

**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

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

ADDRESS (number and street)

501 3rd St NW

Check if different
than previously
reported. (ACC)

Washington

DC

20001

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00002089

3. IS THIS
REPORTNEW
(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
Quarterly Report(YE)July 31 Mid-Year
Report(Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

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

01

01

2010

through

01

31

2010

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

Jeffrey Rechenbach

Signature of Treasurer

Electronically Filed by Jeffrey Rechenbach

Date

02

18

2010

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

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 24

Write or Type Committee Name

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	3650708.78
(b) Cash on Hand at Beginning of Reporting Period	3650708.78	
(c) Total Receipts (from Line 19)	304863.47	304863.47
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	3955572.25	3955572.25
7. Total Disbursements (from Line 31)	128739.13	128739.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3826833.12	3826833.12
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**

FEC Form 3X (Rev. 06/2004)

3 / 24

Write or Type Committee Name

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	1018.66	1018.66
(ii) Unitemized	303531.18	303531.18
(iii) TOTAL (add Lines 11(a)(i) and (ii)	304549.84	304549.84
(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)	304549.84	304549.84
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.)	313.63	313.63
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))	304863.47	304863.47
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	304863.47	304863.47

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

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.....	21045.65	21045.65	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	21045.65	21045.65	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	49500.00	49500.00	
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.....	58193.48	58193.48	
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))..	128739.13	128739.13	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	128739.13	128739.13	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 24

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)	304549.84	304549.84
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	304549.84	304549.84
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	21045.65	21045.65
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	21045.65	21045.65

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 / 24

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ROSA BERNAL

Mailing Address 5306 SPRINGHILL DR

City

ANAHEIM HILLS

State

CA

Zip Code

92807-3716

FEC ID number of contributing
federal political committee.

C

Name of Employer

VERIZON-GTE OF CALIFORNIA

Occupation

SECY-TREAS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.66

Date of Receipt

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

Transaction ID: C15348692

Amount of Each Receipt this Period

302.66

B.

Full Name (Last, First, Middle Initial)

TABITHA CASSETTA

Mailing Address PO BOX 1155

City

MILLBROOK

State

NY

Zip Code

12545-1155

FEC ID number of contributing
federal political committee.

C

Name of Employer

VERIZON-BELL ATLANTIC NOR-
TH

Occupation

REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 9 / 2 0 1 0

Transaction ID: C15283374

Amount of Each Receipt this Period

240.00

* Payroll Deduction: \$60
Weekly

C.

Full Name (Last, First, Middle Initial)

BRETT RICHTER

Mailing Address 509 BRASS CASTLE RD

City

OXFORD

State

NJ

Zip Code

07863-3148

FEC ID number of contributing
federal political committee.

C

Name of Employer

NJ STATE EMPLOYEES ADMN
CLERICAL

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

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

Transaction ID: C15266009

Amount of Each Receipt this Period

259.00

SUBTOTAL of Receipts This Page (optional)

801.66

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DIRK STREIBEL

Mailing Address 320 FRANKLIN ST

City

LOCKPORT

State

IL

Zip Code

60441-2606

FEC ID number of contributing
federal political committee.

C

Name of Employer
DERLAN PRECISION GEA

Occupation

Manufacturing

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	1	0

Transaction ID: C15352379

Amount of Each Receipt this Period

217.00

* Payroll Deduction: \$62
Monthly

SUBTOTAL of Receipts This Page (optional)

217.00

TOTAL This Period (last page this line number only)

1018.66

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 24

(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"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A.

Full Name (Last, First, Middle Initial)

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:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

313.63

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	1	0

Transaction ID: C15359609

Amount of Each Receipt this Period

313.63

SUBTOTAL of Receipts This Page (optional)

313.63

TOTAL This Period (last page this line number only)

313.63

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 9 / 24

<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Business Forms Inc.

Mailing Address 2325 Dulles Corner Blvd., Suite 50
PO BOX 710929

City Herndon State VA Zip Code 20171

Purpose of Disbursement

Check Purchase

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10110

Date of Disbursement

01 / 08 / 2010

Amount of Each Disbursement this Period

869.93

B.

Full Name (Last, First, Middle Initial)

Communications Workers of America

Mailing Address 501 Third Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement

Salary Reimbursement

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10068

Date of Disbursement

01 / 08 / 2010

Amount of Each Disbursement this Period

12675.57

C.

