

# Federal PAC NC Disclosure Report Cover

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Please note that this cover sheet cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, or account information.  
 You must amend the Federal PAC Statement of Organization (CRO-4000) to make those kinds of committee changes.  
 Use the Addendum form (CRO-4110) if additional information needs to be provided.

<b>1. Committee Information</b>	
a. Full Name	c. NC ID Number
CWA COPE PCC	
b. Mailing Address (include City, State and Zip Code)	d. Date Filed
501 Third Street, NW Washington, DC 20001	01/19/2007
	e. Phone Number
	(202) 434-1323

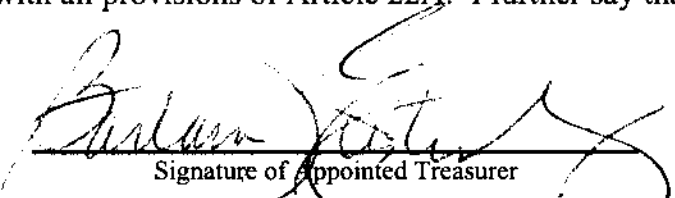
2. Report Year	3. Period Start Date (mm/dd/yyyy)	4. Period End Date (mm/dd/yyyy)	5. Total Amount Given to NC Committees
2006	10/22/2006	12/31/2006	\$ 0.00

6. Type of Report (check one)		8. Treasurer Full Name <i>(this should appear as listed on the Statement of Organization [CRO-4000])</i>	
<input type="checkbox"/> Quarterly	<input type="checkbox"/> Semi-annual	Barbara Easterling	
<input type="checkbox"/> First Plus	<input type="checkbox"/> Mid Year		
<input type="checkbox"/> Second	<input checked="" type="checkbox"/> Year End		
<input type="checkbox"/> Third Plus	<input type="checkbox"/> Special	9. Assistant Treasurer Full Name <i>(list the assistant that is a NC resident, if it is not the treasurer)</i>	
<input type="checkbox"/> Fourth		Wallace Weaver	
7. Special Report Name (if applicable)			

<b>10. Account Information</b>		<b>10. Account Information</b>	
a. Financial Institution Full Name		a. Financial Institution Full Name	
SunTrust Bank		n/a	
b. Purpose	c. Code	b. Purpose	c. Code
To make contributions			
d. Period Begin Balance	e. Period End Balance	d. Period Begin Balance	e. Period End Balance
\$ 1,932,249.83	\$ 1,492,226.68	\$	\$

**CERTIFICATION**


I certify that the Committee is in compliance with all provisions of Article 22A. I further say that this report is complete, true and correct.

Barbara J. Easterling            01/19/2007  
 Printed Name of Signer      Signature of Appointed Treasurer      Date

**FOR OFFICE USE ONLY**

Date Received: JAN 26 2007      Employee: \_\_\_\_\_

Date Postmarked: \_\_\_\_\_      Employee: \_\_\_\_\_

Date Scanned: 01-26-07      Employee: 

**Delivery Method**

Normal Mail

Registered Mail

Hand Delivered

Electronically Filed