

REPORT OF RECEIPTS AND DISBURSEMENTS

RECEIVED
FEC MAIL ROOM

2000 OCT 28 A 8:57

For Other Than An Authorized Committee
(Summary Page)

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 multicandidate committee (see FEC FORM 1M)
CITY, STATE and ZIP CODE WASHINGTON, DC 20001	

4. TYPE OF REPORT

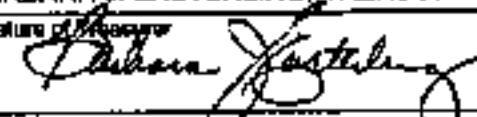
- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- Monthly Report Due On:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input 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 GENERAL
 (Type of Election)
 election on NOV 7, 2000 in the State of DC
- 30-Day Post-Election Report following the General Election
 on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COVERING PERIOD	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	10/01/00 through 10/18/00		
6. (a) Cash on Hand January 1, 19 2000			\$ 899,358.50
(b) Cash on Hand at Beginning of Reporting Period		\$ 977,709.79	
(c) Total Receipts (from Line 19)		\$ 83,495.84	\$ 1,271,420.44
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 1,071,205.63	\$ 2,270,778.94
7. Total Disbursements (from Line 30)		\$ 103,387.91	\$ 1302,959.22
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 967,817.72	\$ 967,817.72
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$	For further information contact: Federal Election Commission 888 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
 10/25/00

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

--	--	--	--	--	--	--	--	--	--

FEC FORM 3X
 (revised 8/93)

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

(revised 1/1/91)

NAME OF COMMITTEE CWA-COPS PCC		REPORT COVERING PERIOD FROM 10-1-90 TO 10-18-00	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees:			
1. Itemized (use Schedule A)	80.00	132,517.98	11(a)(1)
2. Unitemized	83,405.84	1,116,737.87	11(a)(2)
B. Total (add 1 and 2) >	83,495.84	1,249,255.85	11(a)(3)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a, b and c) >			11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	-0-	22,164.59	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	83,495.84	1,271,420.44	19
20. Total Federal Receipts (subtract line 16 from line 19) >	83,495.84	1,271,420.44	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4):			
1. Federal Share			21(a)(1)
2. Non-Federal Share			21(a)(2)
b. Other Federal Operating Expenditures	-0-	8,332.08	21(b)
c. Total Operating Expenditures (add a, b and c) >	-0-	8,332.08	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	58,500.00	997,210.32	23
24. Independent Expenditures (use Schedule E)	128.56	128.56	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (see Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions Tax:			
a. Individual/Persons Other Than Political Committees	539.00	7,899.35	28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)	-0-	6.25	28(c)
d. Total Contribution Refunds (add a, b and c) >	539.00	7,899.60	28(d)
29. Other Disbursements	48,220.35	289,588.88	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	103,387.91	1,302,959.22	30
31. Total Federal Disbursements (subtract line 21 a II from line 30) >	103,387.91	1,302,959.22	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)			32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from line 32)			34
35. Total Federal Operating Expenditures (add 21 a I and 21 b) >			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from line 35) >			37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE OF
FOR LINE NUMBER

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)
CWA COPE PCC

A. Full Name, Mailing Address and ZIP Code SEE ATTACHED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date > \$		
B. 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	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date > \$		
C. 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	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date > \$		
D. 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	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date > \$		
E. 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	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date > \$		
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	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date > \$		
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	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

Communications Workers of America - COPE PCC

DARKATSH, BEVERLY R. NEW JERSEY STATE EMP10/13/00 \$10.00
215 HEATHER DR
MOUNT LAUREL, NJ 08054
JOB TITLE REQUESTED
200.00

RICH, KATHLEEN SO BELL/BELSOUTH SER10/13/00 \$30.00
NE
9232 HIGHLAND HLS DR
LELAND, NC 28451-8326
SERV. REP.
270.00

COLBY, THOMAS E. LUCENT TECHNOLOGIES 10/13/00 \$20.00
3916 KALLORAMO DR
GREENSBORO, NC 27407
SYSTEM TECH
215.00

Overman, Carolyn H SO BELL/BELSOUTH SER10/13/00 \$30.00
1305 SHALIMAR DR
CONCORD, NC 28025-8108
JOB TITLE REQUESTED
200.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER 1a

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)

CNA-COPE POC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SBC-COMMUNICATIONS, INC ONE BELL CENTER - RM 2876 ST. LOUIS, MO 63101	Money Deposited into wrong Occupation	07/19/00	(539.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)	(539.00)
TOTAL This Period (last page this line number only)	(539.00)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

