

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

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED

ADDRESS (number and street) 1625 L STREET NW

Check if different than previously reported. (ACC) WASHINGTON DC 20036

2. FEC IDENTIFICATION NUMBER CITY STATE ZIPCODE

C00011114

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|---|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input checked="" type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) | |

Election on _____ in the State of _____

- (d) 30-Day Post -Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 04 01 2007 through 04 30 2007

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 WILLIAM LUCY

Signature of Treasurer Electronically Filed by WILLIAM LUCY Date 05 18 2007

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

Office Use Only							
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		726445.04
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	877855.12									
(c) Total Receipts (from Line 19)	567640.29	2149181.87								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1445495.41	2875626.91								
7. Total Disbursements (from Line 31)	702163.41	2132294.91								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	743332.00	743332.00								
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)	1042000.02									

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**

Write or Type Committee Name

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	30601.04	63506.70
(i) Itemized (use Schedule A)	495976.03	1847824.26
(ii) Unitemized	526577.07	1911330.96
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	526577.07	1911330.96
12. Transfers From Affiliated/Other Party Committees	40773.67	213713.15
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 37, page 5)	0.00	22878.32
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	289.55	1259.44
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	567640.29	2149181.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	567640.29	2149181.87

DETAILED SUMMARY PAGE

of Disbursements

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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.....	22137.64	75004.10
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	22137.64	75004.10
22. Transfers to Affiliated/Other Party Committees.....	31370.00	187320.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	22350.00	408550.00
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.....	624999.99	1457999.98
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	1305.78	3420.83
(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))	1305.78	3420.83
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	702163.41	2132294.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	702163.41	2132294.91

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	526577.07	1911330.96
34. Total Contribution Refunds (from Line 28(d))	1305.78	3420.83
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	525271.29	1907910.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	22137.64	75004.10
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	22878.32
38. Net Operating Expenditures (subtract Line 37 from Line 36)	22137.64	52125.78

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. RICHARD ABELSON		Date of Receipt M M / D D / Y Y Y Y Y 04 / 04 / 2007	
Mailing Address 4315 N. LAKE DRIVE		Transaction ID: SA11A1.88652	
City State Zip Code SHOREWOOD WI 53211	Amount of Each Receipt this Period 37.50		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME WI CN 48	Occupation EXECUTIVE DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.50		

Full Name (Last, First, Middle Initial) B. RICHARD ABELSON		Date of Receipt M M / D D / Y Y Y Y Y 04 / 19 / 2007	
Mailing Address 4315 N. LAKE DRIVE		Transaction ID: SA11A1.89269	
City State Zip Code SHOREWOOD WI 53211	Amount of Each Receipt this Period 37.50		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME WI CN 48	Occupation EXECUTIVE DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. TRACEY ABMAN		Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2007	
Mailing Address 3136 N. SEMINARY AVENUE		Transaction ID: SA11A1.88580	
City State Zip Code CHICAGO IL 60657-3309	Amount of Each Receipt this Period 77.12		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation DIRECTOR OF ORGANIZER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.24		

SUBTOTAL of Receipts This Page (optional) ▶	152.12
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 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-ED

Full Name (Last, First, Middle Initial) A. SHANA ADLERTON		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address C/O 710 Chippewa Square		Transaction ID: SA11A1.89288
City Marquette	State MI	Zip Code 48955
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.73
Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 213.84	

Full Name (Last, First, Middle Initial) B. SHANA ADLERTON		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address C/O 710 Chippewa Square		Transaction ID: SA11A1.89899
City Marquette	State MI	Zip Code 48955
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.73
Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.57	

Full Name (Last, First, Middle Initial) C. MUSILIU ADE ALAGBALA		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 5701 N. SHERIDAN, #10A		Transaction ID: SA11A1.88584
City CHICAGO	State IL	Zip Code 60660
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 61.98
Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.91	

SUBTOTAL of Receipts This Page (optional)	115.44
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 8 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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ED

