

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) 5025 Wisconsin Ave NW Washington DC 20016 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C 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, 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, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 06 / 01 / 2013 through 06 / 30 / 2013

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 Lawrence J. Hanley

Signature of Treasurer Lawrence J. Hanley [Electronically Filed] Date 07 / 19 / 2013

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

Office Use Only table with 8 columns and 1 row. Includes text: FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**AMALGAMATED TRANSIT UNION - COPE**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		207821.44
(b) Cash on Hand at Beginning of Reporting Period.....	356112.55	
(c) Total Receipts (from Line 19) .....	63670.66	389117.39
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	419783.21	596938.83
7. Total Disbursements (from Line 31).....	23221.95	200377.57
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	396561.26	396561.26
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**AMALGAMATED TRANSIT UNION - COPE**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5248.29	14090.12
(ii) Unitemized .....	53405.74	368566.63
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	58654.03	382656.75
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	54.82
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	58654.03	382711.57
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.....	5000.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	16.63	1405.82
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))..... ▶	63670.66	389117.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	63670.66	389117.39

**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 .....	46.95	1827.62
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	46.95	1827.62
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19500.00	158000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	3675.00	40549.95
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	23221.95	200377.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23221.95	200377.57

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	58654.03	382711.57
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	58654.03	382711.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	46.95	1827.62
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	46.95	1827.62

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 76
	<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. PAUL KAPLAN**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2561

City BOCA RATON State FL Zip Code 33427-0000

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

Name of Employer PALM TRAN INC Occupation Operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2013

**Transaction ID : 4953971**

Amount of Each Receipt this Period  
 400.00

**B. TONIA STARKEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 84 VERSAILLES COURT

City CINCINNATI State OH Zip Code 45240-3831

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

Name of Employer SW OHIO REGIONAL TRANSIT AUTH Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2013

**Transaction ID : 4954641**

Amount of Each Receipt this Period  
 25.00

**C. DEBORAH J SIEVERS**  
Full Name (Last, First, Middle Initial)

Mailing Address 644 LOWRY AVENUE NE

City MINNEAPOLIS State MN Zip Code 55418-0000

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

Name of Employer METROPOLITAN Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 13 / 2013

**Transaction ID : 4956875**

Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	115.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 1448 BALSAM DR

City ALISON PK State PA Zip Code 15101-3948

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

Name of Employer AMALGAMATED TRANSIT UNION Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt  
06 / 06 / 2013  
Transaction ID : 4957762

Amount of Each Receipt this Period  
42.00

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

Mailing Address 69 WHITEROCK ROAD  
P O BOX 66

City WESTERLY State RI Zip Code 02891-1249

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 207.00

Date of Receipt  
06 / 06 / 2013  
Transaction ID : 4957899

Amount of Each Receipt this Period  
9.00

**C. JOHN A CRUZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 118 THIRD BEACH ROAD

City MIDDLETOWN State RI Zip Code 02842-5762

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
06 / 06 / 2013  
Transaction ID : 4957913

Amount of Each Receipt this Period  
30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 81.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. KENNETH M D'AMBROSIO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 43 BAGLEY AVE  
 City CRANSTON State RI Zip Code 02920-3201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2013  
**Transaction ID : 4957919**  
 Amount of Each Receipt this Period  
 10.00

**B. ROGER LIMA JR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 JACKSON ST  
 City NORTH PROVIDENCE State RI Zip Code 02904-4223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2013  
**Transaction ID : 4958047**  
 Amount of Each Receipt this Period  
 10.00

**C. VIRGINIA A MOFFITT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 90 GRANT AVE  
 City CRANSTON State RI Zip Code 02920-7718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2013  
**Transaction ID : 4958084**  
 Amount of Each Receipt this Period  
 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER: PAGE 9 OF 76  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. ERIC ST PIERRE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 46 HIGH STREET  
 City WARWICK State RI Zip Code 02886-1256  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 06 / 2013  
**Transaction ID : 4958195**  
 Amount of Each Receipt this Period  
 20.00

**B. RUTH SULLIVAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 68 NARRAGANSETT AVENUE  
 City TIVERTON State RI Zip Code 02878-4620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 253.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 06 / 2013  
**Transaction ID : 4958197**  
 Amount of Each Receipt this Period  
 11.00

**C. OWEN C SWEETLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 139 ROUNDS AVENUE  
 City RIVERSIDE State RI Zip Code 02915-1737  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 06 / 2013  
**Transaction ID : 4958200**  
 Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 41.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 10 OF 76  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. LORETTA SPRINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1600 DECKER AVENUE  
 City SAN MARTIN State CA Zip Code 95046-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SANTA CLARA VLY TRANS. AUTH. Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 295.07

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 07 / 2013  
**Transaction ID : 4958285**  
 Amount of Each Receipt this Period  
 49.03

**B. DIANA M HERMONE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1539 B DAY AVENUE  
 City SAN MATEO State CA Zip Code 94403-1608  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AMALGAMATED TRANSIT UNION Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 07 / 2013  
**Transaction ID : 4958286**  
 Amount of Each Receipt this Period  
 80.00

**C. PAUL B NEIL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1701 157TH AVENUE NE #A101  
 City BELLEVUE State WA Zip Code 98008-2777  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2013  
**Transaction ID : 4958301**  
 Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 154.03  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. PAUL J BACHTEL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8513 MAIN STREET #203  
 City EDMONDS State WA Zip Code 98026-6940  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2013  
**Transaction ID : 4958302**  
 Amount of Each Receipt this Period  
 25.00

**B. CLINTON C DE VOSS JR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3225 GALVIN RD  
 City CENTRALIA State WA Zip Code 98531-9061  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2013  
**Transaction ID : 4958303**  
 Amount of Each Receipt this Period  
 25.00

**C. JUDY J YOUNG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7603 SOUTH 112TH STREET  
 City SEATTLE State WA Zip Code 98178-3227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2013  
**Transaction ID : 4958304**  
 Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. NEAL I SAFRIN</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 15 / 2013 <b>Transaction ID : 4958305</b>
Mailing Address 5451 NE 203RD PLACE		Amount of Each Receipt this Period 25.00
City LAKE FOREST PARK	State WA	Zip Code 98155-0000
FEC ID number of contributing federal political committee.	C	
Name of Employer KING COUNTY DOT-METRO TRANSIT	Occupation OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	

Full Name (Last, First, Middle Initial) <b>B. DENNIS CONNOLLY</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 15 / 2013 <b>Transaction ID : 4958577</b>
Mailing Address 69 WHITEROCK ROAD P O BOX 66		Amount of Each Receipt this Period 9.00
City WESTERLY	State RI	Zip Code 02891-1249
FEC ID number of contributing federal political committee.	C	
Name of Employer RHODE ISLAND PUBLIC TRANS AUTH	Occupation OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C. JOHN A CRUZ</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 15 / 2013 <b>Transaction ID : 4958583</b>
Mailing Address 118 THIRD BEACH ROAD		Amount of Each Receipt this Period 10.00
City MIDDLETOWN	State RI	Zip Code 02842-5762
FEC ID number of contributing federal political committee.	C	
Name of Employer RHODE ISLAND PUBLIC TRANS AUTH	Occupation OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	44.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 76
	<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. KENNETH M D'AMBROSIO**  
Full Name (Last, First, Middle Initial)

Mailing Address 43 BAGLEY AVE

City CRANSTON State RI Zip Code 02920-3201

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2013

**Transaction ID : 4958587**

Amount of Each Receipt this Period  
 10.00

**B. ADRIAN DELGADO JR**  
Full Name (Last, First, Middle Initial)

Mailing Address 182 GROSVENOR AVENUE

City EAST PROVIDENCE State RI Zip Code 02914-3616

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 213.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2013

