

# 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  
AMALGAMATED TRANSIT UNION-COPE

ADDRESS (number and street) 5025 WISCONSIN AVE. N.W.  
 Check if different than previously reported. (ACC)  
WASHINGTON DC 20016

2. **FEC IDENTIFICATION NUMBER** C00032995  
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 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 06 01 2008 through 06 30 2008

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 Mr. Oscar Owens

Signature of Treasurer Electronically Filed by Mr. Oscar Owens Date 10 15 2008

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
AMALGAMATED TRANSIT UNION-COPE

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		194257.67
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	155568.33									
(c) Total Receipts (from Line 19) .....	41148.25	285428.29								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	196716.58	479685.96								
7. Total Disbursements (from Line 31) .....	162251.92	445221.30								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	34464.66	34464.66								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
AMALGAMATED TRANSIT UNION-COPE

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	3570.47	9128.88
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	37206.14	273225.07
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	40776.61	282353.95
(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) .....	40776.61	282353.95
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.) .....	371.64	3074.34
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)) .....	41148.25	285428.29
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	41148.25	285428.29

**DETAILED SUMMARY PAGE**

of Disbursements

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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	160000.00	410750.00
24. Independent Expenditure (use Schedule E) .....	751.92	4746.30
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.....	1500.00	29725.00
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))..	162251.92	445221.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	162251.92	445221.30

**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) .....	40776.61	282353.95
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	40776.61	282353.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 52  
(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Paul J. Bachtel

Mailing Address 8513 Main Street  
#203

City Edmonds State WA Zip Code 98026

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

Name of Employer King County Metro Transit Occupation Transit Employee

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.17359

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Robert H. Baker

Mailing Address 6400 Oakley Terrace

City Frederick State MD Zip Code 21701

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

Name of Employer Amalgamated Transit Union Occupation International Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.17320

Amount of Each Receipt this Period  
42.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Robert E. Bangs

Mailing Address 2411 South 248th Street  
#D-12

City Kent State WA Zip Code 98032-4070

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

Name of Employer King County Metro Transit Occupation Transit operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.17346

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 142.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 52  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Thomas P. Betzler

Mailing Address 252 5th Street

City Coaldale State PA Zip Code 18218

FEC ID number of contributing federal political committee. C

Name of Employer Lehigh & Northampton Transit Occupation Operator

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 292.50

Date of Receipt 06 / 21 / 2008  
**Transaction ID:** SA11AI.17388

Amount of Each Receipt this Period 45.00

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

Mailing Address c/o LU 689  
2701 Whitney Place

City Forestville State MD Zip Code 20747

FEC ID number of contributing federal political committee. C

Name of Employer Washington Metro Area Transit Occupation operator

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 28 / 2008  
**Transaction ID:** SA11AI.17380

Amount of Each Receipt this Period 40.00

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

Mailing Address P.O. Box 5322

City Petaluma State CA Zip Code 94955

FEC ID number of contributing federal political committee. C

Name of Employer Amalgamated Transit Union Occupation International Vice President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 06 / 09 / 2008  
**Transaction ID:** SA11AI.17319

Amount of Each Receipt this Period 42.00

**SUBTOTAL** of Receipts This Page (optional) ..... 127.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 52  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Edward J. Dolores

Mailing Address 1226 Clayburn Lane

City State Zip Code  
San Jose CA 95121-2608

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

Name of Employer Occupation  
Santa Clara Valley Trans. Transit employee  
Auth.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 267.42

Date of Receipt  
MM / DD / YYYY  
06 / 09 / 2008

Transaction ID: SA11AI.17333

Amount of Each Receipt this Period  
44.57

**B.**

Full Name (Last, First, Middle Initial)  
Ninous Edwards

Mailing Address 1008 N. Abbott Avenue

City State Zip Code  
Milpitas CA 95035

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

Name of Employer Occupation  
Santa Clara Vly Transit transit operator  
Auth.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
06 / 09 / 2008

Transaction ID: SA11AI.17337

Amount of Each Receipt this Period  
35.00

**C.**

Full Name (Last, First, Middle Initial)  
Troy S. Edwards

Mailing Address 21638 SE 283rd Street

City State Zip Code  
Maple Valley WA 98038

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

Name of Employer Occupation  
King County DOT/Metro Tra- transit operator  
nsit

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 04 / 2008

Transaction ID: SA11AI.17364

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **129.57**

**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 9 / 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Jimmie R. Ekdahl		Date of Receipt MM / DD / YYYY 06 / 04 / 2008		
	Mailing Address 13218 Third S		<b>Transaction ID:</b> SA11AI.17347		
	City Seattle	State WA	Zip Code 98168	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer King County DOT-Metro Transit	Occupation operator	Aggregate Year-to-Date 300.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. David S. Fairbanks		Date of Receipt MM / DD / YYYY 06 / 04 / 2008		
	Mailing Address 8622 202nd SW		<b>Transaction ID:</b> SA11AI.17353		
	City Edmonds	State WA	Zip Code 98026-6644	Amount of Each Receipt this Period 42.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer King County Metro Transit	Occupation Transit Operator	Aggregate Year-to-Date 252.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Everette D. Farra		Date of Receipt MM / DD / YYYY 06 / 16 / 2008		
	Mailing Address 4800 SW 191st Avenue		<b>Transaction ID:</b> SA11AI.17383		
	City Aloha	State OR	Zip Code 97007	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Lane Transit District	Occupation transit operator	Aggregate Year-to-Date 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	117.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. James D. Fitzgerald

Mailing Address 4608 East 13th Avenue

City State Zip Code  
Spokane Valley WA 99212

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

Name of Employer Occupation  
Spokane Transit Authority Transit Operator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
MM / DD / YYYY  
06 / 24 / 2008