Full Name (Last, First, Middle Initial) A. RONALD ALEXANDER		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 390 Worthington Road, Suite A		Transaction ID: SA11A1.89516	
City Westerville	State OH	Zip Code 43082	Amount of Each Receipt this Period 13.00
FEC ID number of contributing federal political committee. C			
Name of Employer STATE OF OHIO	Occupation DELEGATE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.00		

Full Name (Last, First, Middle Initial) B. RONALD ALEXANDER		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 390 Worthington Road, Suite A		Transaction ID: SA11A1.89723	
City Westerville	State OH	Zip Code 43082	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer STATE OF OHIO	Occupation DELEGATE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 232.00		

Full Name (Last, First, Middle Initial) C. KENNETH L. ALLEN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 5 / 2 0 0 7	
Mailing Address 7935 SW SANTOLINA PLACE		Transaction ID: SA11A1.88664	
City BEAVERTON	State OR	Zip Code 97008-6272	Amount of Each Receipt this Period 87.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OR CN 75	Occupation EXECUTIVE DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 387.00		

SUBTOTAL of Receipts This Page (optional) ▶	120.00
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 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. KENNETH L. ALLEN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 7935 SW SANTOLINA PLACE		Transaction ID: SA11A1.89517	
City BEAVERTON	State OR	Zip Code 97008-6272	Amount of Each Receipt this Period 13.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OR CN 75	Occupation EXECUTIVE DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) B. CAROL A ANDERSON		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 303 Dias Drive		Transaction ID: SA11A1.88879	
City Fort Washington	State MD	Zip Code 20744	Amount of Each Receipt this Period 47.82
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECTOR, EDUCATION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.74		

Full Name (Last, First, Middle Initial) C. CAROL A ANDERSON		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 303 Dias Drive		Transaction ID: SA11A1.89606	
City Fort Washington	State MD	Zip Code 20744	Amount of Each Receipt this Period 47.82
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECTOR, EDUCATION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 382.56		

SUBTOTAL of Receipts This Page (optional) ▶	108.64
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:	PAGE 10 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

Full Name (Last, First, Middle Initial) A. MICHAEL ANDREJCO		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address C/O 4031 EXECUTIVE PARK DRIVE		Transaction ID: SA11A1.89020
City State Zip Code HARRISBURG PA 17111-1599	Amount of Each Receipt this Period 61.32	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.28	

Full Name (Last, First, Middle Initial) B. DAVID ANTLE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address P. O. BOX 1093		Transaction ID: SA11A1.89090
City State Zip Code MOSCOW PA 18444	Amount of Each Receipt this Period 103.80	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation AFSCME PA CN 13 DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 409.56	

Full Name (Last, First, Middle Initial) C. LOUISA ARCE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 303 HAWTHORNE BLVD		Transaction ID: SA11A1.89475
City State Zip Code DELAWARE OH 43015	Amount of Each Receipt this Period 82.74	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation AFSCME OH CN 8 CONTROLLER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.92	

SUBTOTAL of Receipts This Page (optional) ▶	247.86
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 11 / 197
	<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	

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**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

Full Name (Last, First, Middle Initial) A. ALVA ARELLANO		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 890 Sharps Lot Rd.		Transaction ID: SA11A1.89881	
City Swansea	State MA	Zip Code 02777	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MA CN 93	Occupation DIRECTOR OF ORGANIZING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.52		

Full Name (Last, First, Middle Initial) B. JAMES D. AUGUST		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 5204 Andover Road		Transaction ID: SA11A1.88880	
City Chevy Chase	State MD	Zip Code 20815	Amount of Each Receipt this Period 47.82
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, HEALTH & SAFETY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.74		

Full Name (Last, First, Middle Initial) C. JAMES D. AUGUST		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 5204 Andover Road		Transaction ID: SA11A1.89607	
City Chevy Chase	State MD	Zip Code 20815	Amount of Each Receipt this Period 47.82
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, HEALTH & SAFETY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 382.56		

