

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
 DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-037PEOPLE)

ADDRESS (number and street) **Check if different than previously reported. (ACC)**  
 PO BOX 2882  
 CHURCH STREET STATION  
 NEW YORK NY 10007

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00149211 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report(Q1)		Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (M13)
July 15 Quarterly Report(Q2)	(c) 12-Day PRE-Election Report for the:		Primary (12P)	General (12G)	Runoff (12R)
October 15 Quarterly Report(Q3)			Convention (12C)	Special (12S)	
<input checked="" type="checkbox"/> January 31 Quarterly Report(YE)		Election on			in the State of
July 31 Mid-Year Report(Non-election Year Only) (MY)	(d) 30-Day Post -Election Report for the:		General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)		Election on			in the State of

5. Covering Period 11 26 2002 through 12 31 2002

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 Alvin Warshaviak  
 Signature of Treasurer Electronically Filed by Alvin Warshaviak Date 01 31 2003

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/2001)

Page 2

Write or Type Committee Name

DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

Report Covering the Period: From: <sup>Month</sup> 11 <sup>Day</sup> 26 <sup>Year</sup> 2002 To: <sup>Month</sup> 12 <sup>Day</sup> 31 <sup>Year</sup> 2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <sup>Year</sup> 2002		45448.55
(b) Cash on Hand at Beginning of Reporting Period .....	3372.49	
(c) Total Receipts (from Line 19) .....	78534.19	559456.09
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	81906.68	604904.64
7. Total Disbursements (from Line 30) .....	41623.41	564621.37
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	40283.27	40283.27
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D) .....	0.00	

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Revised 1/2001)

Page 3

Write or Type Committee Name

DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

Report Covering the Period: From: <sup>MM</sup>11 <sup>DD</sup>26 <sup>YYYY</sup>2002 To: <sup>MM</sup>12 <sup>DD</sup>31 <sup>YYYY</sup>2002

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	873.50	
(ii) Unitemized .....	77660.69	
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	78534.19	559456.09
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 32, page 4) .....	78534.19	559456.09
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity .....	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) .....	78534.19	559456.09
20. Total Federal Receipts (subtract Line 18 from Line 19) .....	78534.19	559456.09

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Revised 1/2001)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	41623.41	564621.37
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)..... ▶	41623.41	564621.37
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)..... ▶	41623.41	564621.37
<hr/>		
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans) from Line 11(d), page 3).....	78534.19	559456.09
33. Total Contribution Refunds (from Line 28(d)).....	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32).....	78534.19	559456.09
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ▶	0.00	0.00
36. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35)..... ▶	0.00	0.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 5 / 20

11a  11b  11c  12  
 13  14  15  16  17

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)

DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

Full Name (Last, First, Middle Initial)

A. Donald Afflick

Mailing Address

2287 Virgil Pl.

City

State

Zip Code

Bronx

NY

10473

Date of Receipt

N M / D E / Y Y Y Y  
1 2 / 3 1 / 2 0 0 2

Amount of Each Receipt this Period

72.50

FEC ID number of contributing  
federal political committee.

Name of Employer

District Council 37, AFSCME

Occupation

Grievance Representative

Payroll Deduction

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: SA11A1.4264

Full Name (Last, First, Middle Initial)

B. Frederick Bigger

Mailing Address

447 Monroe Street

City

State

Zip Code

Brooklyn

NY

11221

Date of Receipt

N M / D E / Y Y Y Y  
1 2 / 3 1 / 2 0 0 2

Amount of Each Receipt this Period

40.00

FEC ID number of contributing  
federal political committee.

Name of Employer

NYC Transit Authority

Occupation

Computer Specialist

Payroll Deduction

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Transaction ID: SA11A1.4275

Full Name (Last, First, Middle Initial)

C. Patricia Brooks

Mailing Address

City

State

Zip Code

Date of Receipt

N M / D E / Y Y Y Y  
1 2 / 3 1 / 2 0 0 2

Amount of Each Receipt this Period

18.00

FEC ID number of contributing  
federal political committee.

