N. Mullins | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 | |
| Mailing Address 5240 Dresden Lane | | Transaction ID: SA11A1.13680 | |
| City State Zip Code Roanoke VA 24012 | Amount of Each Receipt this Period 42.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Amalgamated Transit Union | Occupation International Vice President | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 378.00 | | |

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) B. Mr. John C. Munro | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | |
| Mailing Address 5726 145th Place, SW | | Transaction ID: SA11A1.13710 | |
| City State Zip Code Edmonds WA 98026-3729 | Amount of Each Receipt this Period 50.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer King County Metro Transit | Occupation Transit Operator | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 450.00 | | |

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) C. Mr. Richard M. Murphy | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6 | |
| Mailing Address 346 Washington Street #143 | | Transaction ID: SA11A1.13686 | |
| City State Zip Code Braintree MA 02184 | Amount of Each Receipt this Period 42.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Amalgamated Transit Union | Occupation International Vice President | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 378.00 | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 134.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 27 / 48 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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

| | | | |
|---|------------------------------------|---|---|
| Full Name (Last, First, Middle Initial) A. Mr. Paul B. Neil | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | |
| Mailing Address 8014 NE 121st | | Transaction ID: SA11A1.13724 | |
| City Kirkland | State WA | Zip Code 98034 | Amount of Each Receipt this Period 25.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer King County Metro Transit | Occupation Transit operator | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 266.86 | | |

| | | | |
|---|------------------------------------|---|---|
| Full Name (Last, First, Middle Initial) B. Mr. Lance F. Norton | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | |
| Mailing Address 3529 158th SW | | Transaction ID: SA11A1.13711 | |
| City Lynwood | State WA | Zip Code 98037-1415 | Amount of Each Receipt this Period 25.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer King County Metro Transit | Occupation Transit Operator | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 375.00 | | |

| | | | |
|---|------------------------------------|---|---|
| Full Name (Last, First, Middle Initial) C. Mr. J. Fred Olander | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | |
| Mailing Address 11118 16th Place, SE | | Transaction ID: SA11A1.13712 | |
| City Lake Stevens | State WA | Zip Code 98258 | Amount of Each Receipt this Period 26.00 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer King County Metro Transit | Occupation Transit operator | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 234.00 | | |

| | |
|--|-------|
| 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) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 28 / 48 |
| | <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

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Mr. Stephen M. Palonis | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 6 |
| Mailing Address 231 Parkedge Road | | Transaction ID: SA11A1.13694 |
| City State Zip Code Pittsburgh PA 15220 | Amount of Each Receipt this Period 20.84 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Port Authority Allegheny Count | Occupation Transit worker | |
| 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. Mr Raymond K. Pekarovic | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address P.O. Box 1501 | | Transaction ID: SA11A1.13752 |
| City State Zip Code Bothell WA 98401 | Amount of Each Receipt this Period 50.00 | |
| 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 ▼ 357.72 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Ms Brenda Pernell | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 20 Calhoun Street | | Transaction ID: SA11A1.13704 |
| City State Zip Code Vallejo CA 94590 | Amount of Each Receipt this Period 25.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Alameda-Contra Costa Trans Di | Occupation transit operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 95.84 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 29 / 48 |
| | <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. Full Name (Last, First, Middle Initial) Mr. Shawn Perry Mailing Address 5601 42nd Avenue City State Zip Code Hyattsville MD 20781 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: SA11A1.13685 Amount of Each Receipt this Period 25.00 |
| Name of Employer Occupation Amalgamated Transit Union Editor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00 | | |

| | | |
|--|--|---|
| B. Full Name (Last, First, Middle Initial) Mr. Larry Pradier Mailing Address 5733 Bonfair Avenue City State Zip Code Lakewood CA 90712 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 4 / 2 0 0 6 Transaction ID: SA11A1.13763 Amount of Each Receipt this Period 12.50 |
| Name of Employer Occupation Transportation Concepts Hemet Operator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 237.50 | | |

| | | |
|--|--|---|
| C. Full Name (Last, First, Middle Initial) Mr. Rodney Richmond Mailing Address 4303 Pine Lane City State Zip Code Spring TX 77389-4642 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 6 Transaction ID: SA11A1.13681 Amount of Each Receipt this Period 42.00 |
| Name of Employer Occupation Amalgamated Transit Union International Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 378.00 | | |

| | |
|--|--------------|
| SUBTOTAL of Receipts This Page (optional) | 79.50 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 30 / 48 |
| | <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