SUBTOTAL of Receipts This Page (optional) ▶	125.64
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:	PAGE 12 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. W. JEAN BACKMAN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 1212 Jefferson Street		Transaction ID: SA11A1.89569	
City State Zip Code Olympia WA 98501		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME WA CN 28 STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. MARY ANN BARNETT		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 1155 Lakepointe		Transaction ID: SA11A1.88881	
City State Zip Code Grosse Pointe Park MI 48230		Amount of Each Receipt this Period 44.09	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L ASSISTANT DIRECTOR, ORGANIZING DVLPT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 305.65	

Full Name (Last, First, Middle Initial) C. MARY ANN BARNETT		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 1155 Lakepointe		Transaction ID: SA11A1.89608	
City State Zip Code Grosse Pointe Park MI 48230		Amount of Each Receipt this Period 44.09	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L ASSISTANT DIRECTOR, ORGANIZING DVLPT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 349.74	

SUBTOTAL of Receipts This Page (optional) ▶	108.18
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 13 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-ED

A. Full Name (Last, First, Middle Initial)
MICHAEL D. BAUER

Mailing Address 414 COLGATE AVENUE

City State Zip Code
ELYRIA OH 44035

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME OH CN 8 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 324.32

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: SA11A1.89477

Amount of Each Receipt this Period
84.68

B. Full Name (Last, First, Middle Initial)
HENRY BAYER

Mailing Address 1507 W. CHASE STREET

City State Zip Code
CHICAGO IL 60626-2125

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME IL CN 31 EXECUTIVE DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 504.32

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.88594

Amount of Each Receipt this Period
107.36

C. Full Name (Last, First, Middle Initial)
HENRY BAYER

Mailing Address 1507 W. CHASE STREET

City State Zip Code
CHICAGO IL 60626-2125

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME IL CN 31 EXECUTIVE DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 530.32

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 6 / 2 0 0 7

Transaction ID: SA11A1.89518

Amount of Each Receipt this Period
26.00

SUBTOTAL of Receipts This Page (optional)	▶	218.04
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 14 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

A. KENT BEAUCHAMP Full Name (Last, First, Middle Initial) Mailing Address 2309 MARINERS POINT LANE City State Zip Code SPRINGFIELD IL 62712 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7 Transaction ID: SA11A1.88593 Amount of Each Receipt this Period 73.52
Name of Employer Occupation AFSCME IL CN 31 REGIONAL DIRECTOR Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 291.94		

B. DENNIS BEAULIEU Full Name (Last, First, Middle Initial) Mailing Address 8802 Edison Lane City State Zip Code Clinton MD 20735 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.88882 Amount of Each Receipt this Period 38.72
Name of Employer Occupation AFSCME INT'L MANAGER, FINANCIAL SERVICES Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 271.04		

C. DENNIS BEAULIEU Full Name (Last, First, Middle Initial) Mailing Address 8802 Edison Lane City State Zip Code Clinton MD 20735 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7 Transaction ID: SA11A1.89609 Amount of Each Receipt this Period 38.72
Name of Employer Occupation AFSCME INT'L MANAGER, FINANCIAL SERVICES Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 309.76		

SUBTOTAL of Receipts This Page (optional)	150.96
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:	PAGE 15 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

A. Full Name (Last, First, Middle Initial)
MICHAEL BEGATTO

Mailing Address 301 HEDGEROW LANE

City State Zip Code
WILMINGTON DE 19807

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME DE CN 81 EXECUTIVE DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 346.69

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: SA11A1.88649

Amount of Each Receipt this Period
84.52

B. Full Name (Last, First, Middle Initial)
JOSEPH BELLA

Mailing Address 501 W George Street

City State Zip Code
Arlington Heights IL 60005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME IL CN 31 REGIONAL DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 291.94

