

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 JUN 21 A 10:15

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) CWA-COPE POLITICAL CONTRIBUTIONS COMMITTEE		2. FEC IDENTIFICATION NUMBER C00002089	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 501 THIRD STREET N.W.		3. <input checked="" type="checkbox"/> This committee has qualified as a multi-candidate committee (see FEC FORM 1M)	
CITY, STATE and ZIP CODE WASHINGTON, DC 20001			

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report

Monthly Report Due On:

- | | | |
|--------------------------------------|---|--------------------------------------|
| <input type="checkbox"/> February 20 | <input checked="" type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |

- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>05/01/00</u> through <u>05/31/00</u>		
6. (a) Cash on Hand January 1, 19 2000		\$ 999,356.50
(b) Cash on Hand at Beginning of Reporting Period	\$ 897,179.32	
(c) Total Receipts (from Line 19)	\$ 155,058.48	\$ 658,590.13
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 1,152,235.78	\$ 1,857,946.63
7. Total Disbursements (from Line 30)	\$ 83,396.35	\$ 589,107.20
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 1,068,839.43	\$ 1,268,839.43
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 950 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
BARBARA J. EASTERLING TREASURER

Signature of Treasurer



Date

06/16/00

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5497g.

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FEC FORM 3X

(revised 9/93)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE CWA-COPE PCC		REPORT COVERING PERIOD FROM 05/01/00 TO 05/31/00	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributors (other than loans) From:			
a. Individual/Persons Other Than Political Committees:			
I. Itemized (use Schedule A)		5,854.39	37,713.97
II. Unitemized		146,627.82	608,829.87
III. Total (add I and II) >		152,482.21	646,543.84
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions (add a II, b and c) >			
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)		2,574.25	12,048.29
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		155,056.46	658,590.13
20. Total Federal Receipts (subtract line 18 from line 19) >		155,056.46	658,590.13
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4):			
I. Federal Share			
II. Non-Federal Share			
b. Other Federal Operating Expenditures		-0-	7,895.51
c. Total Operating Expenditures (add a I, a II, and b) >		-0-	7,895.51
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		57,300.00	468,285.32
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees		8,996.35	7,037.35
b. Political Party Committees			
c. Other Political Committees (such as PACs)		-0-	6.25
d. Total Contribution Refunds (add a, b and c) >		8,996.35	7,043.60
29. Other Disbursements		19,100.00	105,882.77
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		83,396.35	589,107.20
31. Total Federal Disbursements (subtract line 21 a I from line 30) >		83,396.35	589,107.20
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)			
33. Total Contribution Refunds (from line 28d)			
34. Net Contributions (other than loans) (subtract line 33 from line 32)			
35. Total Federal Operating Expenditures (add 21 a I and 21 b) >			
36. Offsets to Operating Expenditures (from line 15)			
37. Net Operating Expenditures (subtract line 36 from line 35) >			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 1 (A) (1)

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) **Communications Workers of America** COPE PCC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
CURTIS, NANCY J. 184 SUMMER ST NORWELL, MA 02061-1032	010445312 NYNEX INFOR RESORCE	5/4/00	\$30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: AD ACCT REPRESENTATI	Aggregate Year-to-Date: \$450.00	
NILSSON, G. W. 1600 Osgood St North Andover, MA 0184510	011469823 AT&T INSTALLATN /FSC	5/31/00	\$187.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: PROD. ASSOCIATE	Aggregate Year-to-Date: \$755.00	
GILARDI, MICHAEL G. 54 VOSE HILL RD WESTFORD, MA 01886-4535	012462158 NYNEX INFOR RESORCE	5/7/00	\$2.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: AD ACCT REPRESENTATI	Aggregate Year-to-Date: \$345.00	
GARLAND, KEITH 283 LYNNFIELD ST LYNN, MA 01904-1635	013607492 NYNEX INFOR RESORCE	5/7/00	\$30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: AD ACCT REPRESENTATI	Aggregate Year-to-Date: \$495.00	
ALCOTT, GEORGE 15 TALBOT RD BRAintree, MA 02184-5526	018447785 NYNEX INFOR RESORCE	5/7/00	\$30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: AD ACCT REPRESENTATI	Aggregate Year-to-Date: \$200.00	
POINIER, ROBERT 31 GREENWOOD LANE WALTHAM, MA 02451-1826	017423210 NYNEX INFOR RESORCE	5/7/00	\$30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: AD ACCT REPRESENTATI	Aggregate Year-to-Date: \$480.00	
WEEKS-CANTONE, NANCY 123 ADAMS RD CONCORD, MA 01742-1602	019368419 NYNEX INFOR RESORCE	5/7/00	\$30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: AD ACCT REPRESENTATI	Aggregate Year-to-Date: \$375.00	

SUBTOTAL of Receipts This Page (optional) **340.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 of 2
 FOR LINE NUMBER
 (A) (1)

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NAME OF COMMITTEE (in Full) **Communications Workers of America COPE PCC**

A. Full Name, Mailing Address and ZIP Code GEDIES, RICHARD J 23 MEADOW BROOK LN READING, MA 01867-1236	Name of Employer 020586064 NYNEX INFOR RESORCE	Date (month, day, year) 5/4/00	Amount of Each Receipt This Period \$5.00
	Occupation AD ACCT REPRESENTATI Aggregate Year-to-Date > \$ 330.00	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

B. Full Name, Mailing Address and ZIP Code HALSEAND, HARVEY 2 GASLIGHT LANE N EASTON, MA 02356-2721	Name of Employer 021369283 NYNEX INFOR RESORCE	Date (month, day, year) 5/4/00	Amount of Each Receipt This Period \$30.00
	Occupation AD ACCT REPRESENTATI Aggregate Year-to-Date > \$ 405.00	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

