

# 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.

**SEIU COPE (Service Employees International Union Committee On Political Education)**

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER ▼**  **CITY ▲** **STATE ▲** **ZIP CODE ▲**

3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on  /  /  in the State of

(d) 30-Day **POST-Election** Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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 Michael P. Fishman

Signature of Treasurer Michael P. Fishman [Electronically Filed] Date  /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**SEIU COPE (Service Employees International Union Committee On Political Education)**

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

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2014"/>   |                         | 13280819.59                       |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....   | 15250468.65             |                                   |
| (c) Total Receipts (from Line 19) .....   | 1212166.80              | 4022203.46                        |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....             | 16462635.45             | 17303023.05                       |
| 7. Total Disbursements (from Line 31).....  | 1001721.01              | 1842108.61                        |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                        | 15460914.44             | 15460914.44                       |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D).....  | 0.00                    |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)..... | 263603.37               |                                   |

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**SEIU COPE (Service Employees International Union Committee On Political Education)**

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

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 522.00                        | 926.00                            |
| (ii) Unitemized .....   | 1196540.65                    | 3999486.88                        |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶  | 1197062.65                    | 4000412.88                        |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....  | 0.00                          | 0.00                              |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 1197062.65                    | 4000412.88                        |
| 12. Transfers From Affiliated/Other Party Committees.....   | 10076.70                      | 16733.99                          |
| 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.).....   | 27.45                         | 56.59                             |
| 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))..... ▶                        | 1212166.80                    | 4022203.46                        |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶                                  | 1212166.80                    | 4022203.46                        |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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 .....   | 111416.51                     | 250832.74                         |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 111416.51                     | 250832.74                         |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 67500.00                      | 70000.00                          |
| 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 .....  | 822804.50                     | 1521275.87                        |
| 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)) ..      | 1001721.01                    | 1842108.61                        |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 1001721.01                    | 1842108.61                        |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 1197062.65                    | 4000412.88                        |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 1197062.65                    | 4000412.88                        |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 111416.51                     | 250832.74                         |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 111416.51                     | 250832.74                         |

**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 25  |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15       | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

**A. Kirk Adams**  
Full Name (Last, First, Middle Initial)  
Mailing Address 325 W 86th Street #309  
City New York State NY Zip Code 10024  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SEIU Occupation Assistant to President  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **400.00**

Date of Receipt **02 / 12 / 2014**  
**Transaction ID : C6479769**  
Amount of Each Receipt this Period **200.00**  
\* Payroll Deduction: \$100.00 Bi-Weekly

**B. Nancy E Cross**  
Full Name (Last, First, Middle Initial)  
Mailing Address 604 Hinman Ave # 32  
City Evanston State IL Zip Code 60202-3078  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SEIU Local 1 Occupation Vice President  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **240.00**

Date of Receipt **02 / 25 / 2014**  
**Transaction ID : C6480058**  
Amount of Each Receipt this Period **120.00**  
\* Payroll Deduction: \$60.00 Bi-Weekly

**C. Mary Kay Henry**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1519 12th St NW  
City Washington State DC Zip Code 20005-4433  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SEIU Occupation Executive Board Member  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **404.00**

Date of Receipt **02 / 12 / 2014**  
**Transaction ID : C6479833**  
Amount of Each Receipt this Period **202.00**  
\* Payroll Deduction: \$101.00 Bi-Weekly

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | <b>522.00</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... | <b>522.00</b> |

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

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

FOR LINE NUMBER: PAGE 7 OF 25  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)  
**A. Workers United for Political Power Campaign Comm.**

Mailing Address 31 WEST 15TH STREET 3RD FLOOR  
 POLITICAL DEPARTMENT

City NEW YORK State NY Zip Code 10011

FEC ID number of contributing federal political committee. **C** C00462044

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 16733.99

Date of Receipt 02 / 28 / 2014  
**Transaction ID : C6476419**

Amount of Each Receipt this Period 25.00

Transfer

Full Name (Last, First, Middle Initial)  
**B. Workers United for Political Power Campaign Comm.**