**Transaction ID : 4958599**

Amount of Each Receipt this Period  
 9.00

**C. DAVID FREMMING**  
Full Name (Last, First, Middle Initial)

Mailing Address 34 WILDWOOD AVENUE

City PROVIDENCE State RI Zip Code 02907-3420

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2013

**Transaction ID : 4958631**

Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 39.00

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

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

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

FOR LINE NUMBER: PAGE 14 OF 76  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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. ROGER LIMA JR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 JACKSON ST  
 City NORTH PROVIDENCE State RI Zip Code 02904-4223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2013  
**Transaction ID : 4958683**  
 Amount of Each Receipt this Period  
 10.00

**B. VIRGINIA A MOFFITT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 90 GRANT AVE  
 City CRANSTON State RI Zip Code 02920-7718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2013  
**Transaction ID : 4958716**  
 Amount of Each Receipt this Period  
 10.00

**C. ERIC ST PIERRE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 46 HIGH STREET  
 City WARWICK State RI Zip Code 02886-1256  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2013  
**Transaction ID : 4958789**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 40.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 15 OF 76  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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. RUTH SULLIVAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 68 NARRAGANSETT AVENUE  
 City TIVERTON State RI Zip Code 02878-4620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 286.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 15 / 2013  
**Transaction ID : 4958792**  
 Amount of Each Receipt this Period  
 11.00

**B. OWEN C SWEETLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 139 ROUNDS AVENUE  
 City RIVERSIDE State RI Zip Code 02915-1737  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 15 / 2013  
**Transaction ID : 4958793**  
 Amount of Each Receipt this Period  
 10.00

**C. JOSE A ROSADO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 445 SW 144TH STREET  
 City SEATTLE State WA Zip Code 98166-1545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.25

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 15 / 2013  
**Transaction ID : 4958981**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 71.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. JOHN C MUNRO</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 15 / 2013 <b>Transaction ID : 4958990</b>
Mailing Address 5726 145TH PLACE SW		Amount of Each Receipt this Period 25.00
City EDMONDS	State WA	Zip Code 98026-3729
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 251.00
Name of Employer KING COUNTY DOT-METRO TRANSIT	Occupation OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.00	

Full Name (Last, First, Middle Initial) <b>B. JAMES E REESE</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 15 / 2013 <b>Transaction ID : 4959027</b>
Mailing Address 15442-38TH TERRACE S #C-101		Amount of Each Receipt this Period 25.00
City TUKWILA	State WA	Zip Code 98188-8038
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.50
Name of Employer KING COUNTY DOT-METRO TRANSIT	Occupation OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.50	

Full Name (Last, First, Middle Initial) <b>C. ROGENE H TOLSON</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 15 / 2013 <b>Transaction ID : 4959041</b>
Mailing Address 21210 38TH AVENUE EAST		Amount of Each Receipt this Period 21.00
City SPANAWAY	State WA	Zip Code 98387-6866
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 210.50
Name of Employer KING COUNTY DOT-METRO TRANSIT	Occupation OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.50	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	71.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 OF 76 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. DAVID S FAIRBANKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8622 202ND SW

City EDMONDS	State WA	Zip Code 98026-6644
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2013  
**Transaction ID : 4959049**

Amount of Each Receipt this Period  
21.00

**B. JAMES E HARPER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 32801-29TH AVENUE SW

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

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2013  
**Transaction ID : 4959090**

Amount of Each Receipt this Period  
25.00

**C. JAMES A JAKEMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4019 SW 327TH

City FEDERAL WAY	State WA	Zip Code 98023-0000
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2013  
**Transaction ID : 4959207**

Amount of Each Receipt this Period  
20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	66.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 18 OF 76  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. KELLY R WICKHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6706 N VAN DE CAR RD SE  
 City PORT ORCHARD State WA Zip Code 98367-8506  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 15 / 2013  
**Transaction ID : 4959295**  
 Amount of Each Receipt this Period  
 25.00

**B. RAY H CAMPBELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 28648 226TH AVENUE SE  
 City MAPLE VALLEY State WA Zip Code 98038-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 15 / 2013  
**Transaction ID : 4959302**  
 Amount of Each Receipt this Period  
 22.00

**C. THERESA L TOBIN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19001 96TH AVENUE COURT E  
 City PUYALLUP State WA Zip Code 98375-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 15 / 2013  
**Transaction ID : 4959327**  
 Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 72.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. ROBERT E BANGS</b>		Date of Receipt
Mailing Address 2411 SOUTH 248TH STREET #D-12		<input type="text" value="06"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	<b>Transaction ID : 4959347</b>
KENT	WA	Amount of Each Receipt this Period
	Zip Code	<input type="text" value="25.00"/>
	98032-4070	
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
KING COUNTY DOT-METRO TRANSIT	OPERATOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="255.50"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. JERRY L JACOBS</b>		Date of Receipt
Mailing Address 2112 NO 41ST		<input type="text" value="06"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	<b>Transaction ID : 4959371</b>
SEATTLE	WA	Amount of Each Receipt this Period
	Zip Code	<input type="text" value="25.00"/>
	98103-8316	
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
KING COUNTY DOT-METRO TRANSIT	OPERATOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="260.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. PRENOYAL C DAVIS</b>		Date of Receipt
Mailing Address 19004 SILVER CREEK AVE E		<input type="text" value="06"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	<b>Transaction ID : 4959397</b>
PUYALLUP	WA	Amount of Each Receipt this Period
	Zip Code	<input type="text" value="25.00"/>
	98375-0000	
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
KING COUNTY DOT-METRO TRANSIT	OPERATOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="254.50"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 4610 MERIDIAN AVENUE N

City SEATTLE	State WA	Zip Code 98103-6936
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
227.50

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		15		2013

**Transaction ID : 4959403**

Amount of Each Receipt this Period  

80.00
-------

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

Mailing Address 13041 15TH NE

City SEATTLE	State WA	Zip Code 98125-4023
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.50

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		15		2013

**Transaction ID : 4959406**

Amount of Each Receipt this Period  

20.00
-------

**C. DONALD L WARD**  
Full Name (Last, First, Middle Initial)

Mailing Address 2538 S RAYMOND ST

City SEATTLE	State WA	Zip Code 98108-0000
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		15		2013

**Transaction ID : 4959407**

Amount of Each Receipt this Period  

25.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 6114 SO BANGOR STREET

City SEATTLE State WA Zip Code 98178-2431

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.25

Date of Receipt  
06 / 15 / 2013  
Transaction ID : 4959549

Amount of Each Receipt this Period  
200.00

**B. JAMES L JOHNSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 8425 46TH AVENUE SO

City SEATTLE State WA Zip Code 98118-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
06 / 15 / 2013  
Transaction ID : 4959560

Amount of Each Receipt this Period  
25.00

**C. CAROL A LEAK**  
Full Name (Last, First, Middle Initial)

Mailing Address 1992 SW 352ND STREET

City FEDERAL WAY State WA Zip Code 98023-3784

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt  
06 / 15 / 2013  
Transaction ID : 4959562

Amount of Each Receipt this Period  
21.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	66.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. JIMMY O VANN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3223 S MONROE STREET

City TACOMA	State WA	Zip Code 98409-0000
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2013

**Transaction ID : 4959585**

Amount of Each Receipt this Period  
 25.00

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

Mailing Address 11819 SE 171ST LANE #R301

City RENTON	State WA	Zip Code 98058-0000
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2013

**Transaction ID : 4959657**

Amount of Each Receipt this Period  
 25.00

**C. AUDREY R HEDSTROM**  
Full Name (Last, First, Middle Initial)

Mailing Address 22413 11TH AVENUE SE

City KENT	State WA	Zip Code 98031-0000
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 254.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2013

**Transaction ID : 4959693**

Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 76
	<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) <b>A. VALARIE K GALLEGOS</b>		Date of Receipt
Mailing Address 3101 SE 10TH STREET		<input type="text" value="06"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
RENTON	WA	98058-2932
FEC ID number of contributing federal political committee.		Transaction ID : <b>4959733</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="30.00"/>
Name of Employer	Occupation	
KING COUNTY DOT-METRO TRANSIT	OPERATOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.50"/>	