C. Full Name, Mailing Address and ZIP Code PETTERSON, ELIZABETH 8 COUNTRY HILL LN PLAINVILLE, MA 02762-1235	Name of Employer 022524087 NYNEX INFOR RESORCE	Date (month, day, year) 5/4/00	Amount of Each Receipt This Period \$30.00
	Occupation AD ACCT REPRESENTATI Aggregate Year-to-Date > \$ 210.00	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

D. Full Name, Mailing Address and ZIP Code SUDOL, S 1600 Osgood St North Andover, MA 0184510	Name of Employer 023460919 AT&T INSTALLATN / PSC	Date (month, day, year) 5/31/00	Amount of Each Receipt This Period \$3.00
	Occupation PLI Aggregate Year-to-Date > \$ 377.00	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

E. Full Name, Mailing Address and ZIP Code REDDINGTON, DENNIS M. 100 FLEETWOOD DR SAUNDERSTOWN, RI 02874-31	Name of Employer 023447136 NYNEX INFOR RESORCE	Date (month, day, year) 5/4/00	Amount of Each Receipt This Period \$30.00
	Occupation AD ACCT REPRESENTATI Aggregate Year-to-Date > \$ 320.00	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

F. Full Name, Mailing Address and ZIP Code MARTIN, ROBERT E 14 ROBINSON CT MANSFIELD, MA 02048-1749	Name of Employer 023507840 NYNEX INFOR RESORCE	Date (month, day, year) 5/4/00	Amount of Each Receipt This Period \$30.00
	Occupation AD ACCT REPRESENTATI Aggregate Year-to-Date > \$ 270.00	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

G. Full Name, Mailing Address and ZIP Code SILVERMAN, DEBRA A 10 ROGERS ST APT 619 CAMBRIDGE, MA 02142-1250	Name of Employer 020462390 NYNEX INFOR RESORCE	Date (month, day, year) 5/4/00	Amount of Each Receipt This Period \$5.00
	Occupation AD ACCT REPRESENTATI Aggregate Year-to-Date > \$ 330.00	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

SUBTOTAL of Receipts This Page (optional) **133.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 2 of 2 OF 2
FOR LINE NUMBER 1 (A) (1)

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NAME OF COMMITTEE (in Full)
Communications Workers of America COPE-PCO

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
1277 BRONSKI, JOHN 54 PARK AVE NEEDHAM, MA 02494-1627 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	028501691 NYNEX INFOR RESORCE Occupation AD ACCT REPRESENTATI Aggregate Year-to-Date > \$ 345.00	5/4/00	\$2.50
1278 CAGGLIANO, MARC R 1A PENNY LN PEABODY, MA 01960-3634 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	029449874 NYNEX INFOR RESORCE Occupation AD ACCT REPRESENTATI Aggregate Year-to-Date > \$ 450.00	5/4/00	\$30.00
1279 SASLAW, JOEL 21 BENEVENTO CIR PEABODY, MA 01960-1270 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	029522386 NYNEX INFOR RESORCE Occupation AD ACCT REPRESENTATI Aggregate Year-to-Date > \$ 332.00	5/4/00	\$4.60
1280 TENNIHAN, ROBERT C. 18 TIMOTHY DR W BRIDGEWATER, MA 02379-1 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	030400240 NYNEX INFOR RESORCE Occupation AD ACCT REPRESENTATI Aggregate Year-to-Date > \$ 320.00	5/4/00	\$20.00
1281 SHEDD, CHRISTOPHER R. 35 WOODLOCK RD HINGHAM, MA 02043-3026 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	034400786 NYNEX INFOR RESORCE Occupation AD ACCT REPRESENTATI Aggregate Year-to-Date > \$ 423.00	5/4/00	\$30.00
1282 RIDER, WILLIAM E. 47 PORTER STREET BERKLEY, MA 02779-1012 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	036380204 NYNEX INFOR RESORCE Occupation KEY-ACCT-SALES-REP Aggregate Year-to-Date > \$ 298.20	5/4/00	\$20.00
1283 ANNICELLI, DONALD A. 505 CEDAR AVE E GREENWICH, RI 02818-260 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	039940893 NYNEX INFOR RESORCE Occupation AD ACCT REPRESENTATI Aggregate Year-to-Date > \$ 480.00	5/4/00	\$30.00

SUBTOTAL of Receipts This Page (optional) 137.10

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 1(A) (1)

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NAME OF COMMITTEE (IN FULL) **Communications Workers of America COPE PCC**

A. Full Name, Mailing Address and ZIP Code VITTE, R 6238 EAST PASEO TIERRA AL TUCSON, AZ 85715-3122	Name of Employer 049382751 LUCENT TECHNOLOGIES	Date (month, day, year) 5/17/00	Amount of Each Receipt This Period \$50.00
	Occupation ASR Aggregate Year-to-Date \$ 220.00	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

B. Full Name, Mailing Address and ZIP Code KOCH, JAYNE R 4909 W JOSHUA BLVD APT 10 CHANDLER, AZ 85226-6018	Name of Employer 066389588 U S WEST COMM	Date (month, day, year) 5/1/00	Amount of Each Receipt This Period \$40.00
	Occupation CREDIT CONSULTANT Aggregate Year-to-Date \$ 200.00	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

C. Full Name, Mailing Address and ZIP Code CONNOLLY, THOMAS J 30 RIO VISTA DR ALLENDALE, NJ 07401-1624	Name of Employer 077364542 NEW YORK TEL CO	Date (month, day, year) 5/4/00	Amount of Each Receipt This Period \$240.50
	Occupation FIELD TECHNICIAN Aggregate Year-to-Date \$ 243.00	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

D. Full Name, Mailing Address and ZIP Code MALY, RALPH V 12101 WINONA DRIVE LAKERIDGE VA 22192	Name of Employer 078406068 CWA	Date (month, day, year) 5/19/00	Amount of Each Receipt This Period \$37.30
	Occupation CWA REP Aggregate Year-to-Date \$ 205.15	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