**Transaction ID:** SA11AI.17389

Amount of Each Receipt this Period  
45.00

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

Mailing Address 4608 E. 13th Avenue

City State Zip Code  
Spokane Valley WA 99212-6360

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

Name of Employer Occupation  
Spokane Transit Authority transit operator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt  
MM / DD / YYYY  
06 / 24 / 2008

**Transaction ID:** SA11AI.17390

Amount of Each Receipt this Period  
48.00

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

Mailing Address 67 Old Thompson Road

City State Zip Code  
Buxton ME 04093

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

Name of Employer Occupation  
Greater Portland Transit Dist. Operator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 206.74

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2008

**Transaction ID:** SA11AI.17382

Amount of Each Receipt this Period  
6.74

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 99.74

**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 11 / 52
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Joseph H. Gotcher		Date of Receipt MM / DD / YYYY 06 / 28 / 2008		
	Mailing Address 918 La Presa Avenue		<b>Transaction ID:</b> SA11AI.17393		
	City Spring Valley	State CA	Zip Code 91977-4341	Amount of Each Receipt this Period 60.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer ATC Vancorn Inc. of California	Occupation Transit Operator	Aggregate Year-to-Date 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) Lavon M. Hamilton		Date of Receipt MM / DD / YYYY 06 / 09 / 2008		
	Mailing Address 1586 Martin Avenue		<b>Transaction ID:</b> SA11AI.17336		
	City San Jose	State CA	Zip Code 95126	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Santa Clara Valley Transit Aut	Occupation Transit operator	Aggregate Year-to-Date 275.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Lawrence Hanley		Date of Receipt MM / DD / YYYY 06 / 09 / 2008		
	Mailing Address 40-D Dinsmore Street		<b>Transaction ID:</b> SA11AI.17324		
	City Staten Island	State NY	Zip Code 10314	Amount of Each Receipt this Period 42.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Amalgamated Transit Union	Occupation International Representative	Aggregate Year-to-Date 252.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	152.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 52  
(check only one)

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Donald T. Hansen

Mailing Address 12016 Bronson Street, SE

City State Zip Code  
Tenino WA 98589

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

Name of Employer Amalgamated Transit Union Occupation International Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt: 06 / 09 / 2008  
Transaction ID: SA11AI.17318  
Amount of Each Receipt this Period: 42.00

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

Mailing Address 12126 Meridian Road, NE

City State Zip Code  
Mt. Angel OR 97362

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

Name of Employer Amalgamated Transit Union Occupation International Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 06 / 09 / 2008  
Transaction ID: SA11AI.17323  
Amount of Each Receipt this Period: 45.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jonathan J. Hunt

Mailing Address 14230 SW 117th Avenue

City State Zip Code  
Tigard OR 97224

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

Name of Employer Lane Transit Occupation Transit Operator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 06 / 16 / 2008  
Transaction ID: SA11AI.17386  
Amount of Each Receipt this Period: 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 112.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 52  
(check only one)

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

**A.**

Full Name (Last, First, Middle Initial)  
Ms Regina D. Jackson

Mailing Address P.O. Box 1138

City State Zip Code  
Maple Valley WA 98038

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

Name of Employer King County DOT-Metro Transit  
Occupation Operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.50

Date of Receipt  
MM / DD / YYYY  
06 / 04 / 2008

**Transaction ID:** SA11AI.17372

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Robert L. Jackson, Jr.

Mailing Address 10042 Ravenna Avenue NE

City State Zip Code  
Seattle WA 98125-7742

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

Name of Employer King county DOT  
Occupation transit operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
MM / DD / YYYY  
06 / 04 / 2008

**Transaction ID:** SA11AI.17352

Amount of Each Receipt this Period  
40.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Jerry L. Jacobs

Mailing Address 2112 North 41st

City State Zip Code  
Seattle WA 98103

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

Name of Employer King County Metro Transit  
Occupation Transit Operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
06 / 04 / 2008

**Transaction ID:** SA11AI.17357

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **140.00**

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

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

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

FOR LINE NUMBER: PAGE 14 / 52  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Darrell Jefferson

Mailing Address 545 E. 50th Street

City State Zip Code  
Chicago IL 60615

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

Name of Employer Chicago Transit Authority      Occupation Operator

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

**Transaction ID:** SA11AI.17331

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Richard W. Johnson

Mailing Address 15833 West Carrabean Lane

City State Zip Code  
Surprise AZ 85379

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

Name of Employer ATC Phoenix Transit Nec.      Occupation Transit Operator

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

**Transaction ID:** SA11AI.17395

Amount of Each Receipt this Period  
50.00

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

Mailing Address P.O. Box 2561

City State Zip Code  
Boca Raton FL 33427

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

Name of Employer Palm Tran, Inc.      Occupation transit operator

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

**Transaction ID:** SA11AI.17401

Amount of Each Receipt this Period  
80.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 180.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 52  
(check only one)

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Maurice K. Kimble

Mailing Address 3540 Eden Avenue

City State Zip Code  
Cincinnati OH 45229

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

Name of Employer SW Ohio Regional Transit Auth.  
Occupation Transit operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.08

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2008

**Transaction ID:** SA11AI.17375

Amount of Each Receipt this Period  
41.68

**B.** Full Name (Last, First, Middle Initial)  
Mr. Kenneth R. Kirk

Mailing Address 1236 Spring Water Drive

City State Zip Code  
Lancaster TX 75134

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

Name of Employer Amalgamated Transit Union  
Occupation International Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
06 / 09 / 2008

**Transaction ID:** SA11AI.17325

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jerry L. Kleiboeker

Mailing Address 5015 Comanche #L

City State Zip Code  
La Mesa CA 91941

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

Name of Employer ATC Vancor Inc. of California  
Occupation Transit Operator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
252.00