Full Name (Last, First, Middle Initial) <b>B. SAMUEL LEAANA</b>		Date of Receipt
Mailing Address 1217 H STREET SE		<input type="text" value="06"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
AUBURN	WA	98002-6729
FEC ID number of contributing federal political committee.		Transaction ID : <b>4959752</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="21.00"/>
Name of Employer	Occupation	
KING COUNTY DOT-METRO TRANSIT	OPERATOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="211.00"/>	

Full Name (Last, First, Middle Initial) <b>C. STANLEY C STRAKER</b>		Date of Receipt
Mailing Address 721 ASHLEY COURT E		<input type="text" value="06"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
BUCKLEY	WA	98321-0000
FEC ID number of contributing federal political committee.		Transaction ID : <b>4959762</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer	Occupation	
KING COUNTY DOT-METRO TRANSIT	OPERATOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="225.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="71.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 4634 365TH AVENUE SE

City FALL CITY	State WA	Zip Code 98024-0000
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
252.50

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		15		2013

**Transaction ID : 4959767**

Amount of Each Receipt this Period  
25.00

**B. DAVID S WAGGONER**  
Full Name (Last, First, Middle Initial)

Mailing Address 360 NW Dogwood St. K204

City Issaquah	State WA	Zip Code 98027-2724
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		15		2013

**Transaction ID : 4959781**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 3625 BEACH DRIVE SW #9

City SEATTLE	State WA	Zip Code 98116-0000
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		15		2013

**Transaction ID : 4959833**

Amount of Each Receipt this Period  
20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	70.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

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

FOR LINE NUMBER: PAGE 25 OF 76  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. MICHAEL A HALL**

Mailing Address 23621 - 112TH AVENUE SE  
H-204

City State Zip Code  
KENT WA 98031-0000

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

Name of Employer Occupation  
KING COUNTY DOT-METRO TRANSIT OPERATOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2013  
**Transaction ID : 4959861**

Amount of Each Receipt this Period  
20.00

Full Name (Last, First, Middle Initial)  
**B. CHRIS T ABE**

Mailing Address 500 QUINCY AVENUE NE

City State Zip Code  
RENTON WA 98059-4555

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

Name of Employer Occupation  
KING COUNTY DOT-METRO TRANSIT OPERATOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
257.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2013  
**Transaction ID : 4959875**

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**C. TRACEY R DAVIS**

Mailing Address 4205 AUBURN WAY S  
LOT 116

City State Zip Code  
AUBURN WA 98092-7252

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

Name of Employer Occupation  
KING COUNTY DOT-METRO TRANSIT OPERATOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 15 / 2013  
**Transaction ID : 4959880**

Amount of Each Receipt this Period  
25.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. THERESE C GALES</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 15 / 2013 <b>Transaction ID : 4959938</b>
Mailing Address 2815 Second Ave. Suite 230		Amount of Each Receipt this Period 30.00
City Seattle	State Zip Code WA 98121-1261	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 212.50
Name of Employer KING COUNTY DOT-METRO TRANSIT	Occupation OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. LISA A DARLING</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 08 / 2013 <b>Transaction ID : 4960076</b>
Mailing Address 12037 S LAFAYETTE		Amount of Each Receipt this Period 50.00
City CHICAGO	State Zip Code IL 60628-0000	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00
Name of Employer CHICAGO TRANSIT AUTHORITY RAIL	Occupation OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. SAMUEL HALLMAN</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 08 / 2013 <b>Transaction ID : 4960179</b>
Mailing Address 838 E 38TH PLACE APT 303		Amount of Each Receipt this Period 63.75
City CHICAGO	State Zip Code IL 60653-1940	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 318.75
Name of Employer CHICAGO TRANSIT AUTHORITY RAIL	Occupation OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	143.75
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. PAUL KAPLAN**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2561

City BOCA RATON State FL Zip Code 33427-0000

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

Name of Employer PALM TRAN INC Occupation Operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 13 / 2013  
**Transaction ID : 4960691**

Amount of Each Receipt this Period  
**40.00**

**B. DENNIS ANTONELLIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 5025 Wisconsin Ave NW

City Washington State DC Zip Code 20016-4113

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 ▼ **252.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 11 / 2013  
**Transaction ID : 5081480**

Amount of Each Receipt this Period  
**42.00**

**C. ROBERT H BAKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 5025 Wisconsin Ave NW

City Washington State DC Zip Code 20016-4113

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 ▼ **252.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 11 / 2013  
**Transaction ID : 5081481**

Amount of Each Receipt this Period  
**42.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **124.00**

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

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

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

FOR LINE NUMBER: PAGE 28 OF 76  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. PAUL D BOWEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5025 Wisconsin Ave NW  
 City Washington State DC Zip Code 20016-4113  
 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 ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 11 / 2013  
**Transaction ID : 5081483**  
 Amount of Each Receipt this Period  
 50.00

**B. JOHN COSTA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5025 Wisconsin Ave NW  
 City Washington State DC Zip Code 20016-4113  
 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 ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 11 / 2013  
**Transaction ID : 5081485**  
 Amount of Each Receipt this Period  
 50.00

**C. ANTHONY GARLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5025 Wisconsin Ave NW  
 City Washington State DC Zip Code 20016-4113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AMALGAMATED TRANSIT UNION Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 11 / 2013  
**Transaction ID : 5081488**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. LAWRENCE J HANLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 5025 Wisconsin Ave NW

City Washington State DC Zip Code 20016-4113

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

Name of Employer AMALGAMATED TRANSIT UNION Occupation INTERNATIONAL PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
06 / 11 / 2013  
Transaction ID : 5081491

Amount of Each Receipt this Period  
80.00

**B. CLAUDIA HUDSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 5025 Wisconsin Ave NW

City Washington State DC Zip Code 20016-4113

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 ▼ 600.00

Date of Receipt  
06 / 11 / 2013  
Transaction ID : 5081492

Amount of Each Receipt this Period  
100.00

**C. KENNETH R KIRK**  
Full Name (Last, First, Middle Initial)

Mailing Address 5025 Wisconsin Ave NW

City Washington State DC Zip Code 20016-4113

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 ▼ 300.00

Date of Receipt  
06 / 11 / 2013  
Transaction ID : 5081494

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 230.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. STEPHAN MAC DOUGALL**  
Full Name (Last, First, Middle Initial)

Mailing Address 5025 Wisconsin Ave NW

City Washington State DC Zip Code 20016-4113

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 ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2013  
**Transaction ID : 5081495**

Amount of Each Receipt this Period  
 50.00

**B. WILLIAM G MC LEAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 5025 Wisconsin Ave NW

City Washington State DC Zip Code 20016-4113

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 ▼ 500.04

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2013  
**Transaction ID : 5081496**

Amount of Each Receipt this Period  
 83.34

**C. RICHARD MURPHY**  
Full Name (Last, First, Middle Initial)

Mailing Address 5025 Wisconsin Ave NW

City Washington State DC Zip Code 20016-4113

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 ▼ 500.04

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 11 / 2013  
**Transaction ID : 5081497**

Amount of Each Receipt this Period  
 83.34

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	216.68
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. JAVIER M PEREZ JR</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 11 / 2013 <b>Transaction ID : 5081499</b>
Mailing Address 5025 Wisconsin Ave NW		Amount of Each Receipt this Period 41.67
City Washington	State DC	Zip Code 20016-4113
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 ▼ 250.02	

Full Name (Last, First, Middle Initial) <b>B. YVETTE SALAZAR</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 11 / 2013 <b>Transaction ID : 5081506</b>
Mailing Address 2713 EAST 132ND PLACE		Amount of Each Receipt this Period 100.00
City THORNTON	State CO	Zip Code 80241-2071
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 ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>C. LAURI STRAUGHAN</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 11 / 2013 <b>Transaction ID : 5081508</b>
Mailing Address 5025 Wisconsin Ave NW		Amount of Each Receipt this Period 40.00
City Washington	State DC	Zip Code 20016-4113
FEC ID number of contributing federal political committee. C		
Name of Employer AMALGAMATED TRANSIT UNION	Occupation OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	181.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. CHARLES E WATSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 5025 Wisconsin Ave NW