Full Name (Last, First, Middle Initial)

Laurence E Gold

Mailing Address 1666 Connecticut Avenue, NW
5th Floor

City Washington State DC Zip Code 20009

Purpose of Disbursement

Legal Retainer Fee

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10081

Date of Disbursement

01 / 08 / 2010

Amount of Each Disbursement this Period

1461.45

SUBTOTAL of Disbursements This Page (optional)

15006.95

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 / 24

<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A. Full Name (Last, First, Middle Initial) NGP Software, Inc.	Transaction ID: D10089 Date of Disbursement																				
Mailing Address 1225 Eye Street, NW, Suite 1225	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	8		2	0	1	0												
City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period																				
Purpose of Disbursement FEC Reporting Software	<table border="1"> <tr> <td colspan="10">2250.00</td> </tr> </table>	2250.00																			
2250.00																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
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) ▼																				
B. Full Name (Last, First, Middle Initial) Public Affairs Support Services	Transaction ID: D10080 Date of Disbursement																				
Mailing Address 1020 North Fairfax Street Fifth Floor	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	8		2	0	1	0												
City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period																				
Purpose of Disbursement CWA-COPE Compliance Review	<table border="1"> <tr> <td colspan="10">2860.31</td> </tr> </table>	2860.31																			
2860.31																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
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) ▼																				
C. Full Name (Last, First, Middle Initial) SunTrust Bank	Transaction ID: D10108 Date of Disbursement																				
Mailing Address P.O. Box 85024	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	1		2	0	1	0												
City Richmond State VA Zip Code 23285-5024	Amount of Each Disbursement this Period																				
Purpose of Disbursement Merchant Fees	<table border="1"> <tr> <td colspan="10">35.24</td> </tr> </table>	35.24																			
35.24																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
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)

5145.55

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 / 24

<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A.

Full Name (Last, First, Middle Initial)

SunTrust Bank

Mailing Address P.O. Box 85024

City
Richmond

State
VA

Zip Code
23285-5024

Purpose of Disbursement
Account Analysis Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10109

Date of Disbursement

01 / 22 / 2010

Amount of Each Disbursement this Period

858.15

SUBTOTAL of Disbursements This Page (optional)

858.15

TOTAL This Period (last page this line number only)

21010.65

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 / 24

<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ARCURI FOR CONGRESS

Mailing Address P.O. Box 8508

City
UticaState
NYZip Code
13505Purpose of Disbursement
Federal Candidate Contribution 2010Candidate Name
Michael A Arcuri011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 24

Transaction ID: D10093

Date of Disbursement

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

Amount of Each Disbursement this Period

3000.00

B.

Full Name (Last, First, Middle Initial)

BOSWELL FOR CONGRESS

Mailing Address PO BOX 6220

City
Des MoinesState
IAZip Code
50309Purpose of Disbursement
Federal Candidate Contribution 2010Candidate Name
LEONARD L BOSWELL011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IA District: 03

Transaction ID: D10096

Date of Disbursement

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

Amount of Each Disbursement this Period

3000.00

C.

Full Name (Last, First, Middle Initial)

BRALEY FOR CONGRESS

Mailing Address 300 Walnut Suite 5

City
Des MoinesState
IAZip Code
50309Purpose of Disbursement
Federal Candidate Contribution 2010Candidate Name
Bruce L Braley011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IA District: 01

Transaction ID: D10099

Date of Disbursement

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

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ►

8000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A. Full Name (Last, First, Middle Initial) CAMPAIGN FOR CHANGE	Transaction ID: D10090 Date of Disbursement
Mailing Address 202 Bonham Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 5 / 2 0 1 0</div> </div>
City Dedham State MA Zip Code 02026	Amount of Each Disbursement this Period
Purpose of Disbursement Federal Committee Contribution 2010	<div>2500.00</div>
Candidate Name CAMPAIGN FOR CHANGE	<div>011</div> Category/ Type
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) ▼
B. Full Name (Last, First, Middle Initial) COSTELLO FOR CONGRESS COMMITTEE	Transaction ID: D10097 Date of Disbursement
Mailing Address PO BOX 8250	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 5 / 2 0 1 0</div> </div>
City BELLEVILLE State IL Zip Code 62222	Amount of Each Disbursement this Period
Purpose of Disbursement Federal Candidate Contribution 2010	<div>2500.00</div>
Candidate Name JERRY F COSTELLO	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 12	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Transaction ID: D10094 Date of Disbursement
Mailing Address 430 South Capitol Street SE 2nd Floor	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 7 / 2 0 1 0</div> </div>
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
Purpose of Disbursement Federal Committee Contribution	<div>15000.00</div>
Candidate Name DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	<div>011</div> Category/ Type
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)	<div>20000.00</div>
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DEMOCRATIC STATE CENTRAL COMMITTEE OF MARYLAND