Date of Receipt  
MM / DD / YYYY  
06 / 28 / 2008

**Transaction ID:** SA11AI.17394

Amount of Each Receipt this Period  
63.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **154.68**

**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 16 / 52
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Ralph T. Klugh		Date of Receipt
	Mailing Address 3418 Cedar Glen Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 05 / 2008
	City	State	Zip Code
	Allison Park	PA	15101
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Port Authority of Allegheny		Occupation transit operator	Transaction ID: SA11AI.17329
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 210.00	
		Amount of Each Receipt this Period	<input type="text"/> 35.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Richard L. Leonard		Date of Receipt
	Mailing Address 6114 South Bangor Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 04 / 2008
	City	State	Zip Code
	Seattle	WA	98178
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer King County DOT/Metro Transit		Occupation transit operator	Transaction ID: SA11AI.17367
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 210.00	
		Amount of Each Receipt this Period	<input type="text"/> 30.00

<b>C.</b>	Full Name (Last, First, Middle Initial) James B. Lindsay III, III		Date of Receipt
	Mailing Address 19877 Blue Cloud Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 05 / 2008
	City	State	Zip Code
	Saugus	CA	91390
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Los Angeles City Metro		Occupation transit operator	Transaction ID: SA11AI.17391
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 500.00	
		Amount of Each Receipt this Period	<input type="text"/> 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 565.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Tom A. Loproto	Date of Receipt MM / DD / YYYY 06 / 09 / 2008
	Mailing Address 458 McCamish Avenue	<b>Transaction ID:</b> SA11AI.17339
	City State Zip Code San Jose CA 95123	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Santa Clara Vly Transit transit operator Auth Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jess A Martinez	Date of Receipt MM / DD / YYYY 06 / 09 / 2008
	Mailing Address 3801 Saint Nicholas Drive	<b>Transaction ID:</b> SA11AI.17334
	City State Zip Code Modesto CA 95356	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Santa Clara Vly. Transit transit operator Auth Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Robert J. Mazzei	Date of Receipt MM / DD / YYYY 06 / 05 / 2008
	Mailing Address 1448 Balsam Drive	<b>Transaction ID:</b> SA11AI.17330
	City State Zip Code Alison Park PA 15101-3948	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Port Authority of Allegheny Transit operator Auth Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 272.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	112.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Kenneth Mc Cormick		Date of Receipt	
	Mailing Address P.O. Box 4156		M M / D D / Y Y Y Y Y 0 6 / 0 4 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.17354
	Seattle	WA	98191-0156	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		50.00	
Name of Employer King County DOT, Metro Transit		Occupation transit operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. James L. Mc Cubbin		Date of Receipt	
	Mailing Address P.O. Box 56516		M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.17396
	Phoenix	AZ	85079-6516	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		40.00	
Name of Employer ATC Phoenix Transit		Occupation Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) John L. Mc Donald		Date of Receipt	
	Mailing Address 1539 Yarmouth Avenue		M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.17376
	Cincinnati	OH	45237	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		41.76	
Name of Employer SW Ohio Regional Transit Auth.		Occupation Transit operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.56		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>131.76</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Booker T. Mc Kinion		Date of Receipt
	Mailing Address 3862 Renton Avenue South		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 04 / 2008
	City	State	Zip Code
	Seattle	WA	98108
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.17356
Name of Employer King County DOT-Metro Transit		Occupation operator	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	<input type="text"/> 50.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. William G. Mc Lean		Date of Receipt
	Mailing Address 2350 Greensboro Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 09 / 2008
	City	State	Zip Code
	Reno	NV	89509
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.17322
Name of Employer Amalgamated Transit Union		Occupation International Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.04	<input type="text"/> 83.34

<b>C.</b>	Full Name (Last, First, Middle Initial) Matthew Mervosh		Date of Receipt
	Mailing Address 2919 Brevard Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 05 / 2008
	City	State	Zip Code
	Pittsburgh	PA	15227
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.17328
Name of Employer PAT Transportation		Occupation Operator	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.02	<input type="text"/> 41.67

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 175.01
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 20 / 52  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

Mailing Address 9198 Water Road

City State Zip Code  
Cotati CA 94931

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

Name of Employer Golden Gate Bridge Highway Tra  
Occupation 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 6 / 1 2 / 2 0 0 8

**Transaction ID:** SA11AI.17400

Amount of Each Receipt this Period  
45.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Wes R. Moorehead

Mailing Address P.O. Box 3011

City State Zip Code  
Kent WA 98032-0201

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

Name of Employer King County Metro Transit  
Occupation Transit Operator

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 0 4 / 2 0 0 8

**Transaction ID:** SA11AI.17361

Amount of Each Receipt this Period  
50.00

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

Mailing Address 5726 145th Place, SW

City State Zip Code  
Edmonds WA 98026-3729

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

Name of Employer King County Metro Transit  
Occupation Transit Operator

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 0 4 / 2 0 0 8

**Transaction ID:** SA11AI.17348

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **145.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 52  
(check only one)

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

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Richard M. Murphy

Date of Receipt  
MM / DD / YYYY  
06 / 09 / 2008

Mailing Address 346 Washington Street  
#143

Transaction ID: SA11AI.17321

City Braintree State MA Zip Code 02184

Amount of Each Receipt this Period  
42.00

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

Name of Employer Amalgamated Transit Union Occupation International Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Paul B. Neil

Date of Receipt  
MM / DD / YYYY  
06 / 04 / 2008

Mailing Address 1701 157th Avenue NE  
#A101

Transaction ID: SA11AI.17355

City Bellevue State WA Zip Code 98008-2777

Amount of Each Receipt this Period  
50.00

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

Name of Employer King County Metro Transit Occupation Transit operator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Lance F. Norton

