

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 33 OF 402

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

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NAME OF COMMITTEE (In Full)

COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

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

A. BENNETT, WARREN, , ,

Mailing Address 50 CANTWELL DR.

City
MIDDLETOWN

State
DE

Zip Code
19709

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
VERIZON-BELL ATLANTIC DELAWARE

Occupation (for Individual)
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

07 / 29 / 2019

Transaction ID : C28682817

Amount of Each Receipt this Period

40.00

☐ Memo Item

* Payroll Deduction: \$10 Weekly

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

B. BENNETT III, HARVEY, , ,

Mailing Address 1917 WELLS CREEK RUN

City
AKRON

State
OH

Zip Code
44312-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AMERITECH

Occupation (for Individual)
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 05 / 2019

Transaction ID : C28664933

Amount of Each Receipt this Period

40.00

☐ Memo Item

* Payroll Deduction: \$40 Monthly

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

C. BENNINGFIELD, C T, , ,

Mailing Address 457 MEADOWHILL DR

City
BENBROOK

State
TX

Zip Code
76126-4016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SBC - SOUTH WESTERN BELL

Occupation (for Individual)
OPERATOR [D1-CWA06]

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

07 / 05 / 2019

Transaction ID : C28669796

Amount of Each Receipt this Period

40.00

☐ Memo Item

* Payroll Deduction: \$40 Monthly

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

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

120.00