Mailing Address 31 WEST 15TH STREET 3RD FLOOR  
 POLITICAL DEPARTMENT

City NEW YORK State NY Zip Code 10011

FEC ID number of contributing federal political committee. **C** C00462044

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 16733.99

Date of Receipt 02 / 28 / 2014  
**Transaction ID : C6476420**

Amount of Each Receipt this Period 93.50

Transfer

Full Name (Last, First, Middle Initial)  
**C. Workers United for Political Power Campaign Comm.**

Mailing Address 31 WEST 15TH STREET 3RD FLOOR  
 POLITICAL DEPARTMENT

City NEW YORK State NY Zip Code 10011

FEC ID number of contributing federal political committee. **C** C00462044

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 16733.99

Date of Receipt 02 / 28 / 2014  
**Transaction ID : C6476421**

Amount of Each Receipt this Period 1592.76

Transfer

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1711.26

**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 25  |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input checked="" 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)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

|   |          |   |
|---|----------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Workers United for Political Power Campaign Comm.</b>                          |          | Date of Receipt   |
| Mailing Address 31 WEST 15TH STREET 3RD FLOOR<br>POLITICAL DEPARTMENT   |          | <input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2014"/> |
| City NEW YORK   | State NY | Zip Code 10011  |
| FEC ID number of contributing federal political committee. <b>C</b> C00462044   |          | <b>Transaction ID : C6476422</b>  |
| Name of Employer  |          | Occupation  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |          | Amount of Each Receipt this Period<br><input type="text" value="385.35"/>                             |
| Aggregate Year-to-Date ▼<br><input type="text" value="16733.99"/>   |          | Transfer  |

|   |          |   |
|---|----------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Workers United for Political Power Campaign Comm.</b>                          |          | Date of Receipt   |
| Mailing Address 31 WEST 15TH STREET 3RD FLOOR<br>POLITICAL DEPARTMENT   |          | <input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2014"/> |
| City NEW YORK   | State NY | Zip Code 10011  |
| FEC ID number of contributing federal political committee. <b>C</b> C00462044   |          | <b>Transaction ID : C6476423</b>  |
| Name of Employer  |          | Occupation  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |          | Amount of Each Receipt this Period<br><input type="text" value="5101.65"/>                            |
| Aggregate Year-to-Date ▼<br><input type="text" value="16733.99"/>   |          | Transfer  |

|   |          |   |
|---|----------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Workers United for Political Power Campaign Comm.</b>                          |          | Date of Receipt   |
| Mailing Address 31 WEST 15TH STREET 3RD FLOOR<br>POLITICAL DEPARTMENT   |          | <input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2014"/> |
| City NEW YORK   | State NY | Zip Code 10011  |
| FEC ID number of contributing federal political committee. <b>C</b> C00462044   |          | <b>Transaction ID : C6476424</b>  |
| Name of Employer  |          | Occupation  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |          | Amount of Each Receipt this Period<br><input type="text" value="224.56"/>                             |
| Aggregate Year-to-Date ▼<br><input type="text" value="16733.99"/>   |          | Transfer  |

|  |                                      |
|--|--------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <input type="text" value="5711.56"/> |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | <input type="text" value=""/>        |



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

|   |                              |                                   |   |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 9 OF 25  |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c      | <input checked="" 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)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

|   |                                      |   |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Workers United for Political Power Campaign Comm.</b>                          |                                      | Date of Receipt   |
| Mailing Address 31 WEST 15TH STREET 3RD FLOOR<br>POLITICAL DEPARTMENT   |                                      | <input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2014"/> |
| City NEW YORK   | State NY                             | Zip Code 10011  |
| FEC ID number of contributing federal political committee. <b>C</b> C00462044   |                                      | <b>Transaction ID : C6476425</b>  |
| Name of Employer  | Occupation                           | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>16733.99 | 2520.88   |
|   |                                      | Transfer  |

|   |                                      |   |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Workers United for Political Power Campaign Comm.</b>                          |                                      | Date of Receipt   |
| Mailing Address 31 WEST 15TH STREET 3RD FLOOR<br>POLITICAL DEPARTMENT   |                                      | <input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2014"/> |
| City NEW YORK   | State NY                             | Zip Code 10011  |
| FEC ID number of contributing federal political committee. <b>C</b> C00462044   |                                      | <b>Transaction ID : C6476426</b>  |
| Name of Employer  | Occupation                           | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>16733.99 | 133.00  |
|   |                                      | Transfer  |