Date of Receipt  
MM / DD / YYYY  
06 / 04 / 2008

Mailing Address 3529 158th SW

Transaction ID: SA11AI.17349

City Lynwood State WA Zip Code 98037-1415

Amount of Each Receipt this Period  
50.00

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

Name of Employer King County Metro Transit Occupation Transit Operator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 142.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 52
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael O'Toole	Date of Receipt MM / DD / YYYY 06 / 09 / 2008
	Mailing Address 1669 Merrill Drive, #D	<b>Transaction ID:</b> SA11AI.17341
	City State Zip Code San Jose CA 95124	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Santa Clara Valley Trans transit operator Auth Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Wilfred M. Owens	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 336 Ohio Street	<b>Transaction ID:</b> SA11AI.17398
	City State Zip Code Vallejo CA 94590-5053	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Golden Gate Bridge Hwy. Tr. Dist. Transit Operator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Beth A. Peck	Date of Receipt MM / DD / YYYY 06 / 12 / 2008
	Mailing Address 301 Ely Boulevard South	<b>Transaction ID:</b> SA11AI.17399
	City State Zip Code Petaluma CA 94954	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Golden Gate Bridge Highway Tra Transit operator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	134.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 52  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)

Mr Raymond K. Pekarovic

Mailing Address P.O. Box 1501

City State Zip Code  
Bothell WA 98401

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

Name of Employer Occupation  
King County DOT - Metro operator  
Transit

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.17370

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mr. Rodney Richmond

Mailing Address 4303 Pine Lane

City State Zip Code  
Spring TX 77389-4642

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

Name of Employer Occupation  
Amalgamated Transit Union International Vice President

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 252.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.17317

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

Daniel G. Rodriguez, Jr.

Mailing Address 209 Ray Avenue

City State Zip Code  
San Antonio TX 78204

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

Name of Employer Occupation  
VIA Metro Transit Authority transit operator

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.17381

Amount of Each Receipt this Period

40.00

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

132.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms Yvette Salazar		Date of Receipt MM / DD / YYYY 06 / 09 / 2008		
	Mailing Address 2713 East 132nd Place		<b>Transaction ID:</b> SA11AI.17326		
	City Thornton	State CO	Zip Code 80241	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Amalgamated Transit Union	Occupation International Representative			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Sam F. Schwarz		Date of Receipt MM / DD / YYYY 06 / 16 / 2008		
	Mailing Address 4712 SE River Drive		<b>Transaction ID:</b> SA11AI.17387		
	City Milwaukie	State OR	Zip Code 97267	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Tri-City Metro Transit Dist	Occupation transit operator			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms Loretta Springer		Date of Receipt MM / DD / YYYY 06 / 09 / 2008		
	Mailing Address 1600 Decker Avenue		<b>Transaction ID:</b> SA11AI.17332		
	City San Martin	State CA	Zip Code 95046	Amount of Each Receipt this Period 49.03	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Santa Clara Valley Transit Aut	Occupation Transit Operator			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 294.18			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>124.03</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 52  
(check only one)

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

**A.**

Full Name (Last, First, Middle Initial)  
Tonia Starkey-Oba

Mailing Address 11560 Oldegate Drive  
#A

City State Zip Code  
Cincinnati OH 45246

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

Name of Employer Occupation  
SW Ohio Regional Tranist Transit Operator  
Auth.

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 1 6 / 2 0 0 8

**Transaction ID:** SA11AI.17378

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Willie Stephens Jr.

Mailing Address 3260 Rocker Drive  
#6

City State Zip Code  
Cincinnati OH 45239

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

Name of Employer Occupation  
SW Ohio Regional Transit Operator  
Auth.

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.08

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 1 6 / 2 0 0 8

**Transaction ID:** SA11AI.17379

Amount of Each Receipt this Period  
41.68

**C.**

Full Name (Last, First, Middle Initial)  
Randy A. Stevenson

Mailing Address 5737 A Prentice Street

City State Zip Code  
Seattle WA 98178-2248

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

Name of Employer Occupation  
King County DOT-METRO Tra- Operator  
nsit

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 0 4 / 2 0 0 8

**Transaction ID:** SA11AI.17371

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **141.68**

**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 26 / 52  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Mark P. Tambellini

Mailing Address 943 Fairfield Lane

City State Zip Code  
McDonald PA 15057

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

Name of Employer Occupation  
PAT Transit Allegheny Co. transit employee

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt  
MM / DD / YYYY  
06 / 05 / 2008

**Transaction ID:** SA11AI.17327

Amount of Each Receipt this Period  
42.00

**B.**

Full Name (Last, First, Middle Initial)  
Jimmy O. Vann

Mailing Address 2353 Martin Luther King Jr Way

City State Zip Code  
Tacoma WA 98405

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

Name of Employer Occupation  
King County DOT-Metro Transit operator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
06 / 04 / 2008

**Transaction ID:** SA11AI.17369

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
Ms Deeann K. Wakenight

Mailing Address 4155 12th Avenue South

City State Zip Code  
Seattle WA 98108-1413

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

Name of Employer Occupation  
King County Metro Transit Transit Employee

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
MM / DD / YYYY  
06 / 04 / 2008