FREE OF FILING CHARGE
1 3

Any information copied from such reports and statements may not be sold or used by any person for any 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)
CWA - COPE PCC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
GEJDENSON RE-ELECTION COMMITTEE P.O. BOX 1818 BOZRAH, CT 06334	HOUSE CT 002 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/06/00 # 10612	1,000.00
LINDA W. CHAPIN FOR CONGRESS P.O. BOX 952 ORLANDO, FL 32802	HOUSE FL 008 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/03/00 # 10628	4,000.00
FRIENDS OF STEDEM 1240A EAST MAIN STREET BARTON, FL 33830	HOUSE FL 012 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/03/00 # 10629	2,500.00
TOM SULLIVAN FOR CONGRESS 10166 GOLF CLUB DRIVE JACKSONVILLE, FL 32256	HOUSE FL 004 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/03/00 # 10630	2,000.00
JEAN ELLIOTT BROWN FOR CONGRESS 4521 P.G.A. BLVD, PMB 209 PALM BRACH GARDENS, FL 33418	HOUSE FL 016 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/03/00 # 10631	2,500.00
KELLEHER FOR CONGRESS P.O. BOX 5404 BLOOMINGTON, IL 61702-5404	HOUSE IL 015 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/03/00 # 10632	1,000.00
MINGE FOR CONGRESS (DAVID) PO BOX 71 GRANITE FALLS, MN 56241	HOUSE MN 002 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/03/00 # 10633	2,000.00
FRIENDS OF DAN ROSENBERG 130 W SHIELDS AVENUE FRESNO, CA 93705	HOUSE CA 019 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/03/00 # 10634	1,500.00
BOB FILNER FOR CONGRESS PO BOX 127868 SAN DIEGO, CA 92112	HOUSE CA 050 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/03/00 # 10635	1,250.00

SUBTOTAL of Disbursements This Page (opt 3.00)

TOTAL This Period (for page with line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate subgrants for each category of the Detailed Summary Page

PAGE	2	OF	3
FOILING NUMBER			
23			

Any information stated from such Reports and Statements may not be sold or used by any person for any purpose of soliciting contributions or for commercial purposes, either disclosing the name and address of any political committee or as a result of contributions from such committees.

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
EAVILA FOR CONGRESS 4795 HOLT AVENUE MONTCLAIR, CA 91763	HOUSE CA 041 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/03/00 # 10636	1,500.00
BLUE DOG PAC 227 MASSACHUSETTS AVE NE #101 WASHINGTON, DC 20002	PAC Contributions Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	10/03/00 # 10640	1,000.00
FRIENDS OF ROSA DeLAURO 49 HUNTINGTON STREET NEW HAVEN, CT 06511	HOUSE CT 003 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/06/00 # 10641	1,000.00
PROGRESSIVE POLITICS NETWORK 535 SELBY AVENUE STK 1 ST PAUL, MN 55102	PAC Contributions Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	10/06/00 # 10643	5,000.00
TOM KEEFE FOR CONGRESS P.O. BOX 1484 SPOKANE, WA 79210	HOUSE WA 005 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/11/00 # 10644	5,000.00
ADAM SMITH FOR CONGRESS PORT OF TACOMA RD EAST ST 308 TACOMA, WA 98424	HOUSE WA 008 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/11/00 # 10645	1,000.00
BRIAN BAIRD FOR CONGRESS PO BOX 5016 VANCOUVER, WA 98668	HOUSE WA 003 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/11/00 # 10646	1,000.00
CUNNINGHAM FOR CONGRESS (GEO) P.O. BOX 12039 TUCSON, AZ 85775	HOUSE AZ 005 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/11/00 # 10647	5,000.00
NANCY PELOSI FOR CONGRESS 1 BUSH STREET 11TH FLOOR SAN FRANCISCO, CA 94104	HOUSE CA 008 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/12/00 # 10655	4,000.00

SUBTOTAL of Disbursements This Page (page 2 of 3)

TOTAL This Period for page (this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 3
 FOR LINE NUMBER 23

Any information copied from such Reports and Statements may not be sold or used by any person for any 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)
GWA - COPE PCC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
PAYNE FOR CONGRESS (DONALD) P.O. BOX 2406 NEWARK, NJ 07114	HOUSE NJ 010 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00 # 10655	3,500.00
STEVE ROTHMAN FOR CONGRESS, INC PO BOX 714 HACKENSACK, NJ 07602	HOUSE NJ 009 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00 # 10660	1,000.00
ELAINE BLOOM FOR CONGRESS 1922 TYLER STREET HOLLYWOOD, FL 33020	HOUSE/CONGRESS FL 022 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00 # 10662	2,500.00
BARCIA FOR CONGRESS PO BOX 775 BAY CITY, MI 46707	HOUSE MI 005 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00 # 10663	350.00
CHARLES A. GONZALEZ CONG. CAMP P.O. BOX 12612 SAN ANTONIO, TX 78212	HOUSE TX 020 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00 # 10664	2,500.00
BOGGETT FOR U.S. CONGRESS P.O. BOX 5843 AUSTIN, TX 78763	HOUSE TX 010 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00 # 10665	2,500.00
CIRO D. RODRIGUEZ FOR U.S. CONG P.O. BOX 14528 SAN ANTONIO, TX 78214	HOUSE TX 028 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00 # 10666	1,900.00
	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
	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 (print in full)