Name of Employer

Occupation

Payroll Deduction

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Transaction ID: SA11A1.4276

**SUBTOTAL** of Receipts This Page (optional) ..... ► **128.50**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 / 20	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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)  
 DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

**A. Cara Casey**

Full Name (Last, First, Middle Initial) \_\_\_\_\_ Date of Receipt \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ N M / D E / Y Y Y Y  
 49-57 Crown Street \_\_\_\_\_ 12 / 31 / 2002  
 City State Zip Code \_\_\_\_\_  
 Brooklyn NY 11221 \_\_\_\_\_ Amount of Each Receipt this Period \_\_\_\_\_  
 FEC ID number of contributing federal political committee. \_\_\_\_\_ 50.00

Name of Employer Occupation Payroll Deduction  
 NYC Housing Authority \_\_\_\_\_

Receipt For: Aggregate Year-to-Date ▼  
 Primary General  
 Other (specify) ▼ 260.00

Transaction ID: SA11A1.4266

**B. Linwood Denial**

Full Name (Last, First, Middle Initial) \_\_\_\_\_ Date of Receipt \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ N M / D E / Y Y Y Y  
 105 W. 122nd Street \_\_\_\_\_ 12 / 31 / 2002  
 City State Zip Code \_\_\_\_\_  
 New York NY 10027 \_\_\_\_\_ Amount of Each Receipt this Period \_\_\_\_\_  
 FEC ID number of contributing federal political committee. \_\_\_\_\_ 40.00

Name of Employer Occupation Payroll Deduction  
 NYC Board of Education \_\_\_\_\_  
 SAPI Specialist

Receipt For: Aggregate Year-to-Date ▼  
 Primary General  
 Other (specify) ▼ 260.00

Transaction ID: SA11A1.4263

**C. Clifford Koppelman**

Full Name (Last, First, Middle Initial) \_\_\_\_\_ Date of Receipt \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ N M / D E / Y Y Y Y  
 1270 E 19 Street, #1J \_\_\_\_\_ 12 / 31 / 2002  
 City State Zip Code \_\_\_\_\_  
 Brooklyn NY 11230 \_\_\_\_\_ Amount of Each Receipt this Period \_\_\_\_\_  
 FEC ID number of contributing federal political committee. \_\_\_\_\_ 50.00

Name of Employer Occupation Payroll Deduction  
 District Council 37, AFSCME \_\_\_\_\_  
 Grievance Representative

Receipt For: Aggregate Year-to-Date ▼  
 Primary General  
 Other (specify) ▼ 520.00

Transaction ID: SA11A1.4253

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **140.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 / 20	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)  
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

**A. Raymond Markey** Date of Receipt

Mailing Address N M / D E / Y Y Y Y  
248 Valley Rd. 12 / 31 / 2002

City State Zip Code Amount of Each Receipt this Period  
Valley Cottage NY 10989 56.00

FEC ID number of contributing federal political committee.

Name of Employer District Council 37, AFSCME	Occupation Grievance Representative	Payroll Deduction
Receipt For: Aggregate Year-to-Date ▼		
Primary General		
Other (specify) ▼	572.00	

**Transaction ID: SA11A1.4254**

**B. Andrew Mayo** Date of Receipt

Mailing Address N M / D E / Y Y Y Y  
720 Lenox Avenue #24C 12 / 31 / 2002

City State Zip Code Amount of Each Receipt this Period  
New York NY 10039 45.00

FEC ID number of contributing federal political committee.

Name of Employer NYC Department of Environment Protection	Occupation Sr. Sewage Treatment Worker	Payroll Deduction
Receipt For: Aggregate Year-to-Date ▼		
Primary General		
Other (specify) ▼	260.00	

**Transaction ID: SA11A1.4259**

**C. Raph Papa** Date of Receipt

Mailing Address N M / D E / Y Y Y Y  
125 E. 17th Street 12 / 31 / 2002

City State Zip Code Amount of Each Receipt this Period  
New York NY 10005 20.00

FEC ID number of contributing federal political committee.

Name of Employer District Council 37, AFSCME	Occupation Real Estate Manager	Payroll Deduction
Receipt For: Aggregate Year-to-Date ▼		
Primary General		
Other (specify) ▼	255.00	

**Transaction ID: SA11A1.4257**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>121.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 8 / 20

11a  11b  11c  12  
 13  14  15  16  17

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)

DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

Full Name (Last, First, Middle Initial)

**A. Walthere Primus**

Mailing Address

137-29 Bedell Street

City

State

Zip Code

Springfield Grdns

NY

11413

Date of Receipt

N M / D E / Y Y Y Y  
1 2 / 3 1 / 2 0 0 2

Amount of Each Receipt this Period

100.00

FEC ID number of contributing  
federal political committee.