E. Full Name, Mailing Address and ZIP Code MANCINO, LAWRENCE 32 LENZIE STREET STATEN NY 10312	Name of Employer 083288385 CWA	Date (month, day, year) 5/19/00	Amount of Each Receipt This Period \$44.86
	Occupation CWA VICE PRESIDENT Aggregate Year-to-Date \$ 247.36	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

F. Full Name, Mailing Address and ZIP Code CONNOLLY, JOSEPH 275 7TH AVE 17TH FLR NEW YORK, NY 10001	Name of Employer 087327137 CWA LOCAL 1101	Date (month, day, year) 5/19/00	Amount of Each Receipt This Period \$240.00
	Occupation PRESIDENT Aggregate Year-to-Date \$ 240.00	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

G. Full Name, Mailing Address and ZIP Code LORETTO, DONALD 7342 EAST EDEN ROAD EDEN, NY 14057-0000	Name of Employer 091403150 NEW YORK TEL CO	Date (month, day, year) 5/4/00	Amount of Each Receipt This Period \$35.00
	Occupation CENTRAL OFFICE TECHN Aggregate Year-to-Date \$ 210.00	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	

SUBTOTAL of Receipts This Page (optional) 687.66

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE **1** OF **1**
FOR LINE NUMBER **1(A) (1)**

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NAME OF COMMITTEE (in Full) **Communications Workers of America COPE PCC**

A. Full Name, Mailing Address and ZIP Code CANTERINO, RONALD 1977 EAST 29 STREET BROOKLYN, NY 11229-2534 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer 099442498 NEW YORK TEL. CO. Occupation FIELD TECHNICIAN Aggregate Year-to-Date > \$ 207.50	Date (month, day, year) 5/14/00	Amount of Each Receipt This Period \$40.00
B. Full Name, Mailing Address and ZIP Code MOFFETT, KENNETH E 10809 PLEASANT ACRES DR ADELPHI, MD 20783 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer 103242467 NABET Occupation ASST. TO PRES. Aggregate Year-to-Date > \$ 202.45	Date (month, day, year) 5/19/00	Amount of Each Receipt This Period \$37.03
C. Full Name, Mailing Address and ZIP Code BARR, MORTON 2737 DEVONSHIR PL NW WASHINGTON DC 20008 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer 111182343 CWA Occupation PRESIDENT Aggregate Year-to-Date > \$ 326.02	Date (month, day, year) 5/19/00	Amount of Each Receipt This Period \$57.68
D. Full Name, Mailing Address and ZIP Code MCCAMPHELL, E. JAMES 42 BRIARWOOD AVE. MIDDLETOWN, RI 02842-0000 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer 134342313 NYNEX INFOR RESORCE Occupation AD. ACCT REPRESENTATI Aggregate Year-to-Date > \$ 450.00	Date (month, day, year) 5/14/00	Amount of Each Receipt This Period \$30.00
E. Full Name, Mailing Address and ZIP Code HERRERA, YVETTE 3213 OLIVER STREET WASHINGTON DC 20015 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer 139350571 CWA Occupation ADMIN. ASST. TO VP. Aggregate Year-to-Date > \$ 206.36	Date (month, day, year) 5/19/00	Amount of Each Receipt This Period \$37.52
F. Full Name, Mailing Address and ZIP Code RICE, DON 45 D PHELPS AVE NEW BRUNSWICK NJ 08901 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer 140400194 CWA LOCAL 1082 Occupation LOCAL OFFICER Aggregate Year-to-Date > \$ 329.15	Date (month, day, year) 5/19/00	Amount of Each Receipt This Period \$61.06
G. Full Name, Mailing Address and ZIP Code CLARK, JOHN S. 285 HICKORY AVE BERGENFIELD, NJ 07621 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer 140409016 CWA/NABET Occupation CWA/NABET/VP Aggregate Year-to-Date > \$ 247.11	Date (month, day, year) 5/19/00	Amount of Each Receipt This Period \$44.86

SUBTOTAL of Receipts This Page (optional)

308.15

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate sheets (468) for each category of the Detailed Summary Page

PAGES **1** OF **1**
FOR LINE NUMBER **1 (A) (1)**

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NAME OF COMMITTEE (in Full) Communications Workers of America COPE PCC

A. Full Name, Mailing Address and ZIP Code FRANKOWSKI, PAMELA-A APT. 7 88 WALTHAM ST BOSTON, MA 02118-3630	Name of Employer 148545706 NYNEX INFOR RESORCE	Date (month, day, year) 5/4/00	Amount of Each Receipt This Period \$30.00
	Occupation AD ACCT REPRESENTATI	Aggregate Year-to-Date \$ 450.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

B. Full Name, Mailing Address and ZIP Code SUNKETT, BROOKS W. 12506 SIR WALTER DR GLENDALE MD 20769	Name of Employer 152363902 CWA	Date (month, day, year) 5/19/00	Amount of Each Receipt This Period \$44.86
	Occupation VICE PRES	Aggregate Year-to-Date \$ 246.73	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

C. Full Name, Mailing Address and ZIP Code MURPHY, CHARLES APT 5A 41 BROOKSIDE AVE SOMERVILLE, NJ 08876-5611	Name of Employer 157424885 AT&T COMMUNICATIONS	Date (month, day, year) 5/17/00	Amount of Each Receipt This Period \$100.00
	Occupation SR. RECORDS CLERK	Aggregate Year-to-Date \$ 440.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

D. Full Name, Mailing Address and ZIP Code COHEN, LAWRENCE R. OLD RIVER RD PO BOX FRENCHTOWN NJ 08825	Name of Employer 166389333 CWA	Date (month, day, year) 5/19/00	Amount of Each Receipt This Period \$47.54
	Occupation EXEC VICE PRES	Aggregate Year-to-Date \$ 262.04	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

E. Full Name, Mailing Address and ZIP Code FODEV, LINDA 14041 SADDLEVIEW DRIVE GAITHERBURG, MD 20878	Name of Employer 166484665 CWA	Date (month, day, year) 5/19/00	Amount of Each Receipt This Period \$44.86
	Occupation VICE PRESIDENT	Aggregate Year-to-Date \$ 246.73	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