**Transaction ID:** SA11AI.17358

Amount of Each Receipt this Period  
35.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **127.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 52
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Jerry Wallace, III		Date of Receipt MM / DD / YYYY 06 / 04 / 2008		
	Mailing Address 7706 37th Avenue South		Transaction ID: SA11AI.17350		
	City Seattle	State WA	Zip Code 98118-4008	Amount of Each Receipt this Period 35.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer King County Metro Transit		Occupation Transit Operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Dale Ward		Date of Receipt MM / DD / YYYY 06 / 09 / 2008		
	Mailing Address 5487 Drysdale Drive		Transaction ID: SA11AI.17342		
	City San Jose	State CA	Zip Code 95124	Amount of Each Receipt this Period 35.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Santa Clara Vly Transit Auth		Occupation transit operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Donald L. Ward		Date of Receipt MM / DD / YYYY 06 / 04 / 2008		
	Mailing Address 2538 S. Raymond Street		Transaction ID: SA11AI.17351		
	City Seattle	State WA	Zip Code 98108	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer King Co DOT, Metro-Transit		Occupation Transit operator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	120.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 52  
(check only one)

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Chris W. Wick		Date of Receipt MM / DD / YYYY 06 / 04 / 2008		
	Mailing Address 10525 SE 250th Place #G-103		<b>Transaction ID:</b> SA11AI.17366		
	City Kent	State WA	Zip Code 98030	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer King County DOT-Metro Transit	Occupation operator	Aggregate Year-to-Date 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) Jimmy C. Williams		Date of Receipt MM / DD / YYYY 06 / 04 / 2008		
	Mailing Address 215 31st Avenue S.		<b>Transaction ID:</b> SA11AI.17373		
	City Seattle	State WA	Zip Code 98144	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer King County DOT	Occupation Transit Operator	Aggregate Year-to-Date 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) Julius T. Williams, III		Date of Receipt MM / DD / YYYY 06 / 04 / 2008		
	Mailing Address 3054 Onalaska Highway 508		<b>Transaction ID:</b> SA11AI.17362		
	City Onalaska	State WA	Zip Code 98570	Amount of Each Receipt this Period 35.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer King County DOT/Metro Transit	Occupation transit operator	Aggregate Year-to-Date 210.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>125.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 29 / 52	
	(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"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Anthony R. Withington		Date of Receipt																					
	Mailing Address 5817 Blank Road		<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>6</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	2		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		1	2		2	0	0	8														
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.17397																				
	Sebastopol	CA	95472-6115	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		<b>C</b>	42.00																					
Name of Employer Golden Gate Bridge Hwy Tr. Dist.		Occupation Transit Operator																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	252.00																					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	42.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	3570.47

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 52  
(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)  
AMALGAMATED TRANSIT UNION-COPE

A.

Full Name (Last, First, Middle Initial)  
Citibank, F.S.B.

Mailing Address 5001 Wisconsin Avenue, N.W.

City	State	Zip Code
Washington	DC	20016

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

Name of Employer	Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3074.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: SA17.17438

Amount of Each Receipt this Period  
371.64

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	371.64
<b>TOTAL</b> This Period (last page this line number only) .....	▶	371.64

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A.** Full Name (Last, First, Middle Initial)  
ANNE BARTH FOR CONGRESS

Mailing Address POST OFFICE BOX 2151

City CHARLESTON State WV Zip Code 25328

Purpose of Disbursement

Candidate Name

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

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: SB23.17255  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
BEN CARDIN FOR SENATE

Mailing Address P.O. BOX 21093

City CATONSVILLE State MD Zip Code 21228

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: MD District: 03

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: SB23.17237  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
BOB LORD FOR CONGRESS

Mailing Address 4340 E INDIAN SCHOOL SUITE 21-502

City PHOENIX State AZ Zip Code 85018

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: AZ District: 03

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: SB23.17295  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 52

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>BOSWELL FOR CONGRESS</b> <hr/> Mailing Address PO BOX 823 <hr/> City INDIANOLA State IA Zip Code 50125 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.17296 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) <b>BROWN FOR CONGRESS</b> <hr/> Mailing Address 5429 Madison Avenue <hr/> City Sacramento State CA Zip Code 95841 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.17245 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 8
	Amount of Each Disbursement this Period 2500.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) <b>CHET EDWARDS FOR CONGRESS</b> <hr/> Mailing Address P. O. Box 23273 <hr/> City Waco State TX Zip Code 76702 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name <input type="checkbox"/> <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 11 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.17297 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" 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) ..... ▶





**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

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

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

A.	Full Name (Last, First, Middle Initial) Democratic National Committee	Transaction ID: SB23.17287 Date of Disbursement
	Mailing Address 430 South Capitol Street, SE	<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2008"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="10000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE	Transaction ID: SB23.17288 Date of Disbursement
	Mailing Address 430 SOUTH CAPITOL STREET, SE	<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2008"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="10000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DRIEHAUS FOR CONGRESS	Transaction ID: SB23.17258 Date of Disbursement
	Mailing Address 1018 BENZ AVENUE	<input type="text" value="06"/> / <input type="text" value="13"/> / <input type="text" value="2008"/>
	City CINCINNATI State OH Zip Code 45238	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="21000.00"/>
<b>TOTAL</b> 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)

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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)  
AMALGAMATED TRANSIT UNION-COPE

<p><b>A.</b> Full Name (Last, First, Middle Initial) FRIENDS OF DAN MAFFEI</p> <p>Mailing Address PO Box 74</p> <p>City Syracuse State NY Zip Code 13214</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.17254</p> <p>Date of Disbursement 06 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 3000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) FRIENDS OF DICK DURBIN COMMITTEE</p> <p>Mailing Address P O BOX 1949</p> <p>City SPRINGFIELD State IL Zip Code 62705</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 00</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.17277</p> <p>Date of Disbursement 06 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 4000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) FRIENDS OF MARK WARNER</p> <p>Mailing Address 201 NORTH UNION SUITE 350</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name <input type="checkbox"/> Category/Type</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 00</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.17286</p> <p>Date of Disbursement 06 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p>