Name of Employer

District Council 37, AFSCME

Occupation

Grievance Representative

Payroll Deduction

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Transaction ID: SA11A1.4265

Full Name (Last, First, Middle Initial)

**B. David Shapiro**

Mailing Address

6 Almhurst Street

City

State

Zip Code

Hasting on the Hud

NY

10706

Date of Receipt

N M / D E / Y Y Y Y  
1 2 / 3 1 / 2 0 0 2

Amount of Each Receipt this Period

20.00

FEC ID number of contributing  
federal political committee.

Name of Employer

District Council 37-MELS, AFSCME

Occupation

Staff Attorney

Payroll Deduction

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Transaction ID: SA11A1.4258

Full Name (Last, First, Middle Initial)

**C. Paulette Sher**

Mailing Address

381 Edgegrove Avenue

City

State

Zip Code

Staten Island

NY

10312

Date of Receipt

N M / D E / Y Y Y Y  
1 2 / 3 1 / 2 0 0 2

Amount of Each Receipt this Period

100.00

FEC ID number of contributing  
federal political committee.

Name of Employer

NYC Off Track Betting

Occupation

Betting Clerk

Payroll Deduction

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Transaction ID: SA11A1.4260

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **220.00**

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



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 9 / 20
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16	<input type="checkbox"/> 17

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)  
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

**A. Jose Sierra**

Full Name (Last, First, Middle Initial) \_\_\_\_\_ Date of Receipt \_\_\_\_\_  
Mailing Address \_\_\_\_\_ N M / D E / Y Y Y Y  
130 South Highland \_\_\_\_\_ 12 / 31 / 2002  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Ossining \_\_\_\_\_ NY \_\_\_\_\_ 10562 \_\_\_\_\_ Amount of Each Receipt this Period \_\_\_\_\_  
FEC ID number of contributing federal political committee. \_\_\_\_\_ 50.00

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_ Payroll Deduction \_\_\_\_\_  
District Council 37, AFSCME \_\_\_\_\_ Division Director \_\_\_\_\_

Receipt For: \_\_\_\_\_ Aggregate Year-to-Date ▼ \_\_\_\_\_  
Primary \_\_\_\_\_ General \_\_\_\_\_ 520.00  
Other (specify) ▼ \_\_\_\_\_

Transaction ID: SA11A1.4255

**B. John Smith**

Full Name (Last, First, Middle Initial) \_\_\_\_\_ Date of Receipt \_\_\_\_\_  
Mailing Address \_\_\_\_\_ N M / D E / Y Y Y Y  
P.O. BOX 198 \_\_\_\_\_ 12 / 31 / 2002  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
BRONX \_\_\_\_\_ NY \_\_\_\_\_ 10451 \_\_\_\_\_ Amount of Each Receipt this Period \_\_\_\_\_  
FEC ID number of contributing federal political committee. \_\_\_\_\_ 40.00

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_ Payroll Deduction \_\_\_\_\_  
City University of New York \_\_\_\_\_ City Custodial Asst. \_\_\_\_\_

Receipt For: \_\_\_\_\_ Aggregate Year-to-Date ▼ \_\_\_\_\_  
Primary \_\_\_\_\_ General \_\_\_\_\_ 260.00  
Other (specify) ▼ \_\_\_\_\_

Transaction ID: SA11A1.4261

**C. Dennis Sullivan**

Full Name (Last, First, Middle Initial) \_\_\_\_\_ Date of Receipt \_\_\_\_\_  
Mailing Address \_\_\_\_\_ N M / D E / Y Y Y Y  
94 Buckingham Rd. \_\_\_\_\_ 12 / 31 / 2002  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Yonkers \_\_\_\_\_ NY \_\_\_\_\_ 10701 \_\_\_\_\_ Amount of Each Receipt this Period \_\_\_\_\_  
FEC ID number of contributing federal political committee. \_\_\_\_\_ 75.00

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_ Payroll Deduction \_\_\_\_\_  
District Council 37 \_\_\_\_\_ Director of Research and Negotiations \_\_\_\_\_

Receipt For: \_\_\_\_\_ Aggregate Year-to-Date ▼ \_\_\_\_\_  
Primary \_\_\_\_\_ General \_\_\_\_\_ 760.00  
Other (specify) ▼ \_\_\_\_\_

Transaction ID: SA11A1.4256

**SUBTOTAL** of Receipts This Page (optional) ..... ► **165.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 / 20	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
 DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

**A. James Tuccirelli** Date of Receipt

Mailing Address N M / D E / Y Y Y Y  
 361 Mill Rd. 1 2 / 3 1 / 2 0 0 2

City State Zip Code Amount of Each Receipt this Period  
 Staten Island NY 10306 90.00

FEC ID number of contributing federal political committee.