F. Full Name, Mailing Address and ZIP Code EDWARDS, SCOTT 511 E LLOYD ST APT 3 EBENSBURG, PA 15931-2055	Name of Employer 176667412 AT&T COMMUNICATIONS	Date (month, day, year) 5/17/00	Amount of Each Receipt This Period \$45.75
	Occupation 7TH REQUEST	Aggregate Year-to-Date \$ 201.30	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

G. Full Name, Mailing Address and ZIP Code SHORT, JAMES J. 7 SWARTHMORE AVENUE STRATFORD NJ 08084	Name of Employer 183421579 CWA	Date (month, day, year) 5/19/00	Amount of Each Receipt This Period \$37.30
	Occupation CWA REP.	Aggregate Year-to-Date \$ 205.15	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) 350.31

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
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NAME OF COMMITTEE (in Full)
Communications Workers of America COPE PCC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MAISANO, VINCENT J. 1012 PUTNAM BLVD FL WALLINGFORD PA 19086 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	194323743 CWA Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 246.73	5/19/00	\$44.86
LEAMAN, JAMES R. 9616 HASTINGS MILL DRIVE GLEN ALLEN, VA 23060 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	214580803 AT&T Occupation COMM-TECH Aggregate Year-to-Date > \$ 390.00	5/17/00	\$390.00
BOARMAN, WILLIAM J. 6150 TOWER BANK ROAD SEVERNA PARK MD 21146 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	219489530 CWA Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 246.73	5/19/00	\$44.86
SCOTT, JEFFREY 50 TRENTON AVE FRENCHTOWN, NJ 08825 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	222523221 CWA LOCAL 1034 Occupation SR. STAFF REP. Aggregate Year-to-Date > \$ 200.00	5/19/00	\$70.00
BRACKENS, ELLEEN M. 2715 HOLLY ST ALEXANDRIA, VA 22305-1840 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	224585399 CWA Occupation ASST. TO SECY-TRES. Aggregate Year-to-Date > \$ 223.45	5/19/00	\$42.01
WHITLEY, MICHAEL 1599 EARLY ST SANDSTON, VA 23150 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	226450623 BELL ATLNTC-VA Occupation CONSULTANT Aggregate Year-to-Date > \$ 200.00	5/16/00	\$40.00
MILLER, T. G. 8661 MADERA CT MANASSAS, VA 22110 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	231581443 GENERAL TEL VA Occupation SERVICE-CTR-TESTER Aggregate Year-to-Date > \$ 240.00	5/7/00	\$40.00

SUBTOTAL of Receipts This Page (optional)

671.73

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 of 1 OF 1
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NAME OF COMMITTEE (If Full)
Communications Workers of America COPE PCC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SCANLON, PATRICK M. 501 3RD ST NW WASHINGTON, D. C. 20001 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	233626859 C.W.A. Occupation ATTORNEY Aggregate Year-to-Date \$ 290.93	5/19/00	\$53.10
KELLY, CATHY 148 WATSON BRYAN, TX-77801 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	233944131 GEN TEL CO SW TEXAS Occupation LOCAL OFFICER Aggregate Year-to-Date \$ 210.00	5/4/00	\$30.00
BAILEY, SANDRA 621 Melrose Drive CHARLESTON, WV 25302 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	234134832 BELL ATLAN-W.VA Occupation CONSULTANT Aggregate Year-to-Date \$ 200.00	5/12/00	\$40.00
THOMAS, DAVID E 153 BRIARCLIFF CIR LYNCHBURG, VA 24502-3601 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	235623048 AT&T COMMUNICATIONS Occupation COMM. TECH. Aggregate Year-to-Date \$ 220.00	5/17/00	\$50.00
CARR, REBECCA J 7715 AMHERST DR MANASSAS, VA 20111-4135 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	236848839 AT&T COMMUNICATIONS Occupation SPEC. BILLING CLERK Aggregate Year-to-Date \$ 220.00	5/17/00	\$50.00
WEAVER, WALLACE A 6905 HICKORY DR RALEIGH NC 27603 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	242720285 CWA Occupation GWA-REP. Aggregate Year-to-Date \$ 200.00	5/19/00	\$40.00
GURGANUS, JASPER J 201 KNIGHT PL JACKSONVILLE NC 28540 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	242766451 CWA Occupation GWA-REP Aggregate Year-to-Date \$ 200.00	5/19/00	\$40.00

SUBTOTAL of Receipts This Page (optional) 303.10

TOTAL This Period (Just page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 1(A) (1)

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NAME OF COMMITTEE (In Full) **Communications Workers of America - COPE-PCC**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
SMITH, JAMES E. 5562 CIRCLESTONE LNE STONE MOUNTAIN GA 30088	248645048 CWA	5/19/00	\$44.86
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ADMIN. ASST. TO VP	Aggregate Year-to-Date > \$ 246.73	
GIBBONS, ELLA M. PO BOX 311590 ATLANTA, GA 31131-1590	260192691 AT&T COMMUNICATIONS	5/17/00	\$49.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SR DATA PROC CLERK	Aggregate Year-to-Date > \$ 215.60	
GIBSON, CONNIE F. 4830 SW 163 AVE FT LAUDERDALE, FL 33331-1	262665526 BAPCO	5/7/00	\$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation W210	Aggregate Year-to-Date > \$ 200.00	
Kane, William M. 1411 S 15TH ST PALATKA, FL 32177-5612	263661820 SO BELL/BELSOUTH SER	5/12/00	\$40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation S/T	Aggregate Year-to-Date > \$ 200.00	
IRVINE, JAMES E. 37 E VALLEY BROOK RD LONG VALLEY NJ 07853	272348202 CWA	5/19/00	\$44.86
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VICE PRESIDENT	Aggregate Year-to-Date > \$ 246.73	
COSGROVE, JAMES 38366 BEACHVIEW RD WILLOUGHBY, OH 44094	287583687 CWA LOCAL 4340	5/24/00	\$140.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation LOCAL OFFICER	Aggregate Year-to-Date > \$ 230.00	
PHILLIPS, EDWIN D. 347 HICKORY LN PAINESVILLE OH 44077	288361832 OHIO BELL TEL CO	5/24/00	\$105.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation TELEPHONE INSTALLER	Aggregate Year-to-Date > \$ 205.00	