TOTAL This Period (for page this line number only)

56,500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate columns for each category of the Detailed Summary Page

PAGE	OF
1	1
FORM LINE NUMBER	
28	

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

CWA - CORE PCC

A. 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
SBC COMMUNICATIONS, INC. ONE BELL CENTER RM 2876 ST. LOUIS, MO 63101	REFUND - Money Deposited into Wrong Account	10/17/00 # 10658	539.00
B. 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
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 (copy to all)

TOTAL This Period (for page this line number only)

539.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE **1** OF **1**
 FILING NUMBER
29

Any information copied from such Reports and Statements may not be sold or used by any person for any 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)
CWA - COPE PCC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
PAME MOORE-MORROW 2858 N CROSS BRIDGE ROAD COLUMBIA, TN 38401	DELEGATE CONTRI- BUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	10/03/00 # 10637	1,604.75
LORENZO MADISON 5425 CLINTON BLVD #SKB JACKSON, MS 39209	DELEGATE CONTRI- BUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	10/03/00 # 10638	425.00
MARJORIE A. BUNCE 18433 56TH AVENUE CHIPPEWA FALLS, WI 54729	DELEGATE CONTRI- BUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	10/03/00 # 10639	1,294.89
GONZALA BARRIENTOS CAMP FUND PO BOX 12246 AUSTIN, TX 78711	STATE SENATE TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/11/00 # 10648	1,000.00
CWA ARIZONA STATE COUNCIL PAC 5818 N 7TH STREET #204 PHOENIX, AZ 85014-5811	STATE/LOC. RACKS AZ Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	10/11/00 # 10649	15,000.00
BOBBY G. SACUS P.O. BOX 2243 JACKSON, MS 39225	DELEGATE CONTRI- BUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	10/11/00 # 10650	1,124.30
ROGER H. MCCLAIN 600 MARIA SPRINGDALE, AR 72762	DELEGATE CONTRI- BUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	10/11/00 # 10651	1,051.44
BARBARA SIMS 230 GILLELAND DRIVE ATHENS, GA 30606	DELEGATE CONTRI- BUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	10/11/00 # 10652	1,050.15
DEBRA J. SNOW 1801 S.E. 37TH STREET TOPEKA, KS 66605	DELEGATE CONTRI- BUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	10/11/00 # 10653	1,498.45

SUBTOTAL of Disbursements This Page (see 11.01)

TOTAL This Period (see page 11.01 and this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE	OF
1	1
FORM LINE NUMBER	
29	

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, either then using the name and address of any political committee, or other organizations from such committees.

NAME OF COMMITTEE (in Full)
CWA - COPE FCC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MIKE HINOJOSA 5431 HIGHWAY 377 AUBREY, TX 76227	DELEGATE CONTRI- BUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	10/11/00 # 10654	845.50
SUSAN L. HALD 165 SUNRISE DRIVE KYLE, TX 78640	DELEGATE CONTRI- BUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	10/12/00 # 10656	1,525.86
CWA DIST. 2 PEC 8611 SECOND AVENUE SILVER SPRING, MD 20910	STATE/LOC RACES WV Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	10/17/00 # 10661	4,000.00
CWA DIST. 6 PEC 10820 SUNSET OFFICE DR 302 SUNSET HILLS, MO 63127	STATE/LOC RACES OK Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	10/17/00 # 10667	14,493.00
CWA DIST. 6 PEC 10820 SUNSET OFFICE DR 302 SUNSET HILLS, MO 63127	STATE/LOC RACES MO Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	10/17/00 # 10667	507.00
WYOMING STATE AFL-CIO PROJECT 2000 1021 WEST 23RD STREET CHEYENNE, WY 82001	GOTV WY Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	10/17/00 # 10668	800.00

SUBTOTAL of Disbursements This Page (see 2. all)	
TOTAL This Period for page this line number only	46,220.35

ITEMIZED INDEPENDENT EXPENDITURES

Page 1 of 1 Pages

(See Reverse Side for Instructions)

Name of Committee (in Full) CWA COPE FCC				
Full Name, Mailing Address & ZIP Code of Each Payee	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the expenditure & office sought <input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
(a) SUBTOTAL of Itemized Independent Expenditures			\$	
(b) SUBTOTAL of Unitemized Independent Expenditures			\$	\$128.56
(c) TOTAL Independent Expenditures			\$	\$128.56

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the financing of dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.



Witnessed and sworn to before me this 26th day of October, 2000

My Commission expires: 9/14/05

Cheryl Ann Stone
NOTARY PUBLIC

Barbara J. Easterling
Signature

**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 checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>10-28-00</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<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 _____ end/or Date of Receipt
<input type="checkbox"/> Electronic Filing	

<i>[Signature]</i>	<i>10-28-00</i>
PREPARER	DATE PREPARED