|   |                          |  |
|---|--------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C.</b>  |                          | Date of Receipt  |
| Mailing Address   |                          | <input type="text"/> / <input type="text"/> / <input type="text"/> |
| City  | State                    | Zip Code   |
| FEC ID number of contributing federal political committee. <b>C</b>   |                          | Amount of Each Receipt this Period                                 |
| Name of Employer  | Occupation               |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ |  |

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 2653.88  |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 10076.70 |

**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 25  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

**A. FRIENDS OF CONGRESSMAN GEORGE MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address POST OFFICE BOX 5864  
 City CONCORD State CA Zip Code 94524  
 FEC ID number of contributing federal political committee. **C** C00026757  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 10 / 2014  
**Transaction ID : C6477916**  
 Amount of Each Receipt this Period  
 5000.00  
 Refund of 9/27/2013 Contribution

**B.**  
 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

**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).....▶           | 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)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. Amalgamated Bank, N. A.**

Mailing Address 1825 K Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02    |   | 04    |   | 2014      |

**Transaction ID : D334843**

Amount of Each Disbursement this Period

|       |
|-------|
| 38.19 |
|-------|

Full Name (Last, First, Middle Initial)

**B. Amalgamated Bank, N. A.**

Mailing Address 1825 K Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02    |   | 04    |   | 2014      |

**Transaction ID : D334844**

Amount of Each Disbursement this Period

|       |
|-------|
| 20.00 |
|-------|

Full Name (Last, First, Middle Initial)

**C. Amalgamated Bank, N. A.**

Mailing Address 1825 K Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02    |   | 04    |   | 2014      |

**Transaction ID : D334845**

Amount of Each Disbursement this Period

|       |
|-------|
| 15.00 |
|-------|

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

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

|       |
|-------|
| 73.19 |
|-------|

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

**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)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. Amalgamated Bank, N. A.**

Mailing Address 1825 K Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 03 / 2014

**Transaction ID : D334846**

Amount of Each Disbursement this Period

78.83

Full Name (Last, First, Middle Initial)

**B. SEIU Healthcare IL-IN**

Mailing Address 2229 South Halsted St

City Chicago State IL Zip Code 60608

Purpose of Disbursement  
Member Organization & Fundraising Training

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 20 / 2014

**Transaction ID : D334840**

Amount of Each Disbursement this Period

38100.00

Full Name (Last, First, Middle Initial)

**C. SEIU Local 100 UCSW**

Mailing Address 1808 14th St

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  
Member Organization & Fundraising Training

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2014

**Transaction ID : D335022**

Amount of Each Disbursement this Period

35076.00

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

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

73254.83

**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)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. SEIU Local 6**

Mailing Address 3720 Airport Way South  
PO Box 3716

City Seattle State WA Zip Code 98134

Purpose of Disbursement  
Member Organization & Fundraising Training

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02    | / | 06    | / | 2014      |

**Transaction ID : D335026**

Amount of Each Disbursement this Period

|          |
|----------|
| 11026.88 |
|----------|

Full Name (Last, First, Middle Initial)

**B. The Strategy Group**

Mailing Address 1606 20th Street, NW  
Floor 3

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Election-Influencing Issue-Oriented Advertising Production

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02    | / | 06    | / | 2014      |

**Transaction ID : D334827**

Amount of Each Disbursement this Period

|          |
|----------|
| 19273.95 |
|----------|

Full Name (Last, First, Middle Initial)

**C. United Long Term Care Workers**

Mailing Address 2910 Beverly Blvd

City Los Angeles State CA Zip Code 90057

Purpose of Disbursement  
Member Organization & Fundraising Training

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02    | / | 12    | / | 2014      |

**Transaction ID : D335023**

Amount of Each Disbursement this Period

|         |
|---------|
| 6544.86 |
|---------|

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

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

|          |
|----------|
| 36845.69 |
|----------|

|           |
|-----------|
| 110173.71 |
|-----------|

**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)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. HOUSE MAJORITY PAC**

