

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

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

FOR LINE NUMBER: PAGE 79 OF 1185

(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. BENN, SHERRI H, , ,

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

STATE OF TEXAS

Occupation (for Individual)

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2019

Transaction ID : C29019519

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. 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 ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2019

Transaction ID : C29035372

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Payroll Deduction: \$10 Weekly

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

C. 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 ▼

460.00

Date of Receipt

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

Transaction ID : C29015286

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