Mailing Address 188 MAIN ST SUITE 1

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement
Federal Committee Contribution

Candidate Name
DEMOCRATIC STATE CENTRAL COMMITTEE OF MARYLAND

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10091

Date of Disbursement

01 / 25 / 2010

Amount of Each Disbursement this Period

4000.00

B.

Full Name (Last, First, Middle Initial)

Franken Recount Team

Mailing Address 255 East Plato Avenue

City Saint Paul State MN Zip Code 55124

Purpose of Disbursement
Federal Candidate Contribution 2008

Candidate Name
Franken Recount Team

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☐ Primary ☐ General
☒ Other (specify) ▼

Runoff

Transaction ID: D10070

Date of Disbursement

01 / 08 / 2010

Amount of Each Disbursement this Period

3000.00

C.

Full Name (Last, First, Middle Initial)

LOEBSACK FOR CONGRESS

Mailing Address PO Box 1457

City Iowa City State IA Zip Code 52244

Purpose of Disbursement
Federal Candidate Contribution 2010

Candidate Name
David Wayne Loebsack

Office Sought: ☒ House
☐ Senate
☐ President

State: IA District: 02

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10095

Date of Disbursement

01 / 27 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 24

<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MALONEY FOR CONGRESS

Mailing Address 49 EAST 92ND STREET

City NEW YORK State NY Zip Code 10128

Purpose of Disbursement
Federal Candidate Contribution 2010

Candidate Name
CAROLYN B MALONEY

Office Sought: ☒ House
☐ Senate
☐ President

State: NY District: 14

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10084

Date of Disbursement

01 / 12 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

MARTHA COAKLEY FOR SENATE COMMITTEE

Mailing Address PO BOX 220 STATE HOUSE STATION

City Boston State MA Zip Code 02133

Purpose of Disbursement
Federal Candidate Contribution 2010

Candidate Name
MARTHA COAKLEY

Office Sought: ☐ House
☒ Senate
☐ President

State: MA District:

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

Special

Transaction ID: D10071

Date of Disbursement

01 / 12 / 2010

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

MASSACHUSETTS DEMOCRATIC STATE COMMITTEE-FED FUND

Mailing Address 56 ROLAND ST - NORTH LOBBY #203

City Charlestown State MA Zip Code 02129

Purpose of Disbursement
Federal Committee Contribution 2010

Candidate Name
MASSACHUSETTS DEMOCRATIC STATE COMMITTEE-FED FUND

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10082

Date of Disbursement

01 / 11 / 2010

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A.

Full Name (Last, First, Middle Initial)

YARMUTH FOR CONGRESS

Mailing Address 1815 Brownsboro Road, Ste. 100

City
Louisville

State
KY

Zip Code
40206

Purpose of Disbursement
Federal Candidate Contribution 2010

Candidate Name
John A Yarmuth

Office Sought: ☒ House
☐ Senate
☐ President

State: KY

District: 03

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10085

Date of Disbursement

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

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

49500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A.

Full Name (Last, First, Middle Initial)

BROWN FOR GOVERNOR 2010 EXPLORATORY COMMITTEE

Mailing Address 291 3RD STREET

City
OaklandState
CAZip Code
94607Purpose of Disbursement
Non-Federal Candidate Contrib 2010Candidate Name
BROWN FOR GOVERNOR 2010 EXPLORATORY COMMITTEEOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10072

Date of Disbursement

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

Amount of Each Disbursement this Period

10000.00

B.

Full Name (Last, First, Middle Initial)

CBC INSTITUTE

Mailing Address 455 MASSACHUSETTS AVENUE
SUITE 355City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
Non-Federal Committee Contrib 2010

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10087

Date of Disbursement

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

Amount of Each Disbursement this Period

10000.00

C.