Mailing Address 700 13TH STREET NW SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 7 |   | 2 | 0 | 1 | 4 |

**Transaction ID : D334848**

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

**B. MARC VEASEY CONGRESSIONAL CAMPAIGN COMMITTEE**

Mailing Address PO BOX 50084

City FORT WORTH State TX Zip Code 76105

Purpose of Disbursement  
Contribution

Candidate Name

**MARC ALLISON VEASEY**

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: TX District: 33

Date of Disbursement

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

**Transaction ID : D334838**

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

**C. MINNESOTA DEMOCRATIC-FARMER-LABOR PARTY**

Mailing Address 255 Plato Blvd E

City St Paul State MN Zip Code 55107

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 7 |   | 2 | 0 | 1 | 4 |

**Transaction ID : D334847**

Amount of Each Disbursement this Period

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

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 7 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 7 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input 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)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. RECCHIA FOR CONGRESS**

Mailing Address 172 GRAVESEND NECK ROAD

City State Zip Code  
BROOKLYN NY 11223

Purpose of Disbursement  
Contribution

Candidate Name

**DOMENIC M RECCHIA JR**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NY District: 11

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02    |   | 20    |   | 2014      |

**Transaction ID : D335021**

Amount of Each Disbursement this Period

|          |
|----------|
| 5,000.00 |
|----------|

Full Name (Last, First, Middle Initial)

**B. SERRANO FOR CONGRESS**

Mailing Address P.O. BOX 70980

City State Zip Code  
Washington DC 20024

Purpose of Disbursement  
Contribution

Candidate Name

**Jose Serrano**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NY District: 15

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 02    |   | 20    |   | 2014      |

**Transaction ID : D334836**

Amount of Each Disbursement this Period

|          |
|----------|
| 5,000.00 |
|----------|

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
|       |   |       |   |           |

Amount of Each Disbursement this Period

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

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

|          |
|----------|
| 10000.00 |
|----------|

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

|          |
|----------|
| 67500.00 |
|----------|

**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)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. Dignity California SEIU ULTCW**

Mailing Address 2910 Beverly Blvd

City Los Angeles State CA Zip Code 90057

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 20 / 2014

**Transaction ID : D334841**

Amount of Each Disbursement this Period

535708.20

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Friends of Clay Jenkins**

Mailing Address PO Box 222285

City Dallas State TX Zip Code 75222

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 10 / 2014

**Transaction ID : D335025**

Amount of Each Disbursement this Period

10000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. John Whitmire Campaign**

Mailing Address PO Box 7271

City Houston State TX Zip Code 77248

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 20 / 2014

**Transaction ID : D334839**

Amount of Each Disbursement this Period

2500.00

Category/  
Type

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

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

548208.20



**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)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. Paul Elizondo Campaign**

Mailing Address 3451 Woodlawn Avenue

City San Antonio State TX Zip Code 78228

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 10 / 2014

**Transaction ID : D335024**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Pennsylvania SEIU COPE**

Mailing Address 1500 N Second Street 2nd Floor

City Harrisburg State PA Zip Code 17102

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 20 / 2014

**Transaction ID : D334837**

Amount of Each Disbursement this Period

181096.30

Full Name (Last, First, Middle Initial)

**C. Pennsylvania SEIU COPE**

Mailing Address 1500 N Second Street 2nd Floor

City Harrisburg State PA Zip Code 17102

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2014

**Transaction ID : D334831**

Amount of Each Disbursement this Period

50000.00

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

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

233596.30

**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)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. SEIU Local 888**

Mailing Address 529 Main Street

City Charlestown State MA Zip Code 02129

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 06 / 2014

**Transaction ID : D334826**

Amount of Each Disbursement this Period

3000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. SEIU Local 888**

Mailing Address 529 Main Street

City Charlestown State MA Zip Code 02129

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 06 / 2014

**Transaction ID : D335027**

Amount of Each Disbursement this Period

3000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. The Advocacy Fund**

Mailing Address PO Box 29907

City San Francisco State CA Zip Code 94129

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2014

**Transaction ID : D335028**

Amount of Each Disbursement this Period

25000.00

Category/  
Type

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

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

31000.00

**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)

**SEIU COPE (Service Employees International Union Committee On Political Education)**

Full Name (Last, First, Middle Initial)