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.88591

Amount of Each Receipt this Period
73.52

C. Full Name (Last, First, Middle Initial)
CHARLES BENN

Mailing Address 141 Eddington Avenue

City State Zip Code
Harrisburg PA 17111-3520

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME PA CN 13 ASSISTANT DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 337.82

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.89021

Amount of Each Receipt this Period
85.62

SUBTOTAL of Receipts This Page (optional)	▶	243.66
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 16 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-ED

A. Full Name (Last, First, Middle Initial) PAULA BENTLEY		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 3701 Oakview Drive		Transaction ID: SA11A1.88883	
City State Zip Code Orlando FL 32812	Amount of Each Receipt this Period 84.26		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation AREA ORGANIZING DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 589.82		

B. Full Name (Last, First, Middle Initial) PAULA BENTLEY		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 3701 Oakview Drive		Transaction ID: SA11A1.89610	
City State Zip Code Orlando FL 32812	Amount of Each Receipt this Period 84.26		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation AREA ORGANIZING DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 674.08		

C. Full Name (Last, First, Middle Initial) DAVID BIELSKI		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address 4499 Battleridge Rd.		Transaction ID: SA11A1.89075	
City State Zip Code McDonald PA 15057-3507	Amount of Each Receipt this Period 103.80		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13	Occupation DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 409.56		

SUBTOTAL of Receipts This Page (optional) ▶	272.32
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 17 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
KAREN BLACK

Mailing Address **P.O. BOX 304**

City **Highspire** State **PA** Zip Code **17034-1409**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFCSME PA CN 13** Occupation **ASSISTANT DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **395.28**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 12 / 2007

Transaction ID: SA11A1.89022

Amount of Each Receipt this Period
100.18

B. Full Name (Last, First, Middle Initial)
PATRICIA BODAY

Mailing Address **14113 SR 165E
 P. O. BOX 230**

City **Buckley** State **WA** Zip Code **98321**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME WA CN 28** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 26 / 2007

Transaction ID: SA11A1.89570

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
BARRY BOGARDE

Mailing Address **4303 VERMONT COURT**

City **Harrisburg** State **PA** Zip Code **17112-9512**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME PA CN 13** Occupation **LEGISLATIVE DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **395.28**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 12 / 2007

Transaction ID: SA11A1.89024

Amount of Each Receipt this Period
100.18

SUBTOTAL of Receipts This Page (optional)	240.36
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 18 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

A. Full Name (Last, First, Middle Initial)
MICHAEL W BOGGS

Mailing Address **3922 Latrobe Street**

City **Los Angeles** State **CA** Zip Code **90031**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME CA CN 36** Occupation **RESEARCH ATTORNEY**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
M M / D D / Y Y Y Y
04 / 02 / 2007

Transaction ID: SA11A1.88500

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
MICHAEL W BOGGS

Mailing Address **3922 Latrobe Street**

City **Los Angeles** State **CA** Zip Code **90031**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME CA CN 36** Occupation **RESEARCH ATTORNEY**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
M M / D D / Y Y Y Y
04 / 09 / 2007

Transaction ID: SA11A1.88826

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
PAUL BOOTH

Mailing Address **3724 Benton Street NW**

City **Washington** State **DC** Zip Code **20007-1803**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **EXECUTIVE ASST. TO PRESIDENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1215.62**

Date of Receipt
M M / D D / Y Y Y Y
04 / 10 / 2007

Transaction ID: SA11A1.88884

Amount of Each Receipt this Period
173.66

SUBTOTAL of Receipts This Page (optional)	398.66
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 19 / 197
	<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	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

A. Full Name (Last, First, Middle Initial) PAUL BOOTH Mailing Address 3724 Benton Street NW City Washington State DC Zip Code 20007-1803 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.89611 Amount of Each Receipt this Period <table border="1"> <tr> <td>173.66</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	5		2	0	0	7	173.66
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	5		2	0	0	7														
173.66																							
Name of Employer AFSCME INT'L Occupation EXECUTIVE ASST. TO PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>1389.28</td> </tr> </table>		1389.28																					
1389.28																							