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

9500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) <b>FRIENDS OF TRACEY BROOKS</b> <hr/> Mailing Address <b>77 COLUMBIA STREET</b> <hr/> City <b>ALBANY</b> State <b>NY</b> Zip Code <b>12210</b> Purpose of Disbursement <input type="text"/> Candidate Name <input type="text"/> Category/Type <input type="text"/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>NY</b> District: <b>21</b> Disbursement For: <b>2008</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID: SB23.17298</b> Date of Disbursement M M / D D / Y Y Y Y <b>06 / 27 / 2008</b> <hr/> Amount of Each Disbursement this Period <input type="text" value="4000.00"/>
B.	Full Name (Last, First, Middle Initial) <b>FRIENDS OF WEINER</b> <hr/> Mailing Address <b>PO BOX 290-346</b> <hr/> City <b>BROOKLYN</b> State <b>NY</b> Zip Code <b>11229</b> Purpose of Disbursement <input type="text"/> Candidate Name <input type="text"/> Category/Type <input type="text"/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>NY</b> District: <b>09</b> Disbursement For: <b>2008</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID: SB23.17227</b> Date of Disbursement M M / D D / Y Y Y Y <b>06 / 18 / 2008</b> <hr/> Amount of Each Disbursement this Period <input type="text" value="500.00"/>
C.	Full Name (Last, First, Middle Initial) <b>GRIFFITH FOR CONGRESS</b> <hr/> Mailing Address <b>PO BOX 2619</b> <hr/> City <b>HUNTSVILLE</b> State <b>AL</b> Zip Code <b>35804</b> Purpose of Disbursement <input type="text"/> Candidate Name <input type="text"/> Category/Type <input type="text"/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>AL</b> District: <b>05</b> Disbursement For: <b>2008</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID: SB23.17299</b> Date of Disbursement M M / D D / Y Y Y Y <b>06 / 27 / 2008</b> <hr/> Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="5500.00"/>
<b>TOTAL</b> 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

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

A.	Full Name (Last, First, Middle Initial) JEANNE SHAHEEN FOR SENATE	Transaction ID: SB23.17281 Date of Disbursement 06 / 13 / 2008
	Mailing Address PO BOX 1510	Amount of Each Disbursement this Period 5000.00
	City MANCHESTER State NH Zip Code 03105	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JENNINGS 2008	Transaction ID: SB23.17259 Date of Disbursement 06 / 13 / 2008
	Mailing Address PO Box 49136	Amount of Each Disbursement this Period 5000.00
	City Sarasota State FL Zip Code 34230	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 13	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JOAN FITZ-GERALD FOR CONGRESS COMMITTEE	Transaction ID: SB23.17233 Date of Disbursement 06 / 10 / 2008
	Mailing Address BOX 401 9975 WADSWORTH PKWY UNIT K-2	Amount of Each Disbursement this Period 2500.00
	City WESTMINSTER State CO Zip Code 80021	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	12500.00
<b>TOTAL</b> 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)  
AMALGAMATED TRANSIT UNION-COPE

A.	Full Name (Last, First, Middle Initial) JOHN BOCCIERI FOR CONGRESS	Transaction ID: SB23.17243 Date of Disbursement 06 / 13 / 2008
	Mailing Address PO BOX 3016	Amount of Each Disbursement this Period 5000.00
	City ALLIANCE State OH Zip Code 44601	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) KAY FOR CONGRESS	Transaction ID: SB23.17229 Date of Disbursement 06 / 06 / 2008
	Mailing Address PO Box 14194	Amount of Each Disbursement this Period 5000.00
	City Parkville State MO Zip Code 64152	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) KILPATRICK FOR UNITED STATES CONGRESS	Transaction ID: SB23.17234 Date of Disbursement 06 / 10 / 2008
	Mailing Address PO BOX 32175	Amount of Each Disbursement this Period 1000.00
	City DETROIT State MI Zip Code 48232	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 15	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**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)

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

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

A.	Full Name (Last, First, Middle Initial) KILROY FOR CONGRESS	Transaction ID: SB23.17228 Date of Disbursement 06 / 06 / 2008
	Mailing Address 929 Harrison Ave Ste 305	Amount of Each Disbursement this Period 2500.00
	City Columbus State OH Zip Code 43215	
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: OH District: 15	

B.	Full Name (Last, First, Middle Initial) KILROY FOR CONGRESS	Transaction ID: SB23.17251 Date of Disbursement 06 / 13 / 2008
	Mailing Address 929 Harrison Ave Ste 305	Amount of Each Disbursement this Period 2500.00
	City Columbus State OH Zip Code 43215	
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: OH District: 15	

C.	Full Name (Last, First, Middle Initial) KIRKPATRICK FOR ARIZONA	Transaction ID: SB23.17252 Date of Disbursement 06 / 13 / 2008
	Mailing Address PO Box G	Amount of Each Disbursement this Period 2500.00
	City Flagstaff State AZ Zip Code 86002	
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: AZ District: 01	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	7500.00
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) KISSELL FOR CONGRESS	Transaction ID: SB23.17261 Date of Disbursement 06 / 13 / 2008
	Mailing Address P.O. Box 1530	Amount of Each Disbursement this Period 2500.00
	City Biscoe State NC Zip Code 27209	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) KOSMAS FOR CONGRESS	Transaction ID: SB23.17301 Date of Disbursement 06 / 27 / 2008
	Mailing Address PO Box 1547	Amount of Each Disbursement this Period 1000.00
	City New Smyrna Beach State FL Zip Code 32170	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) KRATOVIL FOR CONGRESS	Transaction ID: SB23.17236 Date of Disbursement 06 / 10 / 2008
	Mailing Address 222 Main Sail Drive PO Box 518	Amount of Each Disbursement this Period 2000.00
	City Stevensville State MD Zip Code 21666	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