**A. Veronica Escobar Campaign**

Mailing Address 3014 Copper Ave

City El Paso State TX Zip Code 79930

Purpose of Disbursement  
Non-Federal Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

**Transaction ID : D334828**

Amount of Each Disbursement this Period

10000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

Category/  
Type

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

Category/  
Type

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

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

10000.00

822804.50

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

|   |   |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 20 OF 25   |
|   | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

|  |  |
|--|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>1199 SEIU UHE</b> | Nature of Debt (Purpose):<br>Direct Mail Postage |
| Mailing Address 310 West 43rd Street   |  |
| City State Zip Code<br>New York NY 10036   |  |

|  |                                 |  |
|--|---------------------------------|--|
| Outstanding Balance Beginning This Period<br>4688.18 | <b>Transaction ID : D318325</b> |  |
| Amount Incurred This Period<br>0.00                  | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>4688.18 |

|   |  |
|---|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Adelstein Liston</b> | Nature of Debt (Purpose):<br>TV Advertising Production |
| Mailing Address 222 W. Ontario St.<br>Suite 600   |  |
| City State Zip Code<br>Chicago IL 60654   |  |

|  |                                 |  |
|--|---------------------------------|--|
| Outstanding Balance Beginning This Period<br>6750.00 | <b>Transaction ID : D299807</b> |  |
| Amount Incurred This Period<br>0.00                  | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>6750.00 |

|   |   |
|---|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Berlin Rosen</b> | Nature of Debt (Purpose):<br>Radio Advertising Production |
| Mailing Address 15 Maiden Lane #1600  |   |
| City State Zip Code<br>New York NY 10038  |   |

|  |                                 |  |
|--|---------------------------------|--|
| Outstanding Balance Beginning This Period<br>2800.00 | <b>Transaction ID : D309812</b> |  |
| Amount Incurred This Period<br>0.00                  | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>2800.00 |

|  |          |
|--|----------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶                                      | 14238.18 |
| 2) <b>TOTALS</b> This Period (last page this line number only)..... ▶                            |          |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶                       | 0.00     |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶ | 0.00     |

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

|   |   |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 21 OF 25   |
|   | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

|  |   |
|--|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Chambers Lopez Strategies</b> | Nature of Debt (Purpose):<br>Online Advertising Buy |
| Mailing Address PO Box 5539  |   |
| City State Zip Code<br>Arlington VA 22205  |   |

|   |                                 |   |
|---|---------------------------------|---|
| Outstanding Balance Beginning This Period<br>15400.00 | <b>Transaction ID : D287106</b> |   |
| Amount Incurred This Period<br>0.00                   | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>15400.00 |

|  |   |
|--|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Elevation, Ltd.</b> | Nature of Debt (Purpose):<br>Online Advertising Buy |
| Mailing Address 1027 33rd Street, NW Suite 260   |   |
| City State Zip Code<br>Washington DC 20007   |   |

|  |                                 |  |
|--|---------------------------------|--|
| Outstanding Balance Beginning This Period<br>100040.00 | <b>Transaction ID : D289787</b> |  |
| Amount Incurred This Period<br>0.00                    | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>100040.00 |

|   |   |
|---|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Google</b> | Nature of Debt (Purpose):<br>Online Advertising Buy |
| Mailing Address 1600 Ampitheatre Parkway  |   |
| City State Zip Code<br>Mountain View CA 94043                                     |   |

|   |                                 |   |
|---|---------------------------------|---|
| Outstanding Balance Beginning This Period<br>434.38 | <b>Transaction ID : D287115</b> |   |
| Amount Incurred This Period<br>0.00                 | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>434.38 |

|  |           |
|--|-----------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶                                      | 115874.38 |
| 2) <b>TOTALS</b> This Period (last page this line number only)..... ▶                            |           |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶                       | 0.00      |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶ | 0.00      |