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Mr. Rudy Robinson | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 1706 South 48th Street | | Transaction ID: SA11A1.13734 |
| City State Zip Code Tacoma WA 98408 | Amount of Each Receipt this Period 25.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County Metro Transit | Occupation Transit Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 225.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Mr. Joseph Rovito | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6 |
| Mailing Address 1525 34th Street | | Transaction ID: SA11A1.13705 |
| City State Zip Code Sacramento CA 95816-6525 | Amount of Each Receipt this Period 42.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Sacramento Reg. Transit Dist. | Occupation operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 378.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Mr. John W. Sepolen | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 2401 SW Holden Street #Q107 | | Transaction ID: SA11A1.13725 |
| City State Zip Code Seattle WA 98034 | Amount of Each Receipt this Period 35.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County Metro Transit | Occupation Transit Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 275.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 102.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 31 / 48 |
| | <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. Full Name (Last, First, Middle Initial)
Mr. Brian L. Sherlock

Mailing Address 1557 NE 171st Street

City Shoreline State WA Zip Code 98155-6022

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

Name of Employer King County Metro Transit Occupation Transit 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
 1 0 / 0 9 / 2 0 0 6

Transaction ID: SA11A1.13713

Amount of Each Receipt this Period
 25.00

B. Full Name (Last, First, Middle Initial)
Ms Yvonne M. Short

Mailing Address 11469 69th Place South

City Seattle State WA Zip Code 98178-3002

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

Name of Employer King County Metro Transit Occupation Transit Operator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 9 / 2 0 0 6

Transaction ID: SA11A1.13744

Amount of Each Receipt this Period
 30.00

C. Full Name (Last, First, Middle Initial)
Ms Karen D. Stites

Mailing Address 1120 Ruby Court

City Aberdeen State WA Zip Code 98520

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

Name of Employer Grays Harbor Transit Occupation Station Clerk

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 6 / 2 0 0 6

Transaction ID: SA11A1.13766

Amount of Each Receipt this Period
 25.00

| | | |
|--|---|-------|
| 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) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 32 / 48 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Mr. Mark P. Tambellini | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 6 |
| Mailing Address 943 Fairfield Lane | | Transaction ID: SA11A1.13700 |
| City State Zip Code McDonald PA 15057 | Amount of Each Receipt this Period 30.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer PAT Transit Allegheny Co. | Occupation transit employee | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 265.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Mr. Robert G. Tuttle | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 1616 Midvale Avenue N. | | Transaction ID: SA11A1.13740 |
| City State Zip Code Shoreline WA 98133-5724 | Amount of Each Receipt this Period 27.23 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County Metro Transit | Occupation Transit Operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 267.23 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Mr. David C. Vestal | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 1518 South G Street | | Transaction ID: SA11A1.13738 |
| City State Zip Code Tacoma WA 98405 | Amount of Each Receipt this Period 25.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County Metro Transit | Occupation Transit 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) ▶ | 82.23 |
| TOTAL This Period (last page this line number only) ▶ | [] |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 33 / 48 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. Lucas W. Voorhees | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 7122 NE 162nd Street | | Transaction ID: SA11A1.13747 |
| City State Zip Code Bothell WA 98028 | Amount of Each Receipt this Period 25.00 | |
| 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 ▼ 225.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. Ms Deeann K. Wakenight | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6 |
| Mailing Address 4155 12th Avenue South | | Transaction ID: SA11A1.13728 |
| City State Zip Code Seattle WA 98108-1413 | Amount of Each Receipt this Period 25.50 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer King County Metro Transit | Occupation Transit Employee | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 214.36 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. Del L. Walker | | Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6 |
| Mailing Address P.O. Box 30572 | | Transaction ID: SA11A1.13761 |
| City State Zip Code Bellingham WA 98228 | Amount of Each Receipt this Period 24.00 | |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer Whatcom Transit Authority | Occupation transit operator | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 228.00 | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 74.50 |
| TOTAL This Period (last page this line number only) ▶ | [] |

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

| | | |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 34 / 48 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) A. Mr. Jerry Wallace, III | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | |
| Mailing Address 7706 37th Avenue South | | Transaction ID: SA11A1.13714 | |
| City State Zip Code Seattle WA 98118-4008 | Amount of Each Receipt this Period 35.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer King County Metro Transit | Occupation Transit Operator | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 435.00 | | |

