

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 501 3rd St NW Washington DC 20001 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00002089 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

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

5. Covering Period 01 01 2002 through 01 31 2002

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 Barbara Easterling

Signature of Treasurer Electronically Filed by Barbara Easterling Date 03 13 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
CWA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	2

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	2

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>2</td></tr></table>	Y	Y	Y	Y	2	0	0	2		1023841.51
Y	Y	Y	Y							
2	0	0	2							
(b) Cash on Hand at Beginning of Reporting Period	1023841.51									
(c) Total Receipts (from Line 19)	235496.91	235496.91								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1259338.42	1259338.42								
7. Total Disbursements (from Line 31)	41091.50	41091.50								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1218246.92	1218246.92								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

CWA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	2

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	2

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	2780.00	2780.00
(i) Itemized (use Schedule A)	231446.77	231446.77
(ii) Unitemized	234226.77	234226.77
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	234226.77	234226.77
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1270.14	1270.14
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	235496.91	235496.91
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	235496.91	235496.91

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1091.50	1091.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1091.50	1091.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	30000.00	30000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	10000.00	10000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	41091.50	41091.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	41091.50	41091.50

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	234226.77	234226.77
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	234226.77	234226.77
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1091.50	1091.50
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1091.50	1091.50

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 15
	<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)
CWA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

Full Name (Last, First, Middle Initial) A. P. F. BAKER		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 6 / 2 0 0 2	
Mailing Address 502 CAPRICE DR		Transaction ID: C499205	
City MIDDLEBURY	State IN	Amount of Each Receipt this Period 240.00	
Zip Code 46540-9020			
FEC ID number of contributing federal political committee. C			
Name of Employer VERIZON NORTH (NORTH CENTRAL)	Occupation INSTALLER/REPAIR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	* Payroll Deduction:	

Full Name (Last, First, Middle Initial) B. MICHAEL CROWELL		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 2	
Mailing Address 7602 WATERBURY PL		Transaction ID: C488382	
City RANCHO CUCAMONGA	State CA	Amount of Each Receipt this Period 360.00	
Zip Code 91730-8257			
FEC ID number of contributing federal political committee. C			
Name of Employer VERIZON-GTE OF CALIFORNIA	Occupation LOCAL OFFICER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	* Payroll Deduction:	

Full Name (Last, First, Middle Initial) C. A.M. MCNEARY		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 2 / 2 0 0 2	
Mailing Address 529 E MAIN ST		Transaction ID: C520341	
City SUN PRAIRIE	State WI	Amount of Each Receipt this Period 600.00	
Zip Code 53590-2948			
FEC ID number of contributing federal political committee. C			
Name of Employer VERIZON NORTH (NORTH CENTRAL)	Occupation AFL-CIO COMM LIAISON		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	* Payroll Deduction:	

SUBTOTAL of Receipts This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 15
	<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)
CWA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A. Full Name (Last, First, Middle Initial)
EDWIN D PHILLIPS

Mailing Address 347 HICKORY LN

City PAINESVILLE State OH Zip Code 44077-2738

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

Name of Employer OHIO BELL TEL CO Occupation TELEPHONE INSTALLER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

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

Transaction ID: C520170

Amount of Each Receipt this Period
 210.00

* Payroll Deduction:

B. Full Name (Last, First, Middle Initial)
T. W. BREIDENBACH

Mailing Address 5170 HARTLODGE

City ST LOUIS State MO Zip Code 63129

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

Name of Employer LUCENT - 6390 Occupation Installer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

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

Transaction ID: C513513

Amount of Each Receipt this Period
 360.00

C. Full Name (Last, First, Middle Initial)
DAVID A. GRIFFITH

Mailing Address 2388 PIERWOOD DR

City OAKVILLE State MO Zip Code 63129-4832

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

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

Transaction ID: C520824

Amount of Each Receipt this Period
 265.00

SUBTOTAL of Receipts This Page (optional)	▶	835.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 15
	<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)
CWA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A. Full Name (Last, First, Middle Initial)
GARY ALAN JOSEPHSON

Mailing Address PO BOX 10189

City State Zip Code
COLUMBUS OH 43201-0689

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

Name of Employer Information Requested
POST DISPATCH

Occupation Information Requested
MAILER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

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

Transaction ID: C520132

Amount of Each Receipt this Period
240.00

B. Full Name (Last, First, Middle Initial)
FRANCIS R. LINCK

Mailing Address 1269 BRENTHAVEN

City State Zip Code
FLORISSANT MO 63031-2411

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

Name of Employer Information Requested
POST DISPATCH

Occupation Information Requested
MAILER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

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

Transaction ID: C513753

Amount of Each Receipt this Period
265.00

C. Full Name (Last, First, Middle Initial)
CATHERINE MARTIN

Mailing Address 4494 COUNTRY WAY WEST

City State Zip Code
SAGINAW MI 48603-0000

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

Name of Employer Information Requested
AMERITECH SERV INC

Occupation Information Requested
MACHINE OPERATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

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

Transaction ID: C501482

Amount of Each Receipt this Period
240.00

SUBTOTAL of Receipts This Page (optional)	745.00
TOTAL This Period (last page this line number only)	2780.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 9 / 15	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" 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) CWA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

Full Name (Last, First, Middle Initial) A. SunTrust Bank	
Mailing Address P.O. Box 85024	
City Richmond	State VA
Zip Code 23285-5024	
FEC ID number of contributing federal political committee. C	
Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1270.14

Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 2
Transaction ID: C521476
Amount of Each Receipt this Period 1270.14

SUBTOTAL of Receipts This Page (optional)	▶	1270.14
TOTAL This Period (last page this line number only)	▶	1270.14

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 / 15

<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

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)
CWA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