B. Full Name (Last, First, Middle Initial) CAROL BOWSHIER Mailing Address 159 EAST MAIN STREET City MT. STERLING State OH Zip Code 43143 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.89841 Amount of Each Receipt this Period <table border="1"> <tr> <td>39.40</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		3	0		2	0	0	7	39.40
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		3	0		2	0	0	7														
39.40																							
Name of Employer AFSCME OH LOC 11 Occupation OPERATIONS DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>216.70</td> </tr> </table>		216.70																					
216.70																							

C. Full Name (Last, First, Middle Initial) NORMA BRAIDIGAN Mailing Address 300 N Derr Drive City Lewisburg State PA Zip Code 17837-1387 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.89085 Amount of Each Receipt this Period <table border="1"> <tr> <td>103.80</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	2		2	0	0	7	103.80
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		1	2		2	0	0	7														
103.80																							
Name of Employer AFSCME PA CN 13 Occupation DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>409.56</td> </tr> </table>		409.56																					
409.56																							

SUBTOTAL of Receipts This Page (optional) ▶	<table border="1"> <tr> <td>316.86</td> </tr> </table>	316.86
316.86		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td></td> </tr> </table>	

**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 20 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

A. Full Name (Last, First, Middle Initial)
WILLIAM BRENNER

Mailing Address 3901 SCHOOLHOUSE ROAD

City DOVER State PA Zip Code 17315

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.28

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.89025

Amount of Each Receipt this Period
61.32

B. Full Name (Last, First, Middle Initial)
JEROME BROWN

Mailing Address 6917 RIDGELAND AVENUE

City HAMMOND State IN Zip Code 46324

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.07

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.88588

Amount of Each Receipt this Period
62.98

C. Full Name (Last, First, Middle Initial)
DIANE BURKE

Mailing Address 6626 Potomac Avenue, A1

City Alexandria State VA Zip Code 22307

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, LEGISLATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 352.28

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.88885

Amount of Each Receipt this Period
57.01

SUBTOTAL of Receipts This Page (optional)	▶	181.31
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:	PAGE 21 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. DIANE BURKE		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 6626 Potomac Avenue, A1		Transaction ID: SA11A1.89612	
City Alexandria	State VA	Zip Code 22307	Amount of Each Receipt this Period 57.01
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, LEGISLATION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 409.29		

Full Name (Last, First, Middle Initial) B. CAROL L BURNETT		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 1921 N. Westmoreland		Transaction ID: SA11A1.88886	
City Arlington	State VA	Zip Code 22213	Amount of Each Receipt this Period 44.09
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation MANAGER, ART & GRAPHIC DESIGN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 308.63		

Full Name (Last, First, Middle Initial) C. CAROL L BURNETT		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 1921 N. Westmoreland		Transaction ID: SA11A1.89613	
City Arlington	State VA	Zip Code 22213	Amount of Each Receipt this Period 44.09
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation MANAGER, ART & GRAPHIC DESIGN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 352.72		

SUBTOTAL of Receipts This Page (optional)	145.19
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 22 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. JUDITH BUXTON		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 2401 N 2ND STREET		Transaction ID: SA11A1.89027
City State Zip Code HARRISBURG PA 17110	Amount of Each Receipt this Period 100.18	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME PA CN 13	Occupation ASSISTANT DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 395.28	

Full Name (Last, First, Middle Initial) B. PAULA J. CAIRA		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 17 Fourteenth Street SE		Transaction ID: SA11A1.88887
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 47.60	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation ASSOCIATE GENERAL COUNSEL I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.20	

Full Name (Last, First, Middle Initial) C. PAULA J. CAIRA		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 17 Fourteenth Street SE		Transaction ID: SA11A1.89614
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 47.60	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation ASSOCIATE GENERAL COUNSEL I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.80	

SUBTOTAL of Receipts This Page (optional) ▶	195.38
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 23 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