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

|   |   |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 22 OF 25   |
|   | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

|   |                                       |
|---|---------------------------------------|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Image Pointe</b> | Nature of Debt (Purpose):<br>T-Shirts |
| Mailing Address P O Box 657   |                                       |
| City State Zip Code<br>Waterloo IA 50704  |                                       |

|  |  |  |
|--|--|--|
| Outstanding Balance Beginning This Period<br><input type="text" value="41949.50"/> | <b>Transaction ID : D304068</b>                          |  |
| Amount Incurred This Period<br><input type="text" value="0.00"/>                   | Payment This Period<br><input type="text" value="0.00"/> | Outstanding Balance at Close of This Period<br><input type="text" value="41949.50"/> |

|  |   |
|--|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Mack/Crouse Group LLC</b> | Nature of Debt (Purpose):<br>Voter Canvass Literature |
| Mailing Address 4900 Seminary Road Suite 1020  |   |
| City State Zip Code<br>Alexandria VA 22311   |   |

|   |  |   |
|---|--|---|
| Outstanding Balance Beginning This Period<br><input type="text" value="4533.86"/> | <b>Transaction ID : D299810</b>                          |   |
| Amount Incurred This Period<br><input type="text" value="0.00"/>                  | Payment This Period<br><input type="text" value="0.00"/> | Outstanding Balance at Close of This Period<br><input type="text" value="4533.86"/> |

|   |   |
|---|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Mass Uniting</b> | Nature of Debt (Purpose):<br>Canvassing Services from 3/26-4/30 & 5/13-6/25 |
| Mailing Address 150 Mt. Vernon St., 2nd Floor   |   |
| City State Zip Code<br>Boston MA 02125  |   |

|  |  |  |
|--|--|--|
| Outstanding Balance Beginning This Period<br><input type="text" value="33100.00"/> | <b>Transaction ID : D312556</b>                          |  |
| Amount Incurred This Period<br><input type="text" value="0.00"/>                   | Payment This Period<br><input type="text" value="0.00"/> | Outstanding Balance at Close of This Period<br><input type="text" value="33100.00"/> |

|  |                                       |
|--|---------------------------------------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶                                      | <input type="text" value="79583.36"/> |
| 2) <b>TOTALS</b> This Period (last page this line number only)..... ▶                            | <input type="text"/>                  |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶                       | <input type="text" value="0.00"/>     |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶ | <input type="text" value="0.00"/>     |

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

|   |   |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 23 OF 25   |
|   | FOR LINE NUMBER: (check only one)<br><input type="checkbox"/> 9<br><input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

|  |   |
|--|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Mission Control Inc</b> | Nature of Debt (Purpose):<br>Voter Canvass Literature |
| Mailing Address 114A Mansfield Hollow Road   |   |
| City State Zip Code<br>Mansfield Center CT 06250   |   |

|  |                                 |  |
|--|---------------------------------|--|
| Outstanding Balance Beginning This Period<br>1776.40 | <b>Transaction ID : D297651</b> |  |
| Amount Incurred This Period<br>0.00                  | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>1776.40 |

|  |  |
|--|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Murphy Vogel Askew Reilly LLC</b> | Nature of Debt (Purpose):<br>TV & Radio Advertising Production |
| Mailing Address 901 North Washington Street Suite 400  |  |
| City State Zip Code<br>Alexandria VA 22314-1535  |  |

|  |                                 |  |
|--|---------------------------------|--|
| Outstanding Balance Beginning This Period<br>1593.75 | <b>Transaction ID : D299791</b> |  |
| Amount Incurred This Period<br>0.00                  | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>1593.75 |

|  |   |
|--|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>NGP VAN, Inc.</b> | Nature of Debt (Purpose):<br>Voter Outreach Telephone Calls |
| Mailing Address 48 Grove Street, Suite 202   |   |
| City State Zip Code<br>Somerville MA 02144   |   |

|  |                                 |  |
|--|---------------------------------|--|
| Outstanding Balance Beginning This Period<br>1500.00 | <b>Transaction ID : D304071</b> |  |
| Amount Incurred This Period<br>0.00                  | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>1500.00 |

|  |         |
|--|---------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶                                      | 4870.15 |
| 2) <b>TOTALS</b> This Period (last page this line number only)..... ▶                            |         |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶                       | 0.00    |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶ | 0.00    |