City Washington State DC Zip Code 20016-4113

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 ▼ 250.02

Date of Receipt 06 / 11 / 2013  
**Transaction ID : 5081511**

Amount of Each Receipt this Period 41.67

**B. ANTHONY WITHINGTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 5025 Wisconsin Ave NW

City Washington State DC Zip Code 20016-4113

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 ▼ 250.02

Date of Receipt 06 / 11 / 2013  
**Transaction ID : 5081514**

Amount of Each Receipt this Period 41.67

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

Mailing Address 8514 S SHYROCK RD

City GLASFORD State IL Zip Code 61533-9458

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

Name of Employer GREATER PEORIA MASS TRAN DIST Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt 06 / 11 / 2013  
**Transaction ID : 5081518**

Amount of Each Receipt this Period 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 93.34

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



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

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

FOR LINE NUMBER: PAGE 33 OF 76  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 8514 S SHYROCK RD

City State Zip Code  
GLASFORD IL 61533-9458

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

Name of Employer Occupation  
GREATER PEORIA MASS TRAN DIST OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **245.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**06 / 21 / 2013**

**Transaction ID : 5081741**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**B. PAUL B NEIL**

Mailing Address 1701 157TH AVENUE NE #A101

City State Zip Code  
BELLEVUE WA 98008-2777

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

Name of Employer Occupation  
KING COUNTY DOT-METRO TRANSIT OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**06 / 21 / 2013**

**Transaction ID : 5081751**

Amount of Each Receipt this Period  
**25.00**

Full Name (Last, First, Middle Initial)  
**C. PAUL J BACHTEL**

Mailing Address 8513 MAIN STREET #203

City State Zip Code  
EDMONDS WA 98026-6940

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

Name of Employer Occupation  
KING COUNTY DOT-METRO TRANSIT OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**06 / 21 / 2013**

**Transaction ID : 5081752**

Amount of Each Receipt this Period  
**25.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **60.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. CLINTON C DE VOSS JR**  
Full Name (Last, First, Middle Initial)

Mailing Address 3225 GALVIN RD

City CENTRALIA State WA Zip Code 98531-9061

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 21 / 2013

**Transaction ID : 5081753**

Amount of Each Receipt this Period  
 25.00

**B. JUDY J YOUNG**  
Full Name (Last, First, Middle Initial)

Mailing Address 7603 SOUTH 112TH STREET

City SEATTLE State WA Zip Code 98178-3227

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 21 / 2013

**Transaction ID : 5081754**

Amount of Each Receipt this Period  
 25.00

**C. NEAL I SAFRIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 5451 NE 203RD PLACE

City LAKE FOREST PARK State WA Zip Code 98155-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 21 / 2013

**Transaction ID : 5081755**

Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. JACKIE L JETER</b>		Date of Receipt
Mailing Address 711 HAACK PLACE		<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code
UPPER MARLBORO	MD	20774-2164
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
WASH METRO AREA TRANSIT AUTH	OPERATOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="450.00"/>	
		Transaction ID : 5083111
		Amount of Each Receipt this Period
		<input type="text" value="75.00"/>

Full Name (Last, First, Middle Initial) <b>B. ROLAND H JETER</b>		Date of Receipt
Mailing Address 711 HAACK PLACE		<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code
UPPER MARLBORO	MD	20774-2164
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
WASH METRO AREA TRANSIT AUTH	OPERATOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	
		Transaction ID : 5083113
		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>

Full Name (Last, First, Middle Initial) <b>C. RONALD L COX</b>		Date of Receipt
Mailing Address 8514 S SHYROCK RD		<input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2013"/>
City	State	Zip Code
GLASFORD	IL	61533-9458
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
GREATER PEORIA MASS TRAN DIST	OPERATOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="215.00"/>	
		Transaction ID : 5085646
		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="135.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 36 OF 76  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 8514 S SHYROCK RD

City GLASFORD      State IL      Zip Code 61533-9458

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

Name of Employer GREATER PEORIA MASS TRAN DIST      Occupation OPERATOR

Receipt For:  Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **06 / 07 / 2013**

**Transaction ID : 5085658**

Amount of Each Receipt this Period **100.00**

Full Name (Last, First, Middle Initial)  
**B. KIMBERLY HEARNS**

Mailing Address 551 E 11 MILE #10

City MADISON HEIGHTS      State MI      Zip Code 48071-0000

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

Name of Employer SUBURBAN MOBILITY AUTH SMART      Occupation OPERATOR

Receipt For:  Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **06 / 19 / 2013**

**Transaction ID : 5085791**

Amount of Each Receipt this Period **35.00**

Full Name (Last, First, Middle Initial)  
**C. GRACE GUERRERO**

Mailing Address 139 POPLAR STREET

City RIDGEFIELD PARK      State NJ      Zip Code 07660-1517

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

Name of Employer AMALGAMATED TRANSIT UNION      Occupation OPERATOR

Receipt For:  Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.02**

Date of Receipt **06 / 07 / 2013**

**Transaction ID : 5087436**

Amount of Each Receipt this Period **41.67**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **86.67**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. DAVID FORD</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 07 / 2013 <b>Transaction ID : 5087956</b>
Mailing Address 25 CHEVERLY ROAD		Amount of Each Receipt this Period 48.10
City LAWRENCEVILLE	State NJ	Zip Code 08648-3405
FEC ID number of contributing federal political committee. C		
Name of Employer NEW JERSEY TRANSIT-MERCER INC	Occupation OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.50	

Full Name (Last, First, Middle Initial) <b>B. STEPHEN SZUCSIK</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 07 / 2013 <b>Transaction ID : 5087974</b>
Mailing Address 8 CASTLE LANE		Amount of Each Receipt this Period 38.48
City BURLINGTON	State NJ	Zip Code 08016-5122
FEC ID number of contributing federal political committee. C		
Name of Employer NEW JERSEY TRANSIT-MERCER INC	Occupation OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88	

Full Name (Last, First, Middle Initial) <b>C. NINOUS EDWARDS</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 07 / 2013 <b>Transaction ID : 5088258</b>
Mailing Address 1008 N ABBOTT AVENUE		Amount of Each Receipt this Period 35.00
City MILPITAS	State CA	Zip Code 95035-0000
FEC ID number of contributing federal political committee. C		
Name of Employer SANTA CLARA VLY TRANS. AUTH.	Occupation OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	121.58
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. JOHN E KAMBISH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 327 CORVILLE DRIVE  
 City SAN JOSE State CA Zip Code 95123-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AMALGAMATED TRANSIT UNION Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 07 / 2013  
**Transaction ID : 5088358**  
 Amount of Each Receipt this Period  
 40.00

**B. TOM A LOPROTO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 458 MC CAMISH AVENUE  
 City SAN JOSE State CA Zip Code 95123-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SANTA CLARA VLY TRANS. AUTH. Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 07 / 2013  
**Transaction ID : 5088395**  
 Amount of Each Receipt this Period  
 35.00

**C. JESS A MARTINEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3801 SAINT NICHOLAS DRIVE  
 City MODESTO State CA Zip Code 95356-2446  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SANTA CLARA VLY TRANS. AUTH. Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 07 / 2013  
**Transaction ID : 5088417**  
 Amount of Each Receipt this Period  
 35.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	110.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. MICHAEL O'TOOLE**  
Full Name (Last, First, Middle Initial)

Mailing Address 1669 MERRILL DRIVE  
#D

City SAN JOSE State CA Zip Code 95124-0000

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

Name of Employer AMALGAMATED TRANSIT UNION Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 07 / 2013

**Transaction ID : 5088466**

Amount of Each Receipt this Period  
50.00

**B. WILFRED M OWENS**  
Full Name (Last, First, Middle Initial)

Mailing Address 336 OHIO STREET

City VALLEJO State CA Zip Code 94590-5053

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

Name of Employer GOLDEN GATE BRIDGE HIGHWAY TRAN Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 21 / 2013

**Transaction ID : 5090501**

Amount of Each Receipt this Period  
42.00

**C. DAVID R PLUMMER**  
Full Name (Last, First, Middle Initial)

Mailing Address 3533 WILDERNESS DRIVE SE

City OLYMPIA State WA Zip Code 98501-4939

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

Name of Employer GRAYS HARBOR COMPANY Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 21 / 2013

**Transaction ID : 5090566**

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	122.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 606 W SUNRISE CT

City SHELTON State WA Zip Code 98584-0000

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

Name of Employer GRAYS HARBOR COMPANY Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 21 / 2013

**Transaction ID : 5090569**

Amount of Each Receipt this Period  
 30.00

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

Mailing Address 70 CASTLE SHANNON BLVD

City PITTSBURGH State PA Zip Code 15228-2202

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

Name of Employer AMALGAMATED TRANSIT UNION Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 443.25

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2013

**Transaction ID : 5090642**

Amount of Each Receipt this Period  
 49.25

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

Mailing Address 376 Anawanda Ave.