5500.00

**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)  
AMALGAMATED TRANSIT UNION-COPE

A.	Full Name (Last, First, Middle Initial) M-PAC  Mailing Address 607 14th Street N.W. Suite 800  City Washington State DC Zip Code 20005  Purpose of Disbursement <input type="text"/>  Candidate Name <input type="text"/> Category/Type <input type="text"/>  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Other	Transaction ID: SB23.17235 Date of Disbursement 06 / 10 / 2008  Amount of Each Disbursement this Period 5000.00
B.	Full Name (Last, First, Middle Initial) MADIA FOR U S CONGRESS  Mailing Address P.O. Box 2459  City Maple Grove State MN Zip Code 55311  Purpose of Disbursement <input type="text"/>  Candidate Name <input type="text"/> Category/Type <input type="text"/>  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MN District: 03	Transaction ID: SB23.17238 Date of Disbursement 06 / 13 / 2008  Amount of Each Disbursement this Period 5000.00
C.	Full Name (Last, First, Middle Initial) MARTIN HEINRICH  Mailing Address 2118 CENTRAL AVENUE SE #71  City ALBUQUERQUE State NM Zip Code 87106  Purpose of Disbursement <input type="text"/>  Candidate Name <input type="text"/> Category/Type <input type="text"/>  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NM District: 01	Transaction ID: SB23.17249 Date of Disbursement 06 / 13 / 2008  Amount of Each Disbursement this Period 2500.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12500.00
<b>TOTAL</b> 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)

PAGE 43 / 52

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

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

**A.** Full Name (Last, First, Middle Initial)  
MARY LANDRIEU FOR SENATE COMMITTEE INC

Mailing Address 58156 COURT STREET

City PLAQUEMINE State LA Zip Code 70764

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: LA District: 00

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.17278  
Date of Disbursement

06 / 13 / 2008

Amount of Each Disbursement this Period

4000.00

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

Mailing Address 59 EAST MARKET STREET SUITE 244

City CORNING State NY Zip Code 14830

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: NY District: 29

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.17263  
Date of Disbursement

06 / 13 / 2008

Amount of Each Disbursement this Period

4000.00

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

Mailing Address 66 ARNOLD STREET

City STATEN ISLAND State NY Zip Code 10301

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: NY District: 13

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.17303  
Date of Disbursement

06 / 27 / 2008

Amount of Each Disbursement this Period

2500.00

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

10500.00

**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 44 / 52

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

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

A.	Full Name (Last, First, Middle Initial) MINNICK FOR CONGRESS	Transaction ID: SB23.17264 Date of Disbursement 06 / 13 / 2008
	Mailing Address 7964 W Fairview Avenue	Amount of Each Disbursement this Period 1000.00
	City Boise State ID Zip Code 83704	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) MONTAGANO FOR CONGRESS INC	Transaction ID: SB23.17305 Date of Disbursement 06 / 27 / 2008
	Mailing Address PO BOX 615	Amount of Each Disbursement this Period 1000.00
	City GOSHEN State IN Zip Code 46527	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 03	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) NADLER FOR CONGRESS INC	Transaction ID: SB23.17308 Date of Disbursement 06 / 27 / 2008
	Mailing Address 18 EAST 16TH STREET SUITE 401	Amount of Each Disbursement this Period 1000.00
	City NEW YORK State NY Zip Code 10013	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 08	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 45 / 52

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>PETERS FOR CONGRESS</b> <hr/> Mailing Address <b>PO BOX 226</b> <hr/> City <b>BLOOMFIELD HILLS</b> State <b>MI</b> Zip Code <b>48303</b> Purpose of Disbursement <span style="border: 1px solid black; display: inline-block; width: 50px; height: 15px;"></span> Candidate Name <span style="border: 1px solid black; display: inline-block; width: 50px; height: 15px;"></span> Category/Type Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: <b>MI</b> District: <b>09</b>	Transaction ID: <b>SB23.17266</b> Date of Disbursement <table border="1" style="width: 100%;"> <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>6</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	3		2	0	0	8	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		1	3		2	0	0	8														
1000.00																							
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>POWERS FOR CONGRESS</b> <hr/> Mailing Address <b>PO BOX 46</b> <hr/> City <b>WILLIAMSVILLE</b> State <b>NY</b> Zip Code <b>14231</b> Purpose of Disbursement <span style="border: 1px solid black; display: inline-block; width: 50px; height: 15px;"></span> Candidate Name <span style="border: 1px solid black; display: inline-block; width: 50px; height: 15px;"></span> Category/Type Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: <b>NY</b> District: <b>26</b>	Transaction ID: <b>SB23.17309</b> Date of Disbursement <table border="1" style="width: 100%;"> <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>6</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	7		2	0	0	8	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		2	7		2	0	0	8														
1000.00																							
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>REED COMMITTEE</b> <hr/> Mailing Address <b>PO BOX 8628</b> <hr/> City <b>CRANSTON</b> State <b>RI</b> Zip Code <b>02920</b> Purpose of Disbursement <span style="border: 1px solid black; display: inline-block; width: 50px; height: 15px;"></span> Candidate Name <span style="border: 1px solid black; display: inline-block; width: 50px; height: 15px;"></span> Category/Type Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: <b>RI</b> District: <b>00</b>	Transaction ID: <b>SB23.17284</b> Date of Disbursement <table border="1" style="width: 100%;"> <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>6</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">3000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	3		2	0	0	8	3000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		1	3		2	0	0	8														
3000.00																							

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<table border="1" style="width: 100%;"> <tr> <td style="text-align: center;"><b>5000.00</b></td> </tr> </table>	<b>5000.00</b>
<b>5000.00</b>		
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<table border="1" style="width: 100%;"> <tr> <td style="text-align: center;"> </td> </tr> </table>	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.