SUBTOTAL of Receipts This Page (optional)

463.72

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
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NAME OF COMMITTEE (in Full)

Communications Workers of America

COPE PCC

A. Full Name, Mailing Address and ZIP Code

KIDWELL, MARGARET P.
729 ELBERON APT 2
CINCINNATI, OH 45205-2303

Name of Employer

288382430
CIN. SUB. & CTZNS. BELL

Date (month, day, year)

5/1/00

Amount of Each Receipt This Period

\$40.00

Receipt For: Primary General
 Other (specify):

Occupation

SR. SALES REP.

Aggregate Year-to-Date

\$ 220.00

B. Full Name, Mailing Address and ZIP Code

EASTERLING, BARBARA
6101 EDSALL RD 612
ALEXANDRIA VA 22304

Name of Employer

289280774
CWA

Date (month, day, year)

5/19/00

Amount of Each Receipt This Period

\$83.32

Receipt For: Primary General
 Other (specify):

Occupation

SECY. TREAS.

Aggregate Year-to-Date

\$ 410.67

C. Full Name, Mailing Address and ZIP Code

RECHENBACH, JEFFREY
22711 BRISCOE DR RM 400
ROCKY RIVER OH 44116

Name of Employer

289341303
CWA

Date (month, day, year)

5/19/00

Amount of Each Receipt This Period

\$89.72

Receipt For: Primary General
 Other (specify):

Occupation

ADMIN. ASST. TO VP.

Aggregate Year-to-Date

\$ 496.25

D. Full Name, Mailing Address and ZIP Code

WALSH, HUGH L.
1216 OLD MILL LANE
STE 154
ELK GROVE VLLGE IL 60007

Name of Employer

292448758
CWA

Date (month, day, year)

5/19/00

Amount of Each Receipt This Period

\$43.52

Receipt For: Primary General
 Other (specify):

Occupation

ADMIN. ASST. TO VP.

Aggregate Year-to-Date

\$ 299.36

E. Full Name, Mailing Address and ZIP Code

FITCH, FRANKIE H.
APT K-4
4256 ROSWELL RD
ATLANTA, GA 30342-3734

Name of Employer

299587989
AT&T COMMUNICATIONS

Date (month, day, year)

5/17/00

Amount of Each Receipt This Period

\$75.00

Receipt For: Primary General
 Other (specify):

Occupation

REPORTS CLERK

Aggregate Year-to-Date

\$ 285.00

F. Full Name, Mailing Address and ZIP Code

LEBEL, JUDITH A.
2106 FAIRWAY VILLAS LN S
ATLANTIC BCH, FL 32233-44

Name of Employer

301389373
BAPCO

Date (month, day, year)

5/28/00

Amount of Each Receipt This Period

\$40.00

Receipt For: Primary General
 Other (specify):

Occupation

WFO

Aggregate Year-to-Date

\$ 200.00

G. Full Name, Mailing Address and ZIP Code

WOODS, E D
113 N REMINGTON
COURTAPT B
MISHAWAKA IN 46545

Name of Employer

308549399
AMERITECH

Date (month, day, year)

5/16/00

Amount of Each Receipt This Period

\$80.00

Receipt For: Primary General
 Other (specify):

Occupation

CABLE SPLICING TECH.

Aggregate Year-to-Date

\$ 200.00

SUBTOTAL of Receipts This Page (optional)

451.56

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
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NAME OF COMMITTEE (in Full) **Communications Workers of America** GOPE PCC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MITCHELL, KAREN J. PO BOX 729 NEW ALBANY, IN 47151-0729 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	309604690 SO BELL/BELSOUTH SER Occupation: SERVICE REP Aggregate Year-to-Date: \$ 500.00	5/12/00	\$100.00
BRISLEN, R E RR1 BOX 296 TRAFALGAR, IN 46181 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	310603509 AMERITECH Occupation: TESTING TECH. Aggregate Year-to-Date: \$ 200.00	5/16/00	\$80.00
COBB, TONI FAITH 2600 HILLCREST TERRACE EVANSVILLE, IN 47712 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	315548428 AMERITECH Occupation: CUSTOMER ADVOCATE Aggregate Year-to-Date: \$ 200.00	5/16/00	\$80.00
KENNEDY, RICHARD C 7702 ISLAND CREEK CT ALEXANDRIA, VA 22315 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	338588517 CWA Occupation: ADM ASST TO PRES Aggregate Year-to-Date: \$ 205.15	5/19/00	\$37.30
HORN, SIDNEY E 661 MARIAN DR DUPO, IL 62239-1472 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	350869276 AT&T COMMUNICATIONS Occupation: JOB TITLE REQUESTED Aggregate Year-to-Date: \$ 220.00	5/17/00	\$50.00
GARAGAN, ROBERT HC 62 BOX 50390 PINETOP AZ 85935 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	365523754 CITIZENS COMM. CO. Occupation: CUSTOMER SERV TECH Aggregate Year-to-Date: \$ 210.00	5/10/00	\$30.00
NESSMAN, DOANE W 1110 W 4 AVE OSHKOSH, WI 54901 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	388460855 AMERITECH Occupation: INFO. OPERATOR Aggregate Year-to-Date: \$ 220.00	5/16/00	\$80.00