A. Full Name (Last, First, Middle Initial)
ANGELA M. CALDWELL

Mailing Address 3664 STIRLING COURT

City State Zip Code
CLEVELAND OH 44115-3091

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME OH CN 8 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 237.85

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: SA11A1.89482

Amount of Each Receipt this Period
62.53

B. Full Name (Last, First, Middle Initial)
ROBERT CALVIN

Mailing Address 45 CHURCH ROAD

City State Zip Code
MERCER PA 16137

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME PA CN 13 REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 245.28

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.89076

Amount of Each Receipt this Period
61.32

C. Full Name (Last, First, Middle Initial)
JOHN CAMERON

Mailing Address 6555 N. MAPLEWOOD

City State Zip Code
CHICAGO IL 60645

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME IL CN 31 DIRECTOR POL./COM. RELATIONS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 275.86

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.88545

Amount of Each Receipt this Period
69.52

SUBTOTAL of Receipts This Page (optional)	▶	193.37
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 24 / 197
	<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	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

Full Name (Last, First, Middle Initial) A. LINDA CANAN STEPHENS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 1625 L STREET NW		Transaction ID: SA11A1.88888	
City State Zip Code WASHINGTON DC 20036	Amount of Each Receipt this Period 95.63		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, POLITICAL ACTION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 669.41		

Full Name (Last, First, Middle Initial) B. LINDA CANAN STEPHENS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 1625 L STREET NW		Transaction ID: SA11A1.89615	
City State Zip Code WASHINGTON DC 20036	Amount of Each Receipt this Period 95.63		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, POLITICAL ACTION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 765.04		

Full Name (Last, First, Middle Initial) C. RICHARD CAPONI		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address 4453 STILLEY ROAD		Transaction ID: SA11A1.89067	
City State Zip Code PITTSBURGH PA 15227	Amount of Each Receipt this Period 103.80		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13	Occupation REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 409.56		

SUBTOTAL of Receipts This Page (optional) ▶	295.06
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 25 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
 JOYCE CARLSON

Mailing Address 911 ALDINE STREET

City State Zip Code
 ST. PAUL MN 55104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME MN CN 14 BUSINESS REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 229.76

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.88873

Amount of Each Receipt this Period
 57.86

B. Full Name (Last, First, Middle Initial)
 TAMMY D D CARSEY

Mailing Address 10453 Porter Lane

City State Zip Code
 Athens OH 45701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME OH CN 8 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 237.85

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 3 / 2 0 0 7

Transaction ID: SA11A1.89483

Amount of Each Receipt this Period
 62.53

C. Full Name (Last, First, Middle Initial)
 LEROY CARTER

Mailing Address 2648 TOWNER ROAD

City State Zip Code
 ANN ARBOR MI 48105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME MI CN 25 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 206.24

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.89290

Amount of Each Receipt this Period
 25.78

SUBTOTAL of Receipts This Page (optional)	146.17
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 26 / 197
	<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	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
LEROY CARTER

Mailing Address **2648 TOWNER ROAD**

City **ANN ARBOR,** State **MI** Zip Code **48105**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME MI CN 25** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **232.02**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 30 / 2007

Transaction ID: SA11A1.89901

Amount of Each Receipt this Period
25.78

B. Full Name (Last, First, Middle Initial)
ANTHONY CASO

Mailing Address **9 GARDEN COURT**

City **BOSTON** State **MA** Zip Code **02113**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME MA CN 93** Occupation **EXECUTIVE DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **439.40**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 02 / 2007

Transaction ID: SA11A1.88408

Amount of Each Receipt this Period
100.10

C. Full Name (Last, First, Middle Initial)
ANTHONY CASO

Mailing Address **9 GARDEN COURT**

City **BOSTON** State **MA** Zip Code **02113**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME MA CN 93** Occupation **EXECUTIVE DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **452.40**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 24 / 2007