City Pittsburgh State PA Zip Code 15228-2439

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

Name of Employer AMALGAMATED TRANSIT UNION Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 337.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2013

**Transaction ID : 5090644**

Amount of Each Receipt this Period  
 37.50

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 116.75

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. TONIA STARKEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 84 VERSAILLES COURT

City CINCINNATI State OH Zip Code 45240-3831

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

Name of Employer SW OHIO REGIONAL TRANSIT AUTH Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 10 / 2013  
**Transaction ID : 5093087**

Amount of Each Receipt this Period 25.00

**B. THOMAS A DEIBLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 871 BILLOW DR

City SAN DIEGO State CA Zip Code 92114-0000

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

Name of Employer SAN DIEGO TRANSIT CORP Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt 06 / 10 / 2013  
**Transaction ID : 5093159**

Amount of Each Receipt this Period 22.00

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

Mailing Address 69 WHITEROCK ROAD  
P O BOX 66

City WESTERLY State RI Zip Code 02891-1249

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt 06 / 10 / 2013  
**Transaction ID : 5097445**

Amount of Each Receipt this Period 9.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 56.00

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

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

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

FOR LINE NUMBER: PAGE 42 OF 76  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. JOHN A CRUZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 118 THIRD BEACH ROAD  
 City MIDDLETOWN State RI Zip Code 02842-5762  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2013  
**Transaction ID : 5097458**  
 Amount of Each Receipt this Period  
 10.00

**B. ADRIAN DELGADO JR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 182 GROSVENOR AVENUE  
 City EAST PROVIDENCE State RI Zip Code 02914-3616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 198.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2013  
**Transaction ID : 5097477**  
 Amount of Each Receipt this Period  
 3.00

**C. ADRIAN DELGADO JR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 182 GROSVENOR AVENUE  
 City EAST PROVIDENCE State RI Zip Code 02914-3616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 204.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2013  
**Transaction ID : 5097478**  
 Amount of Each Receipt this Period  
 6.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 19.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. THOMAS MILLS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 96 VEAZIE STREET

City PROVIDENCE	State RI	Zip Code 02908-2457
--------------------	-------------	------------------------

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH	Occupation OPERATOR
--	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
207.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	10	/	2013

**Transaction ID : 5097640**

Amount of Each Receipt this Period  

9.00
------

**B. VIRGINIA A MOFFITT**  
Full Name (Last, First, Middle Initial)  
Mailing Address 90 GRANT AVE

City CRANSTON	State RI	Zip Code 02920-7718
------------------	-------------	------------------------

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH	Occupation OPERATOR
--	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
290.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	10	/	2013

**Transaction ID : 5097641**

Amount of Each Receipt this Period  

10.00
-------

**C. ERIC ST PIERRE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 46 HIGH STREET

City WARWICK	State RI	Zip Code 02886-1256
-----------------	-------------	------------------------

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH	Occupation OPERATOR
--	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	10	/	2013

**Transaction ID : 5098847**

Amount of Each Receipt this Period  

20.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	39.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 44 OF 76  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. RUTH SULLIVAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 68 NARRAGANSETT AVENUE  
 City TIVERTON State RI Zip Code 02878-4620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2013  
**Transaction ID : 5098851**  
 Amount of Each Receipt this Period  
 22.00

**B. TONIA STARKEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 84 VERSAILLES COURT  
 City CINCINNATI State OH Zip Code 45240-3831  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SW OHIO REGIONAL TRANSIT AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2013  
**Transaction ID : 5099402**  
 Amount of Each Receipt this Period  
 25.00

**C. MICHAEL W BREIHAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 244  
 City ARNOLD State MO Zip Code 63010-0244  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BI-STATE DEVELOPMENT AGENCY Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2013  
**Transaction ID : 5099455**  
 Amount of Each Receipt this Period  
 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 77.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. MICHAEL W BREIHAN**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 244

City ARNOLD State MO Zip Code 63010-0244

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

Name of Employer BI-STATE DEVELOPMENT AGENCY Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt 06 / 24 / 2013  
**Transaction ID : 5099813**

Amount of Each Receipt this Period 30.00

**B. MICHAEL W BREIHAN**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 244

City ARNOLD State MO Zip Code 63010-0244

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

Name of Employer BI-STATE DEVELOPMENT AGENCY Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

Date of Receipt 06 / 24 / 2013  
**Transaction ID : 5100155**

Amount of Each Receipt this Period 30.00

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

Mailing Address 69 WHITEROCK ROAD  
P O BOX 66

City WESTERLY State RI Zip Code 02891-1249

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt 06 / 25 / 2013  
**Transaction ID : 5100563**

Amount of Each Receipt this Period 9.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 69.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. KENNETH M D'AMBROSIO**  
Full Name (Last, First, Middle Initial)

Mailing Address 43 BAGLEY AVE

City CRANSTON State RI Zip Code 02920-3201

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2013

**Transaction ID : 5100582**

Amount of Each Receipt this Period  
 10.00

**B. ADRIAN DELGADO JR**  
Full Name (Last, First, Middle Initial)

Mailing Address 182 GROSVENOR AVENUE

City EAST PROVIDENCE State RI Zip Code 02914-3616

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2013

**Transaction ID : 5100599**

Amount of Each Receipt this Period  
 9.00

**C. DAVID FREMMING**  
Full Name (Last, First, Middle Initial)

Mailing Address 34 WILDWOOD AVENUE

City PROVIDENCE State RI Zip Code 02907-3420

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2013

**Transaction ID : 5100635**

Amount of Each Receipt this Period  
 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	29.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 47 OF 76  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. ROGER LIMA JR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 JACKSON ST  
 City NORTH PROVIDENCE State RI Zip Code 02904-4223  
 Date of Receipt 06 / 25 / 2013  
 Transaction ID : 5100711  
 Amount of Each Receipt this Period 10.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 240.00

**B. THOMAS MILLS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 96 VEAZIE STREET  
 City PROVIDENCE State RI Zip Code 02908-2457  
 Date of Receipt 06 / 25 / 2013  
 Transaction ID : 5100745  
 Amount of Each Receipt this Period 9.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 216.00

**C. VIRGINIA A MOFFITT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 90 GRANT AVE  
 City CRANSTON State RI Zip Code 02920-7718  
 Date of Receipt 06 / 25 / 2013  
 Transaction ID : 5100746  
 Amount of Each Receipt this Period 10.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 310.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 29.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 46 HIGH STREET

City WARWICK State RI Zip Code 02886-1256

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2013  
**Transaction ID : 5100848**

Amount of Each Receipt this Period  
 20.00

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

Mailing Address 139 ROUNDS AVENUE

City RIVERSIDE State RI Zip Code 02915-1737

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2013  
**Transaction ID : 5100852**

Amount of Each Receipt this Period  
 10.00

**C. JOSE A ROSADO**  
Full Name (Last, First, Middle Initial)

Mailing Address 445 SW 144TH STREET

City SEATTLE State WA Zip Code 98166-1545

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.25

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2013  
**Transaction ID : 5101317**

Amount of Each Receipt this Period  
 50.00

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

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)  
**A. JOHN C MUNRO**

Mailing Address 5726 145TH PLACE SW

City EDMONDS	State WA	Zip Code 98026-3729
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **276.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2013