SUBTOTAL of Receipts This Page (optional) **457.30**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full) **Communications Workers of America - CORE PCC**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
COURCHANE, JAMES P. 191 HEDER DR BOX 354 SLINGER WI 53086	389526950 AMERITECH	5/24/00	\$240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation JOB TITLE REQUESTED	Aggregate Year-to-Date \$	240.00
KRESSIN, ELLYN M. 1435 N 116TH ST MILWAUKEE WI 53226	397444008 AMERITECH	5/16/00	\$80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CUST ADVOCATE	Aggregate Year-to-Date \$	200.00
SOUDER, GERALD W APT 319 8201 16TH ST SILVER SPRING, MD 20910-3	403629254 AT&T COMMUNICATIONS	5/17/00	\$27.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation COMM. TECH.	Aggregate Year-to-Date \$	231.00
BROWN, STEVEN G PO BOX 675 SMITHSBURG, MD 21783-0675	405848758 AT&T COMMUNICATIONS	5/17/00	\$55.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation DATA PROCESSING-ASSO	Aggregate Year-to-Date \$	242.00
LIVINGSTONE, H E 4621 CEDARBROOK DR CONYERS, GA 30094-4503	413840886 AT&T COMMUNICATIONS	5/17/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation COMMUNICATION TECH.	Aggregate Year-to-Date \$	220.00
DITMER, DORCAS 3874 START 721 LAURA OH 45337	414067111 CWA	5/19/00	\$37.30
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CWA REP.	Aggregate Year-to-Date \$	205.15
MOSES, THOMAS O 3809 SPICEWOOD STE N 709 AUSTIN TX 78759	434388989 CWA	5/19/00	\$44.86
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VICE PRESIDENT	Aggregate Year-to-Date \$	252.66

SUBTOTAL of Receipts This Page (optional) **534.16**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 4
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NAME OF COMMITTEE (In Full) **Communications Workers of America - COPE-PCC**

A. Full Name, Mailing Address and ZIP Code SAVANT, NOAH V 25 PINEHILL COURT STE 204 COVINGTON GA 30209 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer 438649339 CWA Occupation ASST. TO VICE PRES. Aggregate Year-to-Date > \$ 205.15	Date (month, day, year) 5/19/00	Amount of Each Receipt this Period \$37.30
B. Full Name, Mailing Address and ZIP Code Paige, LARRY M 1911 ANDREWS ST ALEXANDRIA, LA 71301-3704 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer 439869327 SO BELL/BELSOUTH SER JOB TITLE REQUESTED Aggregate Year-to-Date > \$ 290.00	Date (month, day, year) 5/12/00	Amount of Each Receipt this Period \$40.00
C. Full Name, Mailing Address and ZIP Code NELSON, J. A RR 1 BOX 1403 BARNSDALL OK 74002 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer 440582387 GEN TEL CO SW TEXAS Occupation CUSTOMER-ZONE-TECH. Aggregate Year-to-Date > \$ 240.00	Date (month, day, year) 5/7/00	Amount of Each Receipt this Period \$30.00
D. Full Name, Mailing Address and ZIP Code DENNIS, EVELYN M 28-3 REVENWIND RD HOUSTON, TX 77067-2723 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer 450908019 AT&T COMMUNICATIONS Occupation SERV ASST/TRAFFIC Aggregate Year-to-Date > \$ 220.00	Date (month, day, year) 5/17/00	Amount of Each Receipt this Period \$60.00
E. Full Name, Mailing Address and ZIP Code BAXTER, L. K 5540 ADAMS THE COLONY, TX 75056 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer 451780195 GEN TEL CO SW TEXAS Occupation CUSTOMER SERVICE Aggregate Year-to-Date > \$ 180.00	Date (month, day, year) 5/7/00	Amount of Each Receipt this Period \$50.00
F. Full Name, Mailing Address and ZIP Code MILBURN, CLARENCE A 13946 CANTWELL DRIVE STE 236 HOUSTON, TX 77014 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer 451820053 CWA Occupation CWA-REP Aggregate Year-to-Date > \$ 208.99	Date (month, day, year) 5/19/00	Amount of Each Receipt this Period \$41.08
G. Full Name, Mailing Address and ZIP Code GARCIA, M I P O BOX 62301 SAN ANGELO, TX 76906-2301 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer 450928425 GEN TEL CO SW TEXAS Occupation BUS-ACCT-REP Aggregate Year-to-Date > \$ 210.00	Date (month, day, year) 5/7/00	Amount of Each Receipt this Period \$30.00

SUBTOTAL of Receipts This Page (optional)	288.38
TOTAL This Period (last page file line number only)	288.38

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full) **Communications Workers of America - COPE - PCC**

A. Full Name, Mailing Address and ZIP Code WALLEN, M. J. 305 MIDGET SAN ANGELO, TX 76901-3878	Name of Employer 456928621 GEN TEL CO SW TEXAS	Date (month, day, year) 5/4/00	Amount of Each Receipt This Period \$30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation 7TH REQUEST	Aggregate Year-to-Date \$ 210.00	

B. Full Name, Mailing Address and ZIP Code FREDERICK, D. C. 1550 BOZMAN RD UNIT WYLIE, TX 75098	Name of Employer 459150222 GEN TEL CO SW TEXAS	Date (month, day, year) 5/4/00	Amount of Each Receipt This Period \$30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation 7TH REQUEST	Aggregate Year-to-Date \$ 240.00	

C. Full Name, Mailing Address and ZIP Code HINOJOSA, M. RT 1 BX 203D AUBREY TX 76227	Name of Employer 463723845 GEN TEL CO SW TEXAS	Date (month, day, year) 5/4/00	Amount of Each Receipt This Period \$30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation C7 II	Aggregate Year-to-Date \$ 240.00	

D. Full Name, Mailing Address and ZIP Code MAY, W. S. 2201 LEONARD RD TRLR BRYAN, TX 77803	Name of Employer 464947493 GEN TEL CO SW TEXAS	Date (month, day, year) 5/4/00	Amount of Each Receipt This Period \$30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation COMM TECH	Aggregate Year-to-Date \$ 210.00	