Full Name (Last, First, Middle Initial)  
RICHARDSON FOR CONGRESS

Transaction ID: SB23.17312  
Date of Disbursement

Mailing Address 1212 S VICTORY BLVD

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	0	8

City State Zip Code  
BURBANK CA 91502

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: CA District: 37

B.

Full Name (Last, First, Middle Initial)  
SCHAUER FOR CONGRESS

Transaction ID: SB23.17268  
Date of Disbursement

Mailing Address PO BOX 100

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	0	8

City State Zip Code  
BATTLE CREEK MI 49016

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: MI District: 07

C.

Full Name (Last, First, Middle Initial)  
TIM JOHNSON FOR SOUTH DAKOTA INC

Transaction ID: SB23.17285  
Date of Disbursement

Mailing Address PO BOX 1859

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	0	8

City State Zip Code  
SIOUX FALLS SD 57101

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: SD District: 00

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

8500.00
---------

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

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**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)  
AMALGAMATED TRANSIT UNION-COPE

<p><b>A.</b> Full Name (Last, First, Middle Initial) TINKLENBERG FOR CONGRESS</p> <p>Mailing Address PO BOX 49787</p> <p>City BLAINE State MN Zip Code 55449</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name <input type="checkbox"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.17226 <b>Date of Disbursement</b> 06 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) TOM ALLEN FOR SENATE</p> <p>Mailing Address 550 FOREST AVE SUITE 101</p> <p>City PORTLAND State ME Zip Code 04101</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name <input type="checkbox"/></p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.17279 <b>Date of Disbursement</b> 06 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) UDALL FOR COLORADO INC</p> <p>Mailing Address 8690 Wolff Court #200</p> <p>City Westminster State CO Zip Code 80031</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name <input type="checkbox"/></p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 00</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.17313 <b>Date of Disbursement</b> 06 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	12500.00
<b>TOTAL</b> 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 48 / 52

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

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

A.

Full Name (Last, First, Middle Initial)  
UDALL FOR US ALL

Transaction ID: SB23.17273

Date of Disbursement

Mailing Address 3311 CANDELARIA NE SUITE A

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	0	8

City ALBUQUERQUE State NM Zip Code 87107

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement

--

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: NM District: 00

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

5000.00
---------

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

16000.00
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**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 49 / 52

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

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

A.	Full Name (Last, First, Middle Initial) Baltimore City Democratic Central Committee	Transaction ID: SB29.17293 Date of Disbursement
	Mailing Address 1010 Hull Street Suite 202	<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2008"/>
	City Baltimore State MD Zip Code 21230	Amount of Each Disbursement this Period
	Purpose of Disbursement Non Federal Contribution	<input type="text" value="750.00"/>
	Candidate Name	Category/ Type
	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:	

B.	Full Name (Last, First, Middle Initial) Citizens for Delores Kelley	Transaction ID: SB29.17292 Date of Disbursement
	Mailing Address P.O. Box 21514	<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2008"/>
	City Baltimore State MD Zip Code 21282	Amount of Each Disbursement this Period
	Purpose of Disbursement Non Federal Contribution	<input type="text" value="250.00"/>
	Candidate Name	Category/ Type
	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:	

C.	Full Name (Last, First, Middle Initial) Citizens for Paul Pinsky	Transaction ID: SB29.17290 Date of Disbursement
	Mailing Address 4115 Hamilton Street	<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2008"/>
	City Hyattsville State MD Zip Code 20781	Amount of Each Disbursement this Period
	Purpose of Disbursement Non Federal Contribution	<input type="text" value="500.00"/>
	Candidate Name	Category/ Type
	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="1500.00"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 50 / 52	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Albany Clothing & Promotions			Nature of Debt (Purpose): T-shirts
Mailing Address 26B Picotte Drive			
City Albany	State NY	ZIP Code 12208	

Outstanding Balance Beginning This Period		Transaction ID: SD10.17215	
751.92			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	751.92	0.00	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	0.00
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	0.00
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 E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMALGAMATED TRANSIT UNION-COPE		FEC IDENTIFICATION NUMBER <b>C</b> C00032995	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		Date M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 8	
Full Name (Last, First, Middle, Initial) of Payee Albany Clothing & Promotions		Amount 751.92	
Mailing Address 26B Picotte Drive		Transaction ID: SE.17437	
City Albany	State NY	Zip Code 12208	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 21 <input type="checkbox"/> Presidential
Purpose of Expenditure T-shirts	Category/ Type	006	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: Tracey Brooks		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
Calendar Year-To-Date Per Election for Office Sought		751.92	

(a) SUBTOTAL of Itemized Independent Expenditures .....	751.92
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	751.92
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Mr. Oscar Owens Signature	Date M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 8

Form/Schedule: **F3XA**

Transaction ID:

The unitemized total of \$37,206.64 represents the total contributions from individuals who have not individually contributed more than \$200 in the aggregate during the calendar year. 10/15/2008 In response to the letter dated 9/19/2008 regarding the outstanding balance and credit for Doyle Printing & Offset Co. When originally reported, it was indicated, as one entry, that the amount charged and due to Doyle Printing & Offset Co. was \$1057.50 for Ohio and Texas independent expenditures. In a previously amended report, the Doyle Printing & Offset Co. entry was split into two entries, each totaling \$528.75 for primary independent expenditures in Ohio and Texas. The original payment to Doyle Printing and Offset Co. was for \$1057.50 and never changed to two entries which left an outstanding balance and credit of \$528.75. When the payment was changed to two payments of \$528.75 this resolved the outstanding balance and credit.

Form/Schedule: **SA11AI**

Transaction ID: **SA11AI.17388**

The monthly total contribution for Thomas P. Betzler was corrected from \$22.50 to \$45. Additionally the unitemized amount was also adjusted to reflect the difference.