

DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT

FORM DCE
COVER SHEET PG 1

The DCE Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00090752	2 Total pages filed: 4			
3 FILER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY		
	NICKNAME	LAST	SUFFIX			
Amalgamated Transit Union -				Date Received ELECTRONICALLY FILED 04/02/2026		
4 FILER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 10000 New Hampshire Ave Silver Spring, MD 20903			Date Hand-delivered or Date Postmarked		
				Receipt # Amount		
5 FILER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Processed		
(301) 431-7100				Date Imaged		
6 REPORT TYPE	<input type="checkbox"/> January 15		<input checked="" type="checkbox"/> 30th day before election			
	<input type="checkbox"/> July 15		<input type="checkbox"/> 8th day before election			
			<input type="checkbox"/> Runoff			
7 PERIOD COVERED	Month	Day	Year	Month	Day	Year
		01/01/2026	THROUGH			03/23/2026
8 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other
		05/02/2026	<input type="checkbox"/> General	<input checked="" type="checkbox"/> Special		
9 FILER ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		A. Supported			
			B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)		A. Supported Ballot ID:2156 Election Date:2026-05-02 Desc:Should the Dallas Area Rapid Transit System be continued in several local towns.			
			B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	GO TO PAGE 2					

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10 FILER NAME Amalgamated Transit Union - COPE		11 Filer ID (Ethics Commission Filers) 00090752
12 EXPENDITURE TOTALS	1. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	2. TOTAL POLITICAL EXPENDITURES	\$ 259.80

13 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Filer
or
Signature of individual with authority to sign on behalf of entity
(only if Filer is an entity)

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - DCE

FORM DCE
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3 of 4

14 FILER NAME Amalgamated Transit Union - COPE		15 Filer ID (Ethics Commission Filers) 00090752
16 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES	\$ 259.80
2.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
3.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00

POLITICAL EXPENDITURES

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

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1 Total pages Schedule F1: Sch: 1/1 Rpt: 4/4	2 FILER NAME Amalgamated Transit Union - COPE	3 Filer ID (Ethics Commission Filers) 00090752	
4 Date 03/18/2026	5 Payee name PrintedUnion		
6 Amount (\$) \$259.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 8800 Chancellor Row Dallas, TX 75247		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. Purchase flyers to support the DART ballot measure on 5/2/26.	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held