E. Full Name, Mailing Address and ZIP Code LONZER, BERNARD 10302 CONOVER DR WHEATON, MD 20902	Name of Employer 469728257 TNG	Date (month, day, year) 5/19/00	Amount of Each Receipt This Period \$37.30
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SEC/TREASURER	Aggregate Year-to-Date \$ 285.15	

F. Full Name, Mailing Address and ZIP Code MANSON, ELISE L 3517 4TH AVE SOUTH MINNEAPOLIS, MN 55408-452	Name of Employer 473718459 AT&T COMMUNICATIONS	Date (month, day, year) 5/17/00	Amount of Each Receipt This Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation 8TH REQUEST	Aggregate Year-to-Date \$ 210.00	

G. Full Name, Mailing Address and ZIP Code THOMPSON, JOHN R 5595 QUINLAN COURT PARKER CO 80134	Name of Employer 482182844 CWA	Date (month, day, year) 5/19/00	Amount of Each Receipt This Period \$44.86
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ADMIN. ASST. TO VP	Aggregate Year-to-Date \$ 234.17	

SUBTOTAL of Receipts This Page (optional)	252.16
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGES OF
1 (A) 1 (A)
FORM LINE NUMBER

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NAME OF COMMITTEE (In Full) Communications Workers of America CORE PCC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
THOMAS, B. C. APT 2526 1721 E FRANKFORD CARROLLTON, TX 75007	496825817 GEN TEL CO SW TEXAS	5/4/00	\$30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation 2ND REQUEST	Aggregate Year-to-Date > \$ 240.00	
KOHL, GEORGE H. 7000 WESTMORELAND AVE TAKOMA PARK, MD 20912	500503823 CWA	5/19/00	\$41.92
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SR EXEC DIR-RESEARCH	Aggregate Year-to-Date > \$ 223.36	
ROGGENKAMP, V. G. RT 2 BOX 372 BALLINGER, TX 76821	513425968 GEN TEL CO SW TEXAS	5/4/00	\$30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation 3RD REQUEST	Aggregate Year-to-Date > \$ 210.00	
HILL, ANN L. 15460 LAWNDALE LANE STE 245 NORTH DAYTON MN 55327	540722686 CWA	5/19/00	\$39.68
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CWA REP.	Aggregate Year-to-Date > \$ 217.37	
JOHNSON, R. 605 PARK BLVD #139 GRAPEVINE, TX 76051	543867737 GEN TEL CO SW TEXAS	5/4/00	\$30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation M/C TECH	Aggregate Year-to-Date > \$ 240.00	
LEPHARDT, BARBARA J. 10108 EBENSHIRE CT OAKTON VA 22124	550805475 CWA	5/19/00	\$37.30
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ASST TO VP	Aggregate Year-to-Date > \$ 205.15	
BLACKBURN, DAVID 6340 N BTH AVE PHOENIX, AZ 85013-1322	553780325 AT&T COMMUNICATIONS	5/17/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation COMM. TECH.	Aggregate Year-to-Date > \$ 210.00	

SUBTOTAL of Receipts This Page (optional)

258.90

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

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

PAGE 1 OF 1
 FOR LINE NUMBER 1

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NAME OF COMMITTEE (in Full) **Communications Workers of America COPE PCC**

A. Full Name, Mailing Address and ZIP Code BEAUMONT, DINA G. 6006 HARDWICK PLACE FALLS CHURCH VA 22041 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer 556324846 CWA Occupation EXEC ASST TO PRES. Aggregate Year-to-Date > \$ 264.26	Date (month, day, year) 5/19/00	Amount of Each Receipt this Period \$44.86
B. Full Name, Mailing Address and ZIP Code QUIRK, WILLIAM E. 3521 CERRITOS STREET LONG BEACH CA 90807 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer 556787337 CWA Occupation CWA REP. Aggregate Year-to-Date > \$ 205.47	Date (month, day, year) 5/19/00	Amount of Each Receipt this Period \$37.30
C. Full Name, Mailing Address and ZIP Code BARR, JACQUELYN A. 1328 BEGONIA DR. D FALLON, MO 63366-4311 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer 563290303 AT&T COMMUNICATIONS Occupation CSSA Aggregate Year-to-Date > \$ 220.00	Date (month, day, year) 5/17/00	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and ZIP Code COX, NADINE M. 7370 N WARREN AVE FRESNO, CA 93711 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer 570504338 CWA LOCAL 9408 Occupation LOCAL OFFICER Aggregate Year-to-Date > \$ 267.00	Date (month, day, year) 5/7/00	Amount of Each Receipt this Period \$20.00
E. Full Name, Mailing Address and ZIP Code EVANS, LOUISE 8030 E LAKESIDE 12202 TUCSON, AZ 85730-0000 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer 970061223 LUCCENT TECHNOLOGIES Occupation TECH SCHEDULER Aggregate Year-to-Date > \$ 286.00	Date (month, day, year) 5/17/00	Amount of Each Receipt this Period \$55.00
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) 217.16
 TOTAL This Period (last page this line number only) 5,854.39

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

CWA-COPE POC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SUNTRUST BANK N.A. WASHINGTON, DC	INTEREST EARNED ON MONEY MARKET ACCOUNT	05/31/00	\$2,574.25
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) \$2,574.25

TOTAL This Period (last page this line number only) \$2,574.25

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 3
 LINE NUMBER
 23

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 stating the name and address of any political committee, or a similar contribution from such committee.