**Transaction ID : 5101326**

Amount of Each Receipt this Period  

62.00
-------

**25.00**

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

Mailing Address 14511 SE 252ND PLACE

City KENT	State WA	Zip Code 98042-3415
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2013

**Transaction ID : 5101335**

Amount of Each Receipt this Period  

62.00
-------

**16.00**

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

Mailing Address 21210 38TH AVENUE EAST

City SPANAWAY	State WA	Zip Code 98387-6866
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **231.50**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2013

**Transaction ID : 5101377**

Amount of Each Receipt this Period  

62.00
-------

**21.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>62.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. DAVID S FAIRBANKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8622 202ND SW  
 City EDMONDS State WA Zip Code 98026-6644  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2013  
**Transaction ID : 5101385**  
 Amount of Each Receipt this Period  
 21.00

**B. ALANA E SOREM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19853 25TH AVENUE NE #314  
 City SHORELINE State WA Zip Code 98155-1364  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2013  
**Transaction ID : 5101420**  
 Amount of Each Receipt this Period  
 20.00

**C. JAMES E HARPER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 32801-29TH AVENUE SW  
 City FEDERAL WAY State WA Zip Code 98023-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2013  
**Transaction ID : 5101426**  
 Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	66.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 51 OF 76  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. JAMES A JAKEMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4019 SW 327TH  
 City State Zip Code  
 FEDERAL WAY WA 98023-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 KING COUNTY DOT-METRO TRANSIT OPERATOR  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 25 / 2013  
**Transaction ID : 5101544**  
 Amount of Each Receipt this Period  
 20.00

**B. KELLY R WICKHAM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6706 N VAN DE CAR RD SE  
 City State Zip Code  
 PORT ORCHARD WA 98367-8506  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 KING COUNTY DOT-METRO TRANSIT OPERATOR  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 276.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 25 / 2013  
**Transaction ID : 5101631**  
 Amount of Each Receipt this Period  
 25.00

**C. RAY H CAMPBELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 28648 226TH AVENUE SE  
 City State Zip Code  
 MAPLE VALLEY WA 98038-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 KING COUNTY DOT-METRO TRANSIT OPERATOR  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 242.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 25 / 2013  
**Transaction ID : 5101638**  
 Amount of Each Receipt this Period  
 22.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 67.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 52 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 19001 96TH AVENUE COURT E

City PUYALLUP	State WA	Zip Code 98375-0000
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
276.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2013

**Transaction ID : 5101662**

Amount of Each Receipt this Period  

25.00
-------

**B. ROBERT E BANGS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2411 SOUTH 248TH STREET  
#D-12

City KENT	State WA	Zip Code 98032-4070
--------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2013

**Transaction ID : 5101682**

Amount of Each Receipt this Period  

25.00
-------

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

Mailing Address 2112 NO 41ST

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2013

**Transaction ID : 5101706**

Amount of Each Receipt this Period  

25.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. PRENOYAL C DAVIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19004 SILVER CREEK AVE E  
 City PUYALLUP State WA Zip Code 98375-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 279.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2013  
**Transaction ID : 5101732**  
 Amount of Each Receipt this Period  
 25.00

**B. RICHARD M YOUNT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4610 MERIDIAN AVENUE N  
 City SEATTLE State WA Zip Code 98103-6936  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 262.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2013  
**Transaction ID : 5101738**  
 Amount of Each Receipt this Period  
 35.00

**C. RUTH WILSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13041 15TH NE  
 City SEATTLE State WA Zip Code 98125-4023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2013  
**Transaction ID : 5101741**  
 Amount of Each Receipt this Period  
 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. DONALD L WARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2538 S RAYMOND ST  
 City SEATTLE State WA Zip Code 98108-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2013  
**Transaction ID : 5101742**  
 Amount of Each Receipt this Period  
 25.00

**B. RICHARD L LEONARD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6114 SO BANGOR STREET  
 City SEATTLE State WA Zip Code 98178-2431  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.25

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2013  
**Transaction ID : 5101885**  
 Amount of Each Receipt this Period  
 20.00

**C. JAMES L JOHNSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8425 46TH AVENUE SO  
 City SEATTLE State WA Zip Code 98118-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2013  
**Transaction ID : 5101896**  
 Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	70.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial) <b>A. CAROL A LEAK</b>		Date of Receipt MM / DD / YYYY 06 / 25 / 2013 <b>Transaction ID : 5101898</b>
Mailing Address 1992 SW 352ND STREET		Amount of Each Receipt this Period 13.85
City FEDERAL WAY	State WA	Zip Code 98023-3784
FEC ID number of contributing federal political committee. C	Name of Employer KING COUNTY DOT-METRO TRANSIT	
Occupation OPERATOR		Aggregate Year-to-Date ▼ 224.85
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. JIMMY O VANN</b>		Date of Receipt MM / DD / YYYY 06 / 25 / 2013 <b>Transaction ID : 5101921</b>
Mailing Address 3223 S MONROE STREET		Amount of Each Receipt this Period 25.00
City TACOMA	State WA	Zip Code 98409-0000
FEC ID number of contributing federal political committee. C	Name of Employer KING COUNTY DOT-METRO TRANSIT	
Occupation OPERATOR		Aggregate Year-to-Date ▼ 276.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. VELDA D ALEXANDER</b>		Date of Receipt MM / DD / YYYY 06 / 25 / 2013 <b>Transaction ID : 5101942</b>
Mailing Address 2401 E LYNN STREET APT 2		Amount of Each Receipt this Period 21.00
City SEATTLE	State WA	Zip Code 98122-0000
FEC ID number of contributing federal political committee. C	Name of Employer KING COUNTY DOT-METRO TRANSIT	
Occupation OPERATOR		Aggregate Year-to-Date ▼ 218.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	59.85
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 56 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. DALE L KOPPERDAHL</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 25 / 2013 <b>Transaction ID : 5101992</b>
Mailing Address 11819 SE 171ST LANE #R301		Amount of Each Receipt this Period 25.00
City RENTON State WA Zip Code 98058-0000	FEC ID number of contributing federal political committee. C	
Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.50

Full Name (Last, First, Middle Initial) <b>B. AUDREY R HEDSTROM</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 25 / 2013 <b>Transaction ID : 5102028</b>
Mailing Address 22413 11TH AVENUE SE		Amount of Each Receipt this Period 25.00
City KENT State WA Zip Code 98031-0000	FEC ID number of contributing federal political committee. C	
Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 279.00

Full Name (Last, First, Middle Initial) <b>C. VALARIE K GALLEGOS</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 25 / 2013 <b>Transaction ID : 5102068</b>
Mailing Address 3101 SE 10TH STREET		Amount of Each Receipt this Period 30.00
City RENTON State WA Zip Code 98058-2932	FEC ID number of contributing federal political committee. C	
Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.50

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 1217 H STREET SE

City AUBURN State WA Zip Code 98002-6729

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 232.00

Date of Receipt 06 / 25 / 2013  
Transaction ID : 5102087

Amount of Each Receipt this Period 21.00

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

Mailing Address 721 ASHLEY COURT E

City BUCKLEY State WA Zip Code 98321-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt 06 / 25 / 2013  
Transaction ID : 5102097

Amount of Each Receipt this Period 20.00

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

Mailing Address 4634 365TH AVENUE SE

City FALL CITY State WA Zip Code 98024-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 277.50

Date of Receipt 06 / 25 / 2013  
Transaction ID : 5102102

Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 66.00

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

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

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

FOR LINE NUMBER: PAGE 58 OF 76  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. DAVID S WAGGONER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 360 NW Dogwood St. K204  
 City Issaquah State WA Zip Code 98027-2724  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2013  
**Transaction ID : 5102116**  
 Amount of Each Receipt this Period  
 25.00

**B. CHERISE Y MILLHOUSE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1713 NE 94TH STREET  
 City SEATTLE State WA Zip Code 98115-3256  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 202.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2013  
**Transaction ID : 5102135**  
 Amount of Each Receipt this Period  
 25.00