Transaction ID: SA11A1.89519

Amount of Each Receipt this Period
13.00

SUBTOTAL of Receipts This Page (optional)	138.88
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 27 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

A. Full Name (Last, First, Middle Initial) ANTHONY CASO		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 9 GARDEN COURT		Transaction ID: SA11A1.89884	
City BOSTON	State MA	Zip Code 02113	Amount of Each Receipt this Period 100.10
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MA CN 93	Occupation EXECUTIVE DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 552.50		

B. Full Name (Last, First, Middle Initial) JUDY K CHOW		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 888 Mililani Street, Suite 601		Transaction ID: SA11A1.89356	
City Honolulu	State HI	Zip Code 96813-2991	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME HI LOC 152	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

C. Full Name (Last, First, Middle Initial) CAROLYN CLARK		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 4415 Rolling Pine		Transaction ID: SA11A1.89902	
City West Bloomfield	State MI	Zip Code 48324	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

SUBTOTAL of Receipts This Page (optional) ▶	225.10
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 28 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

A. Full Name (Last, First, Middle Initial) KATIE Y. CLAY		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 312 N. FRANCISCO 2ND FL		Transaction ID: SA11A1.88554
City State Zip Code CHICAGO IL 60612	Amount of Each Receipt this Period 62.98	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.12	

B. Full Name (Last, First, Middle Initial) LINCOLN COHEN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 4500 E. 6TH STREET		Transaction ID: SA11A1.88582
City State Zip Code GARY IN 46403	Amount of Each Receipt this Period 65.16	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME IL CN 31	Occupation EDITOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 258.76	

C. Full Name (Last, First, Middle Initial) TRACEY CONATY		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 1789 Lanier Place NW, #42		Transaction ID: SA11A1.88890
City State Zip Code Washington DC 20009	Amount of Each Receipt this Period 42.92	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, PUBLIC AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.44	

SUBTOTAL of Receipts This Page (optional) ▶	171.06
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 29 / 197
	<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	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

Full Name (Last, First, Middle Initial) A. TRACEY CONATY		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 1789 Lanier Place NW, #42		Transaction ID: SA11A1.89617	
City State Zip Code Washington DC 20009	Amount of Each Receipt this Period 42.92		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, PUBLIC AFFAIRS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 343.36		

Full Name (Last, First, Middle Initial) B. DONALD W. CONLEY		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 2695 SCHAAF DRIVE		Transaction ID: SA11A1.89843	
City State Zip Code COLUMBUS OH 43209	Amount of Each Receipt this Period 44.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH LOC 11	Occupation OPERATIONS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.00		

Full Name (Last, First, Middle Initial) C. BEVERLY S CONTEE		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 12061 Beltsville Drive		Transaction ID: SA11A1.89618	
City State Zip Code Beltsville MD 20705	Amount of Each Receipt this Period 26.95		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation LEGAL ASSISTANT II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.60		

SUBTOTAL of Receipts This Page (optional) ▶	113.87
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 30 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. ROBERT COOPER		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address 931 SOUTH WALNUT STREET		Transaction ID: SA11A1.89097	
City WEST CHESTER	State PA	Zip Code 19382	Amount of Each Receipt this Period 103.80
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13	Occupation REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 409.56		

Full Name (Last, First, Middle Initial) B. CHRISTOPHER COWEN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 47 DOUGLAS STREET		Transaction ID: SA11A1.88874	
City ST. PAUL	State MN	Zip Code 55102	Amount of Each Receipt this Period 62.60
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MN CN 14	Occupation BUSINESS REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 246.22		

Full Name (Last, First, Middle Initial) C. DANNY CRAIG		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 18945 LITTLEFIELD		Transaction ID: SA11A1.89292	
City DETROIT	State MI	Zip Code 48235	Amount of Each Receipt this Period 25.78
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 206.24		

SUBTOTAL of Receipts This Page (optional) ▶	192.18
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:	PAGE 31 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
DANNY CRAIG