NAME OF COMMITTEE (in Full)

CMA - COPE PCC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Baesler for Congress (Scotty) P.O. Box 1807 Lexington, KY 40507	US Congress KY 006 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/01/00 # 10379	4,500.00
SAM NEILL FOR CONGRESS P.O. BOX 2088 HENDERSONVILLE, NC 28973	US Congress NC 011 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/01/00 # 10382	1,000.00
GEJDENSON RE-ELECTION COMMITTEE P.O. BOX 1818 BOZRAH, CT 06334	US Congress CT 002 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/11/00 # 10382	1,000.00
FRIENDS OF RONNIE SHOWS P.O. BOX 234 BASSFIELD, MS 39421	US Congress MS 004 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/11/00 # 10384	5,000.00
MOORE FOR CONGRESS (DENNIS) P.O. BOX 14681 SHAWNEE MISSION, KS 66285	US Congress KS 003 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/11/00 # 10385	5,000.00
Baesler for Congress (Scotty) P.O. Box 1807 Lexington, KY 40507	US Congress KY 006 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/11/00 # 10387	5,000.00
TEXAS DEMOCRATIC PARTY-FED ACC P.O. BOX 236 AUSTIN, TX 78757	CONTRIBUTION - FEDERAL ACCOUNT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	5/16/00 # 10389	5,000.00
MENDOZA FOR CONGRESS, INC P.O. BOX 848 UNION CITY, NJ 07087	US Congress NJ 013 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/16/00 # 10390	1,000.00
JIM TURNER FOR CONGRESS COMM 205 C Street S.E. Washington, DC 20003	US Congress TX 002 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/16/00 # 10391	1,000.00

TOTAL of Disbursements This Page (optional)

TOTAL This Period (for page title line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 3
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

CWA - COPE PCC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRIENDS OF MAJOR OWENS P.O. BOX 2265 BROOKLYN, NY 11202	US Congress NY 011 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/16/00 # 10392	4,500.00
B. Full Name, Mailing Address and ZIP Code CUMMINGS FOR CONGRESS (ELIJAH) 7003 DOGWOOD ROAD BALTIMORE, MD 21244	US Congress MD 007 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/16/00 # 10393	1,000.00
C. Full Name, Mailing Address and ZIP Code PRICE FOR CONGRESS (DAVID) PO BOX 1986 RALEIGH, NC 27602	US Congress NC 004 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/16/00 # 10394	5,000.00
D. Full Name, Mailing Address and ZIP Code BRIAN ROY FOR CONGRESS P.O. BOX 685 BENTON, KY 42025	US Congress KY 001 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/19/00 # 10398	2,000.00
E. Full Name, Mailing Address and ZIP Code WYNN FOR CONGRESS P.O. BOX 5323 CAPITOL HEIGHTS, MD 20791	US Congress MD 004 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/19/00 # 10399	1,000.00
F. Full Name, Mailing Address and ZIP Code OKLAHOMA SENATE STATE DEMOCRATIC PAC - FED ACCOUNT P.O. BOX 18552 OKLAHOMA CITY, OK 73154	PAC Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	5/24/00 # 10400	5,000.00
G. Full Name, Mailing Address and ZIP Code JORDAN FOR CONGRESS COMM (E) P.O. BOX 21151 LOUISVILLE, KY 40221	US Congress KY 003 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/24/00 # 10401	2,000.00
H. Full Name, Mailing Address and ZIP Code COMM TO RE-ELECT CHRIS SMITH P.O. BOX 3184 MERCERVILLE, NJ 08619	US Congress NJ 004 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/24/00 # 10402	1,000.00
I. Full Name, Mailing Address and ZIP Code KAREN MCCARTHY FOR CONGRESS 1217 WEST 58TH KANSAS CITY, MO 64113	US Congress MO 005 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/24/00 # 10404	1,000.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period for page this line number only!

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE	OF
3	3
FOR LINE NUMBER	
23	

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NAME OF COMMITTEE (in Full)

CWA - COPE PCC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
LOY SNEARY CAMPAIGN P.O. BOX 187 BAY CITY, TX 77404	US Congress TX 014 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/24/00 # 10405	2,500.00
B. Full Name, Mailing Address and ZIP Code PAYNE FOR CONGRESS (DONALD) P.O. BOX 2406 NEWARK, NJ 07114	US Congress NJ 010 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/25/00 # 10408	1,300.00
C. Full Name, Mailing Address and ZIP Code FEINSTEIN 2000 (DIANE) 10350 Santa Monica #250 LOS ANGELES, CA 90025	US SENATE - CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/11/00 # 10365	2,500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (for page this line number only)

57,300.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 28

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NAME OF COMMITTEE (In Full)

CWA-COPE PCC

A. Full Name, Mailing Address and ZIP Code COMMUNICATIONS WORKERS OF AMERICA 501 THIRD STREET N.W, WASHINGTON, DC 20001	Purpose of Disbursement *See Debit Memo Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/16/00 # 10388	Amount of Each Disbursement This Period \$ 6,996.35
B. Full Name, Mailing Address and ZIP Code *CWA dues was mistakenly deposited into the CWA-COPE PCC account. As soon as error was discovered the fund were transferred to CWA general fund	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$6,996.35

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

CWA-COPE PCC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CWA DISTRICT 7 PEC 8085 E PRENTICE AVENUE ENGLEWOOD, CO 80111	STATE/LOCAL RACES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/01/00 # 10378	\$ 1,000.00
B. Full Name, Mailing Address and ZIP Code CWA DISTRICT 1 PAC 80 PINE STREET 37TH FLOOR NEW YORK, NY 10005	STATE/LOCAL RACES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/03/00 # 10380	10,000.00
C. Full Name, Mailing Address and ZIP Code CWA DISTRICT 7 PEC 8085 E PRNTICE AVENUE ENGLEWOOD, CO 80111	STATE/LOCAL RACES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/16/00 # 10397	100.00
D. Full Name, Mailing Address and ZIP Code CWA DISTRICT 2 PEC - MARYLAND 8611 SECOND AVENUE SILVER SPRING, MD 20910	STATE/LOCAL RACES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/25/00 # 10406	3,000.00
E. Full Name, Mailing Address and ZIP Code CWA DISTRICT 2 PEC 8611 SECOND AVENUE SILVER SPRING, MD 20910	STATE/LOCAL RACES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/25/00 # 10407	5,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

\$ 19,100.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED <i>6-20-02</i>
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>Jmw</i> PREPARER	<i>6-21-02</i> DATE PREPARED