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) B. Mr. Carey P. Watson | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 9 / 2 0 0 6 | |
| Mailing Address 19903 - 112th Avenue NE #G104 | | Transaction ID: SA11A1.13715 | |
| City State Zip Code Bothell WA 98011 | Amount of Each Receipt this Period 30.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer King County Metro Transit | Occupation Transit Operator | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 290.00 | | |

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) C. Mr. Craig D. Whitehead | | Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 6 | |
| Mailing Address 1803 Andina Avenue #14 | | Transaction ID: SA11A1.13758 | |
| City State Zip Code Cincinnati OH 45237 | Amount of Each Receipt this Period 15.00 | | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer SW Ohio Regional Transit Ath | Occupation Transit Operator | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 315.00 | | |

| | |
|--|-------|
| 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) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 35 / 48 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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

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

A. Full Name (Last, First, Middle Initial)
Ms Kelly R. Wickham

Mailing Address 6706 North Van De Car Road, SE

City State Zip Code
Port Orchard WA 98367

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

Name of Employer King County Metro Transit Occupation Transit worker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 0 | 9 | | 2 | 0 | 0 | 6 |

Transaction ID: SA11A1.13742

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Ms Ruth Wilson

Mailing Address 13041 15th NE

City State Zip Code
Seattle WA 98125

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

Name of Employer King County Metro Transit Occupation Transit operator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
221.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 0 | 9 | | 2 | 0 | 0 | 6 |

Transaction ID: SA11A1.13716

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) | ▶ | 2678.51 |

**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)

PAGE 36 / 48

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. BRIAN HIGGINS FOR CONGRESS | | Transaction ID: SB23.13629 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address PO BOX 28 | | Amount of Each Disbursement this Period 1000.00 |
| City BUFFALO State NY Zip Code 14220 | | |
| Purpose of Disbursement | Category/Type | |
| Candidate Name | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 27 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. JUDY FEDER FOR CONGRESS | | Transaction ID: SB23.13615 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6 |
| Mailing Address 1514 HARDWOOD LANE | | Amount of Each Disbursement this Period 1000.00 |
| City MCLEAN State VA Zip Code 22101 | | |
| Purpose of Disbursement | Category/Type | |
| Candidate Name | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 10 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. LINDA STENDER FOR US CONGRESS | | Transaction ID: SB23.13635 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address P.O. Box 730 | | Amount of Each Disbursement this Period 500.00 |
| City Scotch Plains State NJ Zip Code 07076 | | |
| Purpose of Disbursement | Category/Type | |
| Candidate Name | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07 | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2500.00 |
| 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)

PAGE 37 / 48

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. MICHAUD FOR CONGRESS | | Transaction ID: SB23.13617 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6 |
| Mailing Address PMB 198 11 BANGOR MALL BLVD SUITE D | | Amount of Each Disbursement this Period 1000.00 |
| City BANGOR State ME Zip Code 04401 | Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 02 | |
| Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Category/ Type |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. MONTANANS FOR TESTER | | Transaction ID: SB23.13628 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address PO BOX 1248 | | Amount of Each Disbursement this Period 2500.00 |
| City BIG SANDY State MT Zip Code 59520 | Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00 | |
| Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Category/ Type |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. PASCRELL FOR CONGRESS INC | | Transaction ID: SB23.13624 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address 63 QUARTZ LANE | | Amount of Each Disbursement this Period 1000.00 |
| City PATERSON State NJ Zip Code 07501 | Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 08 | |
| Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Category/ Type |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 4500.00 |
| 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)

PAGE 38 / 48

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. STEPHEN F LYNCH FOR CONGRESS COMMITTEE | | Transaction ID: SB23.13610 Date of Disbursement |
| Mailing Address 109 O Street | | <input type="text" value="10"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="06"/> |
| City South Boston | State MA | Zip Code 02127 |
| Purpose of Disbursement | | Amount of Each Disbursement this Period <input type="text" value="1500.00"/> |
| Candidate Name | | Category/ Type |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: MA | District: 09 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. TIM BISHOP FOR CONGRESS | | Transaction ID: SB23.13630 Date of Disbursement |
| Mailing Address 129 WOOLEY STREET | | <input type="text" value="10"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="06"/> |
| City SOUTHAMPTON | State NY | Zip Code 11968 |
| Purpose of Disbursement | | Amount of Each Disbursement this Period <input type="text" value="1000.00"/> |
| Candidate Name | | Category/ Type |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: NY | District: 01 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. TIM MAHONEY FOR FLORIDA | | Transaction ID: SB23.13609 Date of Disbursement |
| Mailing Address 1128-408 ROYAL PALM BEACH BLVD | | <input type="text" value="10"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="06"/> |
| City ROYAL PALM BEACH | State FL | Zip Code 33411 |
| Purpose of Disbursement | | Amount of Each Disbursement this Period <input type="text" value="2500.00"/> |
| Candidate Name | | Category/ Type |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: FL | District: 16 | |

| | |
|--|--------------------------------------|
| SUBTOTAL of Disbursements This Page (optional) | <input type="text" value="5000.00"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