Full Name (Last, First, Middle Initial)

COMMITTEE TO ELECT MARC GERGELY

Mailing Address 1985 LINCOLN WAY, STE. 23-314

City
McKeesportState
PAZip Code
15131Purpose of Disbursement
Non-Federal Candidate Contrib 2010Candidate Name
Marc GergelyOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District:

Transaction ID: D10086

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	5	/	2	0	1	0

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

20250.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A. Full Name (Last, First, Middle Initial) Communications Workers of America	Transaction ID: D10103 Date of Disbursement																				
Mailing Address 501 Third Street, NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	7		2	0	1	0												
City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Transfer of Mistaken Dues Deposit Candidate Name	<table border="1"> <tr> <td colspan="10">210.42</td> </tr> </table>	210.42																			
210.42																					
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) ▼																				
	Orig Unitem Depo 12/09																				
B. Full Name (Last, First, Middle Initial) Communications Workers of America	Transaction ID: D10104 Date of Disbursement																				
Mailing Address 501 Third Street, NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	7		2	0	1	0												
City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Transfer of Mistaken Dues Deposit Candidate Name	<table border="1"> <tr> <td colspan="10">355.15</td> </tr> </table>	355.15																			
355.15																					
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) ▼																				
	Orig Unitem Depo 12/09																				
C. Full Name (Last, First, Middle Initial) Communications Workers of America	Transaction ID: D10105 Date of Disbursement																				
Mailing Address 501 Third Street, NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	7		2	0	1	0												
City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Transfer of Mistaken Dues Deposit Candidate Name	<table border="1"> <tr> <td colspan="10">525.95</td> </tr> </table>	525.95																			
525.95																					
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) ▼																				
	Orig Unitem Depo 12/09																				

SUBTOTAL of Disbursements This Page (optional)

1091.52

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A. Full Name (Last, First, Middle Initial) Communications Workers of America	Transaction ID: D10106 Date of Disbursement																				
Mailing Address 501 Third Street, NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	7		2	0	1	0												
City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Transfer of Mistaken Dues Deposit Candidate Name	<table border="1"> <tr> <td colspan="10">2496.88</td> </tr> </table>	2496.88																			
2496.88																					
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) ▼																				
001 Category/Type	Orig Unitem Depo 12/09																				
B. Full Name (Last, First, Middle Initial) Communications Workers of America	Transaction ID: D10107 Date of Disbursement																				
Mailing Address 501 Third Street, NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	7		2	0	1	0												
City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Transfer of Mistaken Dues Deposit Candidate Name	<table border="1"> <tr> <td colspan="10">2666.50</td> </tr> </table>	2666.50																			
2666.50																					
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) ▼																				
001 Category/Type	Orig Unitem Depo 12/09																				
C. Full Name (Last, First, Middle Initial) CWA COPE - VA	Transaction ID: D10074 Date of Disbursement																				
Mailing Address 501 Third Street, NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	8		2	0	1	0												
City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Non-Federal Committee Contrib 2010 Candidate Name CWA COPE - VA	<table border="1"> <tr> <td colspan="10">6588.58</td> </tr> </table>	6588.58																			
6588.58																					
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) ▼																				
011 Category/Type																					

SUBTOTAL of Disbursements This Page (optional)

11751.96

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A. Full Name (Last, First, Middle Initial) CWA COPE - VA	Transaction ID: D10075 Date of Disbursement																				
Mailing Address 501 Third Street, NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	5		2	0	1	0												
City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Non-Federal Committee Contrib 2010	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name CWA COPE - VA	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
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) ▼																				
B. Full Name (Last, First, Middle Initial) CWA District 2 PEC - WV	Transaction ID: D10069 Date of Disbursement																				
Mailing Address 962 Wayne Ave., Suite 500	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	8		2	0	1	0												
City Silver Spring State MD Zip Code 20910	Amount of Each Disbursement this Period																				
Purpose of Disbursement Non-Federal Committee Contrib 2010	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name CWA District 2 PEC - WV	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) CWA District 6 PEC	Transaction ID: D10078 Date of Disbursement																				
Mailing Address The Terrace, Building One 2600 Via Fortuna, Ste. 260	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	8		2	0	1	0												
City Austin State TX Zip Code 78746	Amount of Each Disbursement this Period																				
Purpose of Disbursement Non-Federal Committee Contrib 2010	<table border="1"> <tr> <td colspan="10">5750.00</td> </tr> </table>	5750.00																			
5750.00																					
Candidate Name CWA District 6 PEC	<table border="1"> <tr> <td>011</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	011	Category/ Type																		
011																					
Category/ Type																					
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)