Name of Employer District Council 37, AFSCME	Occupation Grievance Representative	Payroll Deduction
Receipt For: Aggregate Year-to-Date ▼		
Primary General		
Other (specify) ▼	520.00	

**Transaction ID: SA11A1.4262**

**B. Lavina Woolridge** Date of Receipt

Mailing Address N M / D E / Y Y Y Y  
 1550 East New York Ave. #7E 1 2 / 3 1 / 2 0 0 2

City State Zip Code Amount of Each Receipt this Period  
 Brooklyn NY 11212 9.00

FEC ID number of contributing federal political committee.

Name of Employer NYB Board of Education	Occupation Scholl Lunch Aide	Payroll Deduction
Receipt For: Aggregate Year-to-Date ▼		
Primary General		
Other (specify) ▼	207.00	

**Transaction ID: SA11A1.4277**

**C.**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>99.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>873.50</b>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 20

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 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, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

Full Name (Last, First, Middle Initial)

**A.** AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - PEOPLE, QUALIFIED

Mailing Address

1625 L STREET NW

City

WASHINGTON

State

DC

Zip Code

20036

Purpose of Disbursement

Transfer

Candidate Name

Category/  
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Date of Disbursement

12 / 06 / 2002

Amount of Each Disbursement this Period

38623.41

Transaction ID: SB22.4251

Full Name (Last, First, Middle Initial)

**B.** AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - PEOPLE, QUALIFIED

Mailing Address

1625 L STREET NW

City

WASHINGTON

State

DC

Zip Code

20036

Purpose of Disbursement

Transfer

Candidate Name

Category/  
Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Date of Disbursement

12 / 18 / 2002

Amount of Each Disbursement this Period

2000.00

Transaction ID: SB22.4252

**C.**

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**41623.41**

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

**41623.41**

Form/Schedule: SA11A1 \$10 bi-weekly, \$2.50 weekly  
Transaction ID: SA11A1.4264

Form/Schedule: SA11A1 \$8.00 BI- Weekly  
Transaction ID: SA11A1.4275

Form/Schedule: ~~SA11A1~~ \$4.00 Weekly  
Transaction ID: ~~SA11A1.4276~~

Form/Schedule: ~~SA11A1~~ \$10.00 bi-weekly  
Transaction ID: ~~SA11A1.4288~~

Form/Schedule: SA11A1 \$10.00 Bi-weekly  
Transaction ID: SA11A1.4253

Form/Schedule: SA11A1 \$10.00 weekly  
Transaction ID: SA11A1.4253

Form/Schedule: SA11A1 \$10.00 weekly  
Transaction ID: SA11A1.4254

Form/Schedule: SA11A1 \$5.00 Weekly  
Transaction ID: SA11A1.4259

Form/Schedule: SA11A1 \$5.00 Weekly  
Transaction ID: SA11A1.4257

Form/Schedule: SA11A1 \$20.00 BI-weekly  
Transaction ID: SA11A1.4265



Form/Schedule: ~~SA11A1~~ \$5.00 Weekly  
Transaction ID: ~~SA11A1.4258~~

Form/Schedule: ~~SA11A1~~ \$20.00 BI-weekly  
Transaction ID: ~~SA11A1.4260~~

Form/Schedule: ~~SA11A1~~ \$10.00 Weekly  
Transaction ID: ~~SA11A1.4255~~

Form/Schedule: ~~SA11A1~~ \$10.00 Bi-weekly  
Transaction ID: ~~SA11A1.4261~~

Form/Schedule: SA11A1 \$15.00 Weekly  
Transaction ID: SA11A1.4256

Form/Schedule: SA11A1 \$10.00 Weekly  
Transaction ID: SA11A1.4262

Form/Schedule: SA11A1 \$9.00 Bi-weekly  
Transaction ID: SA11A1.4277