

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

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

FOR LINE NUMBER: PAGE 208 OF 402

(check only one)

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

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NAME OF COMMITTEE (In Full)

**COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL CONTRIBUTIONS COMMITTEE**

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

**A. LEWIS, CHRISTOPHER, , ,**

Mailing Address 1500 GREENBRIAR

City  
MESQUITE

State  
TX

Zip Code  
75149-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SBC - SOUTH WESTERN BELL

Occupation (for Individual)

CUSTOMER SERVICES TE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 05 / 2019

**Transaction ID : C28669869**

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

**B. LIEBTAG, ADAM, , ,**

Mailing Address 21 5TH ST

City

FRENCHTOWN

State

NJ

Zip Code

08825-1149

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NEW JERSEY STATE EMPLOYEES

Occupation (for Individual)  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 11 / 2019

**Transaction ID : C28627071**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

**C. LINDIG II, LOREN, , ,**

Mailing Address 112 E RUSSELL AVE

City

WEST LAFAYETTE

State

OH

Zip Code

43845-1234

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AMERITECH

Occupation (for Individual)  
Customer Services Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 05 / 2019

**Transaction ID : C28665119**

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)..... ►

110.00