

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

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

FOR LINE NUMBER: PAGE 298 OF 414

(check only one)

☒ 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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHMIDT, KALIOPE, , ,

Mailing Address 1978 BARRONS GLEN

City
SUGAR LAND

State
TX

Zip Code
77478-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STATE OF TEXAS

Occupation (for Individual)
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2019

Transaction ID : C28856236

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHNEIDER, DOUG, , ,

Mailing Address 55 KATHIE CT

City
GERMANTOWN

State
OH

Zip Code
45327-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AMERITECH

Occupation (for Individual)
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 06 / 2019

Transaction ID : C28851688

Amount of Each Receipt this Period

40.00

☐ Memo Item

* Payroll Deduction: \$40 Monthly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCOTT, JOHN, , ,

Mailing Address 296 TUNXIS AVENUE

City
BLOOMFIELD

State
CT

Zip Code
06002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SBC-SNET

Occupation (for Individual)
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 27 / 2019

Transaction ID : C28837729

Amount of Each Receipt this Period

32.00

☐ Memo Item

* Payroll Deduction: \$16 Monthly

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

102.00

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