**C. KELVIN D KELLEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8603 51ST COURT SW  
 City UNIVERSITY PLACE State WA Zip Code 98467-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 223.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2013  
**Transaction ID : 5102147**  
 Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 3625 BEACH DRIVE SW #9

City SEATTLE State WA Zip Code 98116-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt  
06 / 25 / 2013  
**Transaction ID : 5102168**

Amount of Each Receipt this Period  
20.00

**B. MICHAEL A HALL**  
Full Name (Last, First, Middle Initial)

Mailing Address 23621 - 112TH AVENUE SE H-204

City KENT State WA Zip Code 98031-0000

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 221.50

Date of Receipt  
06 / 25 / 2013  
**Transaction ID : 5102197**

Amount of Each Receipt this Period  
20.00

**C. CHRIS T ABE**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 QUINCY AVENUE NE

City RENTON State WA Zip Code 98059-4555

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 282.50

Date of Receipt  
06 / 25 / 2013  
**Transaction ID : 5102211**

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 65.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 60 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)  
**A. TRACEY R DAVIS**

Mailing Address 4205 AUBURN WAY S  
LOT 116

City AUBURN State WA Zip Code 98092-7252

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  
06 / 25 / 2013  
Transaction ID : 5102216

Amount of Each Receipt this Period  
25.00

Full Name (Last, First, Middle Initial)  
**B. THERESE C GALES**

Mailing Address 2815 Second Ave.  
Suite 230

City Seattle State WA Zip Code 98121-1261

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

Name of Employer KING COUNTY DOT-METRO TRANSIT Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
212.63

Date of Receipt  
06 / 25 / 2013  
Transaction ID : 5102274

Amount of Each Receipt this Period  
0.13

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

Mailing Address 69 WHITEROCK ROAD  
P O BOX 66

City WESTERLY State RI Zip Code 02891-1249

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

Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
243.00

Date of Receipt  
06 / 29 / 2013  
Transaction ID : 5121147

Amount of Each Receipt this Period  
9.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 34.13

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

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

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

FOR LINE NUMBER: PAGE 61 OF 76  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. JOHN A CRUZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 118 THIRD BEACH ROAD  
 City MIDDLETOWN State RI Zip Code 02842-5762  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2013  
**Transaction ID : 5121159**  
 Amount of Each Receipt this Period  
 10.00

**B. KENNETH M D'AMBROSIO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 43 BAGLEY AVE  
 City CRANSTON State RI Zip Code 02920-3201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2013  
**Transaction ID : 5121168**  
 Amount of Each Receipt this Period  
 20.00

**C. ADRIAN DELGADO JR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 182 GROSVENOR AVENUE  
 City EAST PROVIDENCE State RI Zip Code 02914-3616  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2013  
**Transaction ID : 5121182**  
 Amount of Each Receipt this Period  
 9.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 39.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**AMALGAMATED TRANSIT UNION - COPE**

Full Name (Last, First, Middle Initial) <b>A. ROGER LIMA JR</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 29 / 2013 <b>Transaction ID : 5121293</b>
Mailing Address 4 JACKSON ST		Amount of Each Receipt this Period 10.00
City NORTH PROVIDENCE	State RI	Zip Code 02904-4223
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer RHODE ISLAND PUBLIC TRANS AUTH	Occupation OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. THOMAS MILLS</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 29 / 2013 <b>Transaction ID : 5121325</b>
Mailing Address 96 VEAZIE STREET		Amount of Each Receipt this Period 9.00
City PROVIDENCE	State RI	Zip Code 02908-2457
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer RHODE ISLAND PUBLIC TRANS AUTH	Occupation OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C. VIRGINIA A MOFFITT</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 29 / 2013 <b>Transaction ID : 5121326</b>
Mailing Address 90 GRANT AVE		Amount of Each Receipt this Period 10.00
City CRANSTON	State RI	Zip Code 02920-7718
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer RHODE ISLAND PUBLIC TRANS AUTH	Occupation OPERATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	29.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 63 OF 76  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. ERIC ST PIERRE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 46 HIGH STREET  
 City WARWICK State RI Zip Code 02886-1256  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 580.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2013  
**Transaction ID : 5121429**  
 Amount of Each Receipt this Period  
 20.00

**B. RUTH SULLIVAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 68 NARRAGANSETT AVENUE  
 City TIVERTON State RI Zip Code 02878-4620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 297.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2013  
**Transaction ID : 5121432**  
 Amount of Each Receipt this Period  
 11.00

**C. OWEN C SWEETLAND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 139 ROUNDS AVENUE  
 City RIVERSIDE State RI Zip Code 02915-1737  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RHODE ISLAND PUBLIC TRANS AUTH Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2013  
**Transaction ID : 5121434**  
 Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 41.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 76
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 8514 S SHYROCK RD

City GLASFORD State IL Zip Code 61533-9458

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

Name of Employer GREATER PEORIA MASS TRAN DIST Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 06 / 27 / 2013  
**Transaction ID : 5151300**

Amount of Each Receipt this Period 10.00

**B. TIRAN BILLUPS**  
Full Name (Last, First, Middle Initial)

Mailing Address 186 BROOKSIDE AVE

City IRVINGTON State NJ Zip Code 07111-0000

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

Name of Employer N J TRANSIT BUS OPER INC Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 03 / 2013  
**Transaction ID : 5156634**

Amount of Each Receipt this Period 225.00

**C. TIRAN BILLUPS**  
Full Name (Last, First, Middle Initial)

Mailing Address 186 BROOKSIDE AVE

City IRVINGTON State NJ Zip Code 07111-0000

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

Name of Employer N J TRANSIT BUS OPER INC Occupation OPERATOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 03 / 2013  
**Transaction ID : 5156635**

Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 260.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. MICHAEL W BREIHAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 244  
 City ARNOLD State MO Zip Code 63010-0244  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BI-STATE DEVELOPMENT AGENCY Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2013  
**Transaction ID : 5157836**  
 Amount of Each Receipt this Period  
 30.00

**B. MICHAEL W BREIHAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 244  
 City ARNOLD State MO Zip Code 63010-0244  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BI-STATE DEVELOPMENT AGENCY Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2013  
**Transaction ID : 5157839**  
 Amount of Each Receipt this Period  
 30.00

**C. MICHAEL W BREIHAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 244  
 City ARNOLD State MO Zip Code 63010-0244  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BI-STATE DEVELOPMENT AGENCY Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2013  
**Transaction ID : 5157842**  
 Amount of Each Receipt this Period  
 30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	90.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 66 OF 76
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. MICHAEL W BREIHAN</b>		Date of Receipt
Mailing Address PO BOX 244		<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2013"/>
City	State	Zip Code
ARNOLD	MO	63010-0244
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 5157845</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
BI-STATE DEVELOPMENT AGENCY	OPERATOR	<input type="text" value="30.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="600.00"/>	

Full Name (Last, First, Middle Initial) <b>B. MARQUIS MOSELY</b>		Date of Receipt
Mailing Address 501 Pulliam St. SW Suite 406		<input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code
Atlanta	GA	30312-2750
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 5163243</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
AMALGAMATED TRANSIT UNION	OPERATOR	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) <b>C. STANLEY GRONEK</b>		Date of Receipt
Mailing Address 1531 48TH STREET		<input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
City	State	Zip Code
BOULDER	CO	80303-1143
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 5163526</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
REGIONAL TRANSPORTATION DIST	Operator	<input type="text" value="88.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="663.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="168.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 76
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. CARLOS CURIEL JR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12821 N RIM WAY  
 City RANCHO CUCAMONGA State CA Zip Code 91739-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LOS ANGELES CTY METRO TRAN AUT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 18 / 2013  
**Transaction ID : 5168025**  
 Amount of Each Receipt this Period  
 200.00

**B. HAGOP H HAGOPIAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 527 E CHEVY CHASE DRIVE #1  
 City GLENDALE State CA Zip Code 91205-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LOS ANGELES CTY METRO TRAN AUT Occupation OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 229.24

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 18 / 2013  
**Transaction ID : 5168155**  
 Amount of Each Receipt this Period  
 20.84

