

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <b>TRANSPORT WORKERS UNION                  POLITICAL CONTRIBUTIONS COMMITTEE</b>	RECEIVED FEDERAL ELECTION COMMISSION MAIL ROOM
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <b>80 WEST END AVENUE</b>	2. FEC IDENTIFICATION NUMBER 2000 MAR 15 Ad: <b>00008268</b>
CITY, STATE and ZIP CODE <b>NEW YORK, N.Y. 10023</b>	3. <input type="checkbox"/> This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date).

### 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 checked="" 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  |
- Twelfth day report preceding \_\_\_\_\_ (Type of Election) election on \_\_\_\_\_ in the State of \_\_\_\_\_
- Thirtieth day 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>2/01/00</u> through <u>2/29/00</u>		
6. (a) Cash on Hand January 1, 19 <u>00</u>		\$ 281,215.54
(b) Cash on Hand at Beginning of Reporting Period	\$ 272,708.65	
(c) Total Receipts (from Line 19)	\$ 59,707.46	\$ 115,452.07
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 332,416.11	\$ 396,667.61
7. Total Disbursements (from Line 30)	\$ 20,851.00	\$ 85,102.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 311,565.11	\$ 311,565.11
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-8530 Local 202-219-3420
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 <b>JOHN J. KERRIGAN</b>	
Signature of Treasurer <i>John J. Kerrigan</i>	Date <b>3-10-2000</b>

NOTE: Commission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

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

(revised 1-1-81)

NAME OF COMMITTEE <b>TRANSPORT WORKERS UNION</b> <del>POLITICAL CONTRIBUTIONS COMMITTEE</del> <b>C 00008268</b>		REPORT COVERING PERIOD	
		FROM <b>2/01/00</b>	TO: <b>2/29/00</b>
		COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)		.00	.00
ii. Unitemized		24,083.52	49,617.33
iii. Total (add i and ii) >			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions (add a ii, b and c) >		24,083.52	49,617.33
12. Transfers From Affiliated/Other Party Committees		35,623.94	65,834.74
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		.00	.00
17. Other Federal Receipts (Dividends, Interest, etc.)			
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		59,707.46	115,452.07
20. Total Federal Receipts (subtract line 18 from line 19) >			
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share			
b. Other Federal Operating Expenditures			
c. Total Operating Expenditures (add a i, a ii, and b) >		26.00	277.50
22. Transfers to Affiliated/Other Party Committees		2,500.00	36,000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees			
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		.00	.00
b. Political Party Committees		.00	.00
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds (add a, b and c) >		18,325.00	48,825.00
29. Other Disbursements		20,851.00	85,102.50
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >			
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >			
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d)		24,083.52	49,617.33
33. Total Contribution Refunds (from line 28d)		.00	.00
34. Net Contributions (other than loans) (subtract line 33 from 32)		24,083.52	49,617.33
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 35) >			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 01 OF 02  
FOR LINE NUMBER 12

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)

TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE  
80 WEST END AVENUE, NEW YORK, N.Y. 10023

C 00008268

A. Full Name, Mailing Address and ZIP Code TWO LOCAL 100 POLIT. CONTRIBUTIONS COM. 80 WEST END AVE. NEW YORK NY 10023	Name of Employer  Occupation LABOR UNION	Date (month, day, year)  2/29/00	Amount of Each Receipt this Period  35,623.96
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): 1/2 MONTHLY CONTRIBUTION	Aggregate Year-to-Date \$ 65,834.74		
B. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	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):	Aggregate Year-to-Date \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	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):	Aggregate Year-to-Date \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	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):	Aggregate Year-to-Date \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	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):	Aggregate Year-to-Date \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	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):	Aggregate Year-to-Date \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation	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):	Aggregate Year-to-Date \$		35,623.96

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

35,623.96

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

35,623.96

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**NAME OF COMMITTEE (In Full)**

TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE C 00008268  
80 WEST END AVENUE, NEW YORK, N.Y. 10023

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement RETURN 50% OF LOCAL 260 COPE FOR FEBRUARY 2000 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) RETURN 50% COPE 2/00	Date (month, day, year) 2/29/00	Amount of Each Disbursement This Period 25.00
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

**TOTAL of Disbursements This Page (optional)** ..... 25.00

**TOTAL This Period (last page this line number only)** ..... 25.00

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE  
80 NASSAU AVENUE NEW YORK, N.Y. 10023

C 00508268

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
SHELLEY KIEL FOR CONGRESS CAMPAIGN 339 SOUTH 53RD STREET OHAMA, NE 68132 MARK BOEGEP, TREAS.	D 02 NE 2000 SUPPORT FOR CANDIDATE SHELLEY KIEL TO CONGRESS Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/03/00	500.00
B. Full Name, Mailing Address and ZIP Code PETE KING FOR CONGRESS PO BOX 1428 SEAFORD, NY 11783 EUGENE TURNER, TREAS.	R 03 NY P/R 2000 RE-ELECTION OF CONGRESSMAN PETER KING Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/03/00	1,000.00
C. Full Name, Mailing Address and ZIP Code HILLARY 2000 450 7TH AVENUE, SUITE 804 NEW YORK, NY 10123 WILLIAM CUMMINGHAM, TREAS.	D NY P/R 2000 SUPPORT FOR HILLARY CLINTON FOR US SENATE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/16/00	1,000.00
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

TOTAL of Disbursements This Page (optional) 2,500.00

TOTAL This Period (last page this line number only) 2,500.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 01 OF 01  
FOR LINE NUMBER 29

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**NAME OF COMMITTEE (in Full)**

TRANSPORT WORKERS UNION POLITICAL CONTRIBUTIONS COMMITTEE  
80 WEST END AVENUE, NEW YORK, N.Y. 10023

C 00008268

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement <input type="checkbox"/> D <input type="checkbox"/> DC 2000 SUPPORT FOR DEMOCRATIC GENERATORS Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) SUP. DUES IN SERVICE	Date (month, day, year) 2/03/00	Amount of Each Disbursement This Period 2,500.00
DARRPAC 424 C STREET, SE FIRST FLOOR WASHINGTON, DC 20002 TOM BASCHLE, TREAS.	Purpose of Disbursement <input type="checkbox"/> D <input type="checkbox"/> DC 2000 DUES FOR MEMBERSHIP RENEWAL Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2000 MEMBERSHIP DUES	Date (month, day, year) 2/03/00	Amount of Each Disbursement This Period 15,000.00
FRIENDS OF ROGER CORBIN PO BOX 839 WESTBURY, NY 11590 REVILLE MULLINGS, TREAS.	Purpose of Disbursement <input type="checkbox"/> D <input type="checkbox"/> NY P/R 2000 RE-ELECTION OF ROGER CORBIN TO NASSAU COUNTY LEGIS. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2/03/00	Amount of Each Disbursement This Period 325.00
FRIENDS OF SUSAN LAUGHLIN 1305 HAMPSON STREET CONWAY, PA 15027 JACK DUNN, TREAS.	Purpose of Disbursement <input type="checkbox"/> D <input type="checkbox"/> PA P/R 2000 RE-ELECTION OF SUSAN LAUGHLIN TO PA ASSEMBLY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2/03/00	Amount of Each Disbursement This Period 500.00
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

**TOTAL of Disbursements This Page (optional)**

18,325.00

**TAL This Period (last page this line number only)**

18,325.00

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 3-13-00
<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>JML</i> PREPARER	3-15-00 DATE PREPARED