7250.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 / 24

<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A.Full Name (Last, First, Middle Initial)
CWA Ohio Legislative Committee

Mailing Address 20525 Center Ridge Road, #700

City Cleveland State OH Zip Code 44116

Purpose of Disbursement
Non-Federal Committee Contrib 2010Candidate Name
CWA Ohio Legislative CommitteeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10076

Date of Disbursement

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

Amount of Each Disbursement this Period

350.00

B.Full Name (Last, First, Middle Initial)
Halter for Arkansas

Mailing Address PO Box 94399

City North Little Rock State AR Zip Code 72109

Purpose of Disbursement
Non-Federal Candidate Contrib 2006Candidate Name
Bill HalterOffice Sought: ☐ House
☐ Senate
☐ President

State: AR District:

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

2006 Primary Debt Re

Transaction ID: D10077

Date of Disbursement

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

Amount of Each Disbursement this Period

2000.00

2006 Primary Debt Reducti

C.Full Name (Last, First, Middle Initial)
Halter for Arkansas

Mailing Address PO Box 94399

City North Little Rock State AR Zip Code 72109

Purpose of Disbursement
Non-Federal Candidate ContribCandidate Name
Bill HalterOffice Sought: ☐ House
☐ Senate
☐ President

State: AR District:

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

2006 General Debt Re

Transaction ID: D10111

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

2006 General Debt Reducti

SUBTOTAL of Disbursements This Page (optional)

3350.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Halter for Arkansas

Mailing Address PO Box 94399

City
North Little Rock

State
AR

Zip Code
72109

Purpose of Disbursement
Non-Federal Candidate Contrib

Candidate Name
Bill Halter

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2006
☐ Primary ☐ General
☒ Other (specify) ▼

State: AR District:

2006 Run-Off Debt Re

Transaction ID: D10112

Date of Disbursement

01 / 08 / 2010

Amount of Each Disbursement this Period

2000.00

2006 Run-Off Debt Reducti

B.

Full Name (Last, First, Middle Initial)

Halter for Arkansas

Mailing Address PO Box 94399

City
North Little Rock

State
AR

Zip Code
72109

Purpose of Disbursement
Non-Federal Candidate Contribution

Candidate Name
Bill Halter

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District:

Transaction ID: D10113

Date of Disbursement

01 / 08 / 2010

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

Halter for Arkansas

Mailing Address PO Box 94399

City
North Little Rock

State
AR

Zip Code
72109

Purpose of Disbursement
Non-Federal Candidate Contribution

Candidate Name
Bill Halter

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: AR District:

Transaction ID: D10114

Date of Disbursement

01 / 08 / 2010

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A. Full Name (Last, First, Middle Initial) MICHAEL ALLEN FOR ASSEMBLY 2010	Transaction ID: D10073 Date of Disbursement
Mailing Address PO BO 4870	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 8 / 2 0 1 0</div> </div>
City Santa Rosa State CA Zip Code 95402	Amount of Each Disbursement this Period
Purpose of Disbursement Non-Federal Candidate Contrib 2010	<div>1000.00</div>
Candidate Name MICHAEL ALLEN	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) The Committee to Elect David Coss for Mayor	Transaction ID: D10098 Date of Disbursement
Mailing Address PO Box 4573	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 8 / 2 0 1 0</div> </div>
City Santa Fe State NM Zip Code 87502	Amount of Each Disbursement this Period
Purpose of Disbursement Federal Candidate Contribution 2010	<div>2500.00</div>
Candidate Name David Coss	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Women's Policy, Inc.	Transaction ID: D10079 Date of Disbursement
Mailing Address 409 12th Street, SW, Suite 310	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 2 / 2 0 1 0</div> </div>
City Washington State DC Zip Code 20024	Amount of Each Disbursement this Period
Purpose of Disbursement Non-Federal Committee Contribution	<div>2500.00</div>
Candidate Name	<div>011</div> <div>Category/Type</div>
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)

6000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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<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)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Young Democrats of America

Mailing Address PO BOX 77496

City
Washington

State
DC

Zip Code
20013

Purpose of Disbursement
Non-Federal Committee Contrib 2010

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10083

Date of Disbursement

01 / 25 / 2010

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

58193.48