

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**Amalgamated Transit Union - COPE**

ADDRESS (number and street) **10000 New Hampshire Ave.**  
 Check if different than previously reported. (ACC) **Silver Spring MD 20903**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00032995** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  2017 through  /  /  2017

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

Signature of Treasurer *Hanley, Lawrence, , ,* [Electronically Filed] Date  /  /  2017

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Amalgamated Transit Union - COPE**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		<input type="text" value="419745.05"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="419745.05"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="92932.08"/>	<input type="text" value="92932.08"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="512677.13"/>	<input type="text" value="512677.13"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="12250.00"/>	<input type="text" value="12250.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="500427.13"/>	<input type="text" value="500427.13"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Amalgamated Transit Union - COPE**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized .....	92912.28	92912.28
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	92912.28	92912.28
(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) .....	92912.28	92912.28
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	19.80	19.80
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	92932.08	92932.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	92932.08	92932.08

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	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.....	7000.00	7000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	5250.00	5250.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	12250.00	12250.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12250.00	12250.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	92912.28	92912.28
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	92912.28	92912.28
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 B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. FRIENDS FOR JOE MCDERMOTT**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 21982

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		1	8		2	0	1	7		

City: Seattle State: WA Zip Code: 98111-3982

FEC Identification Number

Purpose of Disbursement  
Voided Check from 9/2/2016

C	C00605493
---	-----------

Candidate Name  
**MCDERMOTT, JAMES JOSEPH, , ,**

Transaction ID : **VSG069VYFA**  
Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: WA District: 07

-500.00
---------

Memo Item

**B. Jenkins For Congress**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 727

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		2	7		2	0	1	7		

City: Huntington State: WV Zip Code: 25711-0727

FEC Identification Number

Purpose of Disbursement  
Contribution

C	C00548271
---	-----------

Candidate Name  
**Jenkins, Evan, H, ,**

Transaction ID : **VSG069VZXW**  
Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: WV District: 03

2500.00
---------

Memo Item

**C. Joe Kennedy For Congress**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 590464

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		2	7		2	0	1	7		

City: Newton State: MA Zip Code: 02459-0014

FEC Identification Number

Purpose of Disbursement  
Contribution

C	C00512970
---	-----------

Candidate Name  
**Kennedy, Joseph, P, , III**

Transaction ID : **VSG069VZXJ**  
Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: MA District: 04

5000.00
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Memo Item

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

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

7000.00
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7000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. Committee To Elect Keith E. Haynes**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 5241 Frederick Ave

M M M	/	D D D	/	Y Y Y Y Y
01		04		2017

City Baltimore State MD Zip Code 21229-3238

FEC Identification Number

Purpose of Disbursement  
Non-Federal Contribution

C
---

Candidate Name

Transaction ID : VSG069VR4X

Amount of Each Disbursement this Period

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

	1000.00
--	---------

State: District:

Memo Item

**B. Friends Of Chris Koos**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1014 S Fell Ave

M M M	/	D D D	/	Y Y Y Y Y
01		05		2017

City Normal State IL Zip Code 61761-3637

FEC Identification Number

Purpose of Disbursement  
Non-Federal Contribution

C
---

Candidate Name

Transaction ID : VSG069VR9A

Amount of Each Disbursement this Period

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

	250.00
--	--------

State: District:

Memo Item

**C. Friends Of Erek L Barron**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1215 E Fort Ave  
Ste 303

M M M	/	D D D	/	Y Y Y Y Y
01		03		2017

City Baltimore State MD Zip Code 21230-5281

FEC Identification Number

Purpose of Disbursement  
Voided Check from 11/28/2016

C
---

Candidate Name

Transaction ID : VSG069VR4I

Amount of Each Disbursement this Period

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

	-1000.00
--	----------

State: District:

Memo Item

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

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

	250.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Friends Of EreK L Barron</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2017
Mailing Address 1215 E Fort Ave Ste 303		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG069VR4V</b> Amount of Each Disbursement this Period 1000.00
City Baltimore	State MD	Zip Code 21230-5281
Purpose of Disbursement Non-Federal Contribution		Category/ Type
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Friends Of Jeff Waldstreicher</b>		Date of Disbursement MM / DD / YYYY 01 / 06 / 2017
Mailing Address 1215 E Fort Ave Ste 303		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG069VRF9</b> Amount of Each Disbursement this Period 1000.00
City Baltimore	State MD	Zip Code 21230-5281
Purpose of Disbursement Non-Federal Contribution		Category/ Type
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Friends Of Joseph F. Vallario Jr.</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2017
Mailing Address 8116 Rosaryville Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : VSG069VR4V</b> Amount of Each Disbursement this Period 500.00
City Upper Marlboro	State MD	Zip Code 20772-4505
Purpose of Disbursement Non-Federal Contribution		Category/ Type
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Amalgamated Transit Union - COPE**

Full Name (Last, First, Middle Initial)

**A. People Uniting To Elect Mary Washington**

Mailing Address 3633 Kimble Rd

City  
Baltimore

State  
MD

Zip Code  
21218-2027

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
01 / 04 / 2017

FEC Identification Number

C   
**Transaction ID : VSG069VR4Z**  
Amount of Each Disbursement this Period  
 500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y

FEC Identification Number

C   
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y

FEC Identification Number

C   
Amount of Each Disbursement this Period

Memo Item

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

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

500.00

5250.00