Full Name (Last, First, Middle Initial)
A. Emily DiFranco

Mailing Address 6266 Walkers Croft Way

City Alexandria State VA Zip Code 22315

Purpose of Disbursement
Temporary Employee Salary

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D406
Date of Disbursement

01 / 31 / 2002

Amount of Each Disbursement this Period

1080.00

SUBTOTAL of Disbursements This Page (optional)

1080.00

TOTAL This Period (last page this line number only)

1080.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 11 / 15

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

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

NAME OF COMMITTEE (In Full)
CWA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

Full Name (Last, First, Middle Initial) A. CITIZENS FOR TONY HALL		Transaction ID: D401 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 2
Mailing Address 1812 KETTERING TOWER		Amount of Each Disbursement this Period 1000.00
City DAYTON State OH Zip Code 45423	011 Category/ Type	
Purpose of Disbursement Federal Candidate Contribution		
Candidate Name TONY P HALL		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 3	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. COMMITTEE TO ELECT GARY L ACKERMAN		Transaction ID: D396 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 2
Mailing Address 100 Jericho Quadrangle Suite 233		Amount of Each Disbursement this Period 2000.00
City Jericho State NY Zip Code 11753	011 Category/ Type	
Purpose of Disbursement Federal Candidate Contribution		
Candidate Name GARY L ACKERMAN		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 05	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. DNC SERVICES CORPORATION/DEMOCRATIC NATIONAL COMMI		Transaction ID: D399 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 0 2
Mailing Address 430 S. CAPITOL STREET S.E.		Amount of Each Disbursement this Period 1500.00
City WASHINGTON State DC Zip Code 20003	011 Category/ Type	
Purpose of Disbursement Federal Committee Contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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)
CWA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

Full Name (Last, First, Middle Initial) A. DOUG DODD FOR CONGRESS COMMITTEE		Transaction ID: D392 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 2
Mailing Address 1646 SOUTH BOULDER AVENUE		Amount of Each Disbursement this Period 5000.00
City Tulsa State OK Zip Code 74119	Purpose of Disbursement Federal Candidate Contribution 011 Category/Type	
Candidate Name STEPHEN DOUGLAS DODD		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2002 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ OSpecial Election State: OK District: 01		

Full Name (Last, First, Middle Initial) B. EMILY'S LIST FEDERAL ACCOUNT		Transaction ID: D395 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 2
Mailing Address 805 15TH ST NW SUITE 400		Amount of Each Disbursement this Period 5000.00
City WASHINGTON State DC Zip Code 20005	Purpose of Disbursement Federal Committee Contribution 011 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. FRIENDS OF MAX BAUCUS 2002		Transaction ID: D397 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 1 / 2 0 0 2
Mailing Address PO BOX 586		Amount of Each Disbursement this Period 1000.00
City HELENA State MT Zip Code 59624	Purpose of Disbursement Federal Candidate Contribution 011 Category/Type	
Candidate Name MAX S. BAUCUS		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MT District: 00		

SUBTOTAL of Disbursements This Page (optional) ▶	11000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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)
CWA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

Full Name (Last, First, Middle Initial) A. FRIENDS OF MAX CLELAND FOR THE US SENATE INC		Transaction ID: D393 Date of Disbursement
Mailing Address 3146 NORTHEAST EXPRESSWAY P O BOX 7843		<input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="2"/> <input type="text" value="2"/>
City ATLANTA	State GA	Zip Code 30341
Purpose of Disbursement Federal Candidate Contribution		<input type="text" value="011"/> Category/ Type
Candidate Name JOSEPH MAXWELL CLELAND		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: GA	District: 00	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) B. Marion Berry for Congress		Transaction ID: D549 Date of Disbursement
Mailing Address P.O. BOX 8084		<input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="2"/> <input type="text" value="2"/>
City Jonesboro	State AR	Zip Code 72403
Purpose of Disbursement Federal Candidate Contribution		<input type="text" value="011"/> Category/ Type
Candidate Name Marion Berry		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AR	District: 1	

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial) C. NANCY PELOSI FOR CONGRESS		Transaction ID: D400 Date of Disbursement
Mailing Address 235 MONTGOMERY STREET SUITE 610		<input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="2"/> <input type="text" value="2"/>
City SAN FRANCISCO	State CA	Zip Code 94104
Purpose of Disbursement Federal Candidate Contribution		<input type="text" value="011"/> Category/ Type
Candidate Name NANCY PELOSI		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 08	

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="12500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
CWA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A. Full Name (Last, First, Middle Initial)
RUSH HOLT FOR CONGRESS INC

Mailing Address PO BOX 782

City PENNINGTON State NJ Zip Code 8534

Purpose of Disbursement
Federal Candidate Contribution

Candidate Name
RUSH HOLT

Office Sought: House
 Senate
 President
State: NJ District: 12

Disbursement For: 2002
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: D394
Date of Disbursement

01 / 11 / 2002

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
RUSH HOLT FOR CONGRESS INC

Mailing Address PO BOX 782

City PENNINGTON State NJ Zip Code 8534

Purpose of Disbursement
Federal Candidate Contribution

Candidate Name
RUSH HOLT

Office Sought: House
 Senate
 President
State: NJ District: 12

Disbursement For: 2002
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: D404
Date of Disbursement

01 / 24 / 2002

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

30000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 15

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

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

NAME OF COMMITTEE (In Full)
CWA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

Full Name (Last, First, Middle Initial)
A. CWA District 1 PAC

Mailing Address 80 PINE STREET

City NEW YORK State NY Zip Code 10005

Purpose of Disbursement
Non-Federal Committee Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President
State: NY District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: D398
Date of Disbursement

01 / 11 / 2002

Amount of Each Disbursement this Period

10000.00

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

10000.00