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

|   |   |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 24 OF 25   |
|   | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

|  |   |
|--|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>SEIU General Fund</b> | Nature of Debt (Purpose):<br>Est. Payment for Salary & Benefits/Canvassing Services/Posters |
| Mailing Address 1800 Massachusetts Ave NW  |   |
| City State Zip Code<br>Washington DC 20036   |   |

|   |                                 |   |
|---|---------------------------------|---|
| Outstanding Balance Beginning This Period<br>14849.75 | <b>Transaction ID : D274285</b> |   |
| Amount Incurred This Period<br>0.00                   | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>14849.75 |

|  |   |
|--|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>SEIU Local 1989 - Maine State Emp Assoc</b> | Nature of Debt (Purpose):<br>Voter Outreach Calls |
| Mailing Address 65 State Street<br>P O Box 1072  |   |
| City State Zip Code<br>Augusta ME 04332  |   |

|  |                                 |  |
|--|---------------------------------|--|
| Outstanding Balance Beginning This Period<br>5000.00 | <b>Transaction ID : D313877</b> |  |
| Amount Incurred This Period<br>0.00                  | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>5000.00 |

|  |   |
|--|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>SEIU MA State Council</b> | Nature of Debt (Purpose):<br>Direct Mail Printing |
| Mailing Address 145 Tremont Street<br>Suite 202  |   |
| City State Zip Code<br>Boston MA 02111   |   |

|  |                                 |  |
|--|---------------------------------|--|
| Outstanding Balance Beginning This Period<br>2975.33 | <b>Transaction ID : D318326</b> |  |
| Amount Incurred This Period<br>0.00                  | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>2975.33 |

|  |          |
|--|----------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶                                      | 22825.08 |
| 2) <b>TOTALS</b> This Period (last page this line number only)..... ▶                            |          |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶                       | 0.00     |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶ | 0.00     |



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

|   |  |
|---|--|
| (Use separate schedule(s) for each numbered line) | PAGE 25 OF 25                          |
|   | FOR LINE NUMBER: (check only one)      |
| <input type="checkbox"/> 9                        | <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)  
**SEIU COPE (Service Employees International Union Committee On Political Education)**

|  |   |
|--|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Spotset Radio Network</b> | Nature of Debt (Purpose):<br>Radio Advertising Production |
| Mailing Address 44 N. Second Street<br>Suite 800   |   |
| City State Zip Code<br>Memphis TN 38103  |   |

|  |                                 |  |
|--|---------------------------------|--|
| Outstanding Balance Beginning This Period<br>2100.00 | <b>Transaction ID : D304146</b> |  |
| Amount Incurred This Period<br>0.00                  | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>2100.00 |

|  |   |
|--|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Waterfront Strategies</b> | Nature of Debt (Purpose):<br>TV & Radio Advertising Production/Buys |
| Mailing Address 1010 Wisconsin Avenue, NW<br>Suite 800   |   |
| City State Zip Code<br>Washington DC 20007   |   |

|   |                                 |   |
|---|---------------------------------|---|
| Outstanding Balance Beginning This Period<br>15037.22 | <b>Transaction ID : D297653</b> |   |
| Amount Incurred This Period<br>0.00                   | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>15037.22 |

|   |  |
|---|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor<br><b>Wisconsin Jobs Now</b> | Nature of Debt (Purpose):<br>Radio Advertising Buy |
| Mailing Address PO BOX 511506   |  |
| City State Zip Code<br>Milwaukee WI 53203   |  |

|  |                                 |  |
|--|---------------------------------|--|
| Outstanding Balance Beginning This Period<br>9075.00 | <b>Transaction ID : D304072</b> |  |
| Amount Incurred This Period<br>0.00                  | Payment This Period<br>0.00     | Outstanding Balance at Close of This Period<br>9075.00 |

|  |           |
|--|-----------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶                                      | 26212.22  |
| 2) <b>TOTALS</b> This Period (last page this line number only)..... ▶                            | 263603.37 |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶                       | 0.00      |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶ | 263603.37 |