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.84
<b>TOTAL</b> This Period (last page this line number only).....▶	5248.29

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 68 OF 76  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

Full Name (Last, First, Middle Initial)  
**A. Stephen F. Lynch For Congress Committee**

Mailing Address 105 Farragut Road

City State Zip Code  
South Boston MA 02127

FEC ID number of contributing federal political committee. **C** C00366948

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 25 / 2013  
**Transaction ID : 5101303**

Amount of Each Receipt this Period  
5000.00

Refund of PAC Contribution originally reported on 9/28/2012

Full Name (Last, First, Middle Initial)  
**B.**

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00

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

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

Full Name (Last, First, Middle Initial)

**A. Cybersource Corp.**

Mailing Address 1295 Charleston Road

City Mountainview State CA Zip Code 94043

Purpose of Disbursement  
Bank Fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 5168676**

Amount of Each Disbursement this Period

Bank Fee

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Blumenauer For Congress**

Mailing Address 830 NE Holladay, #105

City Portland State OR Zip Code 97232

Purpose of Disbursement  
Contribution

011

Candidate Name

**Rep. Earl Blumenauer**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OR District: 03

Date of Disbursement

MM / DD / YYYY  
06 / 05 / 2013

**Transaction ID : 4908505**

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Barbara Lee For Congress**

Mailing Address 449 Fifteenth Street  
Suite 403

City Oakland State CA Zip Code 94612

Purpose of Disbursement  
Contribution

011

Candidate Name

**Rep. Barbara Lee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 13

Date of Disbursement

MM / DD / YYYY  
06 / 05 / 2013

**Transaction ID : 4908517**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Michael Grimm For Congress**

Mailing Address PO Box 61806

City Staten Island State NY Zip Code 10306

Purpose of Disbursement  
Contribution

011

Candidate Name

**Rep. Michael Grimm**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NY District: 13

Date of Disbursement

MM / DD / YYYY  
06 / 05 / 2013

**Transaction ID : 4908531**

Amount of Each Disbursement this Period

2500.00

Contribution

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

6000.00

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

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

Full Name (Last, First, Middle Initial)

**A. Hoyer For Congress**

Mailing Address 700 13th Street, NW  
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Steny Hoyer**

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

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 11 / 2013

**Transaction ID : 4918888**

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

**B. New Millennium PAC**

Mailing Address PO Box 32248

City Newark State NJ Zip Code 07102

Purpose of Disbursement  
Contribution

Candidate Name

**New Millennium PAC**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 11 / 2013

**Transaction ID : 4919161**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Pete King For Congress Committee**

Mailing Address PO Box 1428

City Seaford State NY Zip Code 11783

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Peter King**

Office Sought:  House  
 Senate  
 President  
State: NY District: 02

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 11 / 2013

**Transaction ID : 4919654**

Amount of Each Disbursement this Period

1000.00

Contribution

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

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

4500.00

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

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

Full Name (Last, First, Middle Initial)

**A. Titus For Congress**

Mailing Address PO Box 72454

City Las Vegas State NV Zip Code 89170

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ms. Dina Titus**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NV District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 11 / 2013

**Transaction ID : 4919679**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Nolan For Congress Volunteer Committee**

Mailing Address PO Box 25240138 Sawmill Rd

City Emily State MN Zip Code 56447

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mr. Richard Nolan**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MN District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 11 / 2013

**Transaction ID : 4919686**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Cummings For Congress Campaign Committee**

Mailing Address PO Box 1631

City Baltimore State MD Zip Code 21203

Purpose of Disbursement  
Contribution

011

Candidate Name

**Rep. Elijah Cummings**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MD District: 07

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 11 / 2013

**Transaction ID : 4919736**

Amount of Each Disbursement this Period

1000.00

Contribution

**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)

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

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

Full Name (Last, First, Middle Initial)

**A. Robin Kelly For Congress**

Mailing Address PO Box 6953

City Chicago State IL Zip Code 60680

Purpose of Disbursement  
Contribution

011

Candidate Name  
**Robin Kelly**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IL District: 02

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 27 / 2013

**Transaction ID : 5082269**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Bera For Congress**

Mailing Address Post Office Box 582496

City Elk Grove State CA Zip Code 95758

Purpose of Disbursement  
Contribution

011

Candidate Name  
**Amerish Bera**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 07

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2013

**Transaction ID : 5092756**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Friends Of Lois Capps**

Mailing Address P.O. Box 23940

City Santa Barbara State CA Zip Code 93121

Purpose of Disbursement  
Contribution

011

Candidate Name  
**Rep. Lois Capps**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 24

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2013

**Transaction ID : 5092757**

Amount of Each Disbursement this Period

1000.00

Contribution

**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)

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

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

Full Name (Last, First, Middle Initial)

**A. Julia Brownley For Congress**

Mailing Address PO Box 2018

City Thousand Oaks State CA Zip Code 91358

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ms. Julia Brownley**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 26

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2013

**Transaction ID : 5092758**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Dr. Raul Ruiz For Congress**

Mailing Address PO Box 6116

City La Quinta State CA Zip Code 92248

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mr. Raul Ruiz**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 36

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2013

**Transaction ID : 5092759**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Scott Peters for Congress**

Mailing Address PO Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement  
Contribution

011

Candidate Name

**Scott Peters**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 52

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2013

**Transaction ID : 5092760**

Amount of Each Disbursement this Period

1000.00

Contribution

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

3000.00

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

19500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Citizens for Lisa Madigan**

Mailing Address 500 N Dearborn Street  
Suite 510

City Chicago State IL Zip Code 60654

Purpose of Disbursement  
Lisa Madigan, ATTORNEY GENERAL IL

011

Candidate Name

**Lisa Madigan**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2013

**Transaction ID : 5083309**

Amount of Each Disbursement this Period

1000.00

Lisa Madigan, ATTORNEY GENERAL IL

Full Name (Last, First, Middle Initial)

**B. Friends of Elgie Sims**

Mailing Address 8142A S Prarie Park Place

City Chicago State IL Zip Code 60619

Purpose of Disbursement  
Elgie Sims, STATE HOUSE 34th IL

011

Candidate Name

**Elgie Sims Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 34

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2013

**Transaction ID : 5083311**

Amount of Each Disbursement this Period

250.00

Elgie Sims, STATE HOUSE 34th IL

Full Name (Last, First, Middle Initial)

**C. Illinois Legislative Black Caucus**

Mailing Address PO Box 12104

City Springfield State IL Zip Code 62791

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2013

**Transaction ID : 5083322**

Amount of Each Disbursement this Period

500.00

Contribution

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

1750.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Friends of Tabares**

Mailing Address PO Box 6941

City Chicago State IL Zip Code 60680

Purpose of Disbursement  
Silvana Tabares, STATE HOUSE 21st IL

011

Candidate Name

**IL Rep. Silvana Tabares**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 21

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2013

**Transaction ID : 5083323**

Amount of Each Disbursement this Period

250.00

Silvana Tabares, STATE HOUSE 21st IL

Full Name (Last, First, Middle Initial)

**B. Friends of Christain Mitchell**

Mailing Address PO Box 805167

City Chicago State IL Zip Code 60680

Purpose of Disbursement  
Christian Mitchell, STATE HOUSE 26th IL

011

Candidate Name

**IL Rep. Christian Mitchell**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 26

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2013

**Transaction ID : 5083324**

Amount of Each Disbursement this Period

250.00

Christian Mitchell, STATE HOUSE 26th IL

Full Name (Last, First, Middle Initial)

**C. Preckwinkle for President**

Mailing Address 1516 53rd St  
2nd Floor

City Chicago State IL Zip Code 60615

Purpose of Disbursement  
Toni Preckwinkle, COOK COUNTY - PRESIDENT IL

011

Candidate Name

**Toni Preckwinkle**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2013

**Transaction ID : 5083325**

Amount of Each Disbursement this Period

1250.00

Toni Preckwinkle, COOK COUNTY - PRESIDENT IL

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

1750.00

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

3500.00