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)

PAGE 39 / 48

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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

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

A. Full Name (Last, First, Middle Initial)
TOM ALLEN FOR CONGRESS

Mailing Address 236 OXFORD STREET

City PORTLAND State ME Zip Code 04101

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: ME District: 01

Transaction ID: SB23.13616

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
URESTI FOR U S CONGRESS

Mailing Address 9406 YETT BOULEVARD

City SAN ANTONIO State TX Zip Code 78221

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: TX District: 28

Transaction ID: SB23.13639

Date of Disbursement

10 / 16 / 2006

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
WASHINGTON STATE DEMOCRATIC CENTRAL COMMITTEE

Mailing Address PO BOX 4027

City SEATTLE State WA Zip Code 98104

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.13640

Date of Disbursement

10 / 16 / 2006

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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

16000.00

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)

PAGE 40 / 48

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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 |

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

| | | | |
|--|----------|---|-------------------|
| Full Name (Last, First, Middle Initial) A. Cedric Glover | | Transaction ID: SB29.13643 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 | |
| Mailing Address 2915 Youree Drive | | Amount of Each Disbursement this Period 500.00 | |
| City Shreveport | State LA | Zip Code 71104 | Category/ Type |
| Purpose of Disbursement Non Federal Contribution | | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | |

| | | | |
|--|----------|---|-------------------|
| Full Name (Last, First, Middle Initial) B. Citizens for Eric Oemig | | Transaction ID: SB29.13656 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 | |
| Mailing Address 6513 132nd Avenue, NE PMB 330 | | Amount of Each Disbursement this Period 500.00 | |
| City Kirkland | State WA | Zip Code 98033 | Category/ Type |
| Purpose of Disbursement Non Federal contribution | | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | |

| | | | |
|--|----------|---|-------------------|
| Full Name (Last, First, Middle Initial) C. Coalition for Regional Transportation PAC | | Transaction ID: SB29.13645 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 | |
| Mailing Address 1302 Warm Springs Avenue | | Amount of Each Disbursement this Period 2000.00 | |
| City Boise | State ID | Zip Code 83712 | Category/ Type |
| Purpose of Disbursement Non Federal Contribution | | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |
| State: District: | | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3000.00 |
| 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)

PAGE 41 / 48

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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 |

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

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Committee to Elect Dale Murphy | | Transaction ID: SB29.13658 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address P.O. Box 833 | | Amount of Each Disbursement this Period 500.00 |
| City Mercer Island State WA Zip Code 98040 | Category/ Type | |
| Purpose of Disbursement Non Federal contribution | | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Committee to Elect Jack Miller | | Transaction ID: SB29.13661 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address 16511 S. Malloy Prairie Road | | Amount of Each Disbursement this Period 100.00 |
| City Cheney State WA Zip Code 99004 | Category/ Type | |
| Purpose of Disbursement Non Federal Contribution | | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Committee to Elect Julie McCord | | Transaction ID: SB29.13665 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address 400 E. Evergreen Boulevard Suite 308 | | Amount of Each Disbursement this Period 700.00 |
| City Vancouver State WA Zip Code 98660 | Category/ Type | |
| Purpose of Disbursement Non Federal Contribution | | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1300.00 |
| 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)

PAGE 42 / 48

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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 |

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

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Committee to Elect Michael Thurmond | | Transaction ID: SB29.13618 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6 |
| Mailing Address P.O. Box 361148 | | Amount of Each Disbursement this Period 500.00 |
| City Decatur State GA Zip Code 30036 | Category/ Type | |
| Purpose of Disbursement Non Federal contribution | | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Committee to Elect Steve Hobbs | | Transaction ID: SB29.13673 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address 3309 114th Drive, NE | | Amount of Each Disbursement this Period 450.00 |
| City Lake Stevens State WA Zip Code 98258 | Category/ Type | |
| Purpose of Disbursement Non Federal Contribution | | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Committee to Elect Susan Fuldauer | | Transaction ID: SB29.13641 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address 6284 Rucker Road Suite A | | Amount of Each Disbursement this Period 500.00 |
| City Indianapolis State IN Zip Code 46220 | Category/ Type | |
| Purpose of Disbursement Non Federal Contribution | | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1450.00 |
| 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 |