Mailing Address **18945 LITTLEFIELD**

City **DETROIT** State **MI** Zip Code **48235**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME MI CN 25** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **232.02**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 30 / 2007

Transaction ID: SA11A1.89903

Amount of Each Receipt this Period
25.78

B. Full Name (Last, First, Middle Initial)
DICK CROFTER

Mailing Address **238 S. OAK PARK AVENUE #1F**

City **OAK PARK** State **IL** Zip Code **60302**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME IL CN 31** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **238.96**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 02 / 2007

Transaction ID: SA11A1.88573

Amount of Each Receipt this Period
60.18

C. Full Name (Last, First, Middle Initial)
JAMES CULLEN

Mailing Address **1111 Morningside Avenue**

City **Schenectady** State **NY** Zip Code **12308**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **AREA FIELD SERVICES DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.47**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 10 / 2007

Transaction ID: SA11A1.88893

Amount of Each Receipt this Period
41.01

SUBTOTAL of Receipts This Page (optional)	126.97
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 32 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
JAMES CULLEN

Mailing Address **1111 Morningside Avenue**

City **Schenectady** State **NY** Zip Code **12308**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **AREA FIELD SERVICES DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **321.48**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 25 / 2007

Transaction ID: SA11A1.89620

Amount of Each Receipt this Period
41.01

B. Full Name (Last, First, Middle Initial)
PATRICIA K. CURRIE

Mailing Address **7088 Scioto Chase Blvd.**

City **Powell** State **OH** Zip Code **43065**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME OH CN 8** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **246.78**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 17 / 2007

Transaction ID: SA11A1.89258

Amount of Each Receipt this Period
4.20

C. Full Name (Last, First, Middle Initial)
PATRICIA K. CURRIE

Mailing Address **7088 Scioto Chase Blvd.**

City **Powell** State **OH** Zip Code **43065**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME OH CN 8** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **296.69**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 23 / 2007

Transaction ID: SA11A1.89485

Amount of Each Receipt this Period
49.91

SUBTOTAL of Receipts This Page (optional)	95.12
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:	PAGE 33 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. JENNIFER C DAEHN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 1602 E Street, SE		Transaction ID: SA11A1.88894
City Washington	State DC	Zip Code 20003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 43.17
Name of Employer AFSCME INT'L	Occupation ASSOCIATE GENERAL COUNSEL I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 302.19	

Full Name (Last, First, Middle Initial) B. JENNIFER C DAEHN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 1602 E Street, SE		Transaction ID: SA11A1.89621
City Washington	State DC	Zip Code 20003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 43.17
Name of Employer AFSCME INT'L	Occupation ASSOCIATE GENERAL COUNSEL I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.36	

Full Name (Last, First, Middle Initial) C. JEFFREY DAINS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 1743 CARL STREET		Transaction ID: SA11A1.88871
City ROSEVILLE	State MN	Zip Code 55113
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 54.00
Name of Employer AFSCME MN CN 14	Occupation BUSINESS REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00	

SUBTOTAL of Receipts This Page (optional)	140.34
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 34 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. WILLIAM DANDO		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 6630 HUNTINGDON STREET		Transaction ID: SA11A1.89028
City State Zip Code HARRISBURG PA 17111	Amount of Each Receipt this Period 74.02	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME PA CN 13	Occupation ASSOCIATE LEGISLATIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 292.06	

Full Name (Last, First, Middle Initial) B. ROBERT DAVIS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 822 BOVEE LANE		Transaction ID: SA11A1.89486
City State Zip Code POWELL OH 43065	Amount of Each Receipt this Period 91.94	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME OH CN 8	Occupation ASSOCIATE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 309.80	

Full Name (Last, First, Middle Initial) C. JEANETTE DEFLORIO		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 1034 N Washington		Transaction ID: SA11A1.89293
City State Zip Code Lansing MI 48906	Amount of Each Receipt this Period 27.05	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.14	

SUBTOTAL of Receipts This Page (optional) ▶	193.