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

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Committee to Elect Tim Knue | | Transaction ID: SB29.13669 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address P.O. Box 2118 | | Amount of Each Disbursement this Period 300.00 |
| City Mt. Vernon State WA Zip Code 98273 | Purpose of Disbursement Non Federal Contribution Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Committee to Elect Tom Campbell | | Transaction ID: SB29.13647 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address P.O. Box 443 | | Amount of Each Disbursement this Period 300.00 |
| City Spanaway State WA Zip Code 98387 | Purpose of Disbursement Non Federal Contribution Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Committee to Re-elect Fred Jarrett | | Transaction ID: SB29.13671 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address 8441 SE 68th PMB 212 | | Amount of Each Disbursement this Period 500.00 |
| City Mercer Island State WA Zip Code 98040 | Purpose of Disbursement Non Federal Contribution Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1100.00 |
| 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)

PAGE 44 / 48

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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 |

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

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Committee to Re-elect Geoff Simpson | | Transaction ID: SB29.13652 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address 16624 SE 254th Place | | Amount of Each Disbursement this Period 500.00 |
| City Covington State WA Zip Code 98042 | Purpose of Disbursement Non Federal Contribution Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Friends of George Leventhal | | Transaction ID: SB29.13622 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6 |
| Mailing Address P.O. Box 724 | | Amount of Each Disbursement this Period -250.00 |
| City Silver Spring State MD Zip Code 20918 | Purpose of Disbursement 9/19/06 check lost in mail Non Fed Cont Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Future PAC, Oregon House Democrats | | Transaction ID: SB29.13678 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address P.O. Box 1754 | | Amount of Each Disbursement this Period 2500.00 |
| City Portland State OR Zip Code 97207 | Purpose of Disbursement Non Federal Contribution Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2750.00 |
| 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)

PAGE 45 / 48

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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 |

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

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Kulongoski for Governor | | Transaction ID: SB29.13674 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address P.O. Box 399 | | Amount of Each Disbursement this Period 1000.00 |
| City Portland State OR Zip Code 97207 | Purpose of Disbursement Non Federal Contribution Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Levdansky for Legislator | | Transaction ID: SB29.13620 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 6 |
| Mailing Address 5118 Dorris Drive | | Amount of Each Disbursement this Period 500.00 |
| City Elizabeth State PA Zip Code 15037 | Purpose of Disbursement Non Federal contribution Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. People for Justice Susan Owens | | Transaction ID: SB29.13654 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address 6963 Littlerock Road, SW | | Amount of Each Disbursement this Period 900.00 |
| City Tumwater State WA Zip Code 98512 | Purpose of Disbursement Non Federal Contribution Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/ Type |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2400.00 |
| 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)

PAGE 46 / 48

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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 |

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

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. People to Elect Jasper MacSarrow | | Transaction ID: SB29.13667 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address P.O. Box 2011 | | Amount of Each Disbursement this Period 200.00 |
| City Ferndale State WA Zip Code 98248 | Purpose of Disbursement Non Federal Contribution Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Re-elect Deb Wallace | | Transaction ID: SB29.13649 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address P.O. Box 872015 | | Amount of Each Disbursement this Period 300.00 |
| City Vancouver State WA Zip Code 98684 | Purpose of Disbursement Non Federal Contribution Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Re-elect John McCoy | | Transaction ID: SB29.13663 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6 |
| Mailing Address P.O. Box 1821 | | Amount of Each Disbursement this Period 500.00 |
| City Marysville State WA Zip Code 98270 | Purpose of Disbursement Non Federal Contribution Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1000.00 |
| 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)

PAGE 47 / 48

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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 |

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

Full Name (Last, First, Middle Initial)

A. Re-elect Pat Sullivan Campaign

Mailing Address 26513 168th Place, SE

City State Zip Code
Covington WA 98042

Purpose of Disbursement
Non Federal Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.13650

Date of Disbursement

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

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

13500.00

Image# 26960640931

Form/Schedule: **F3XN**
Transaction ID:

The unitemized total of \$27,464.51 represents the total contributions from individuals who have not individually contributed more than \$200 in the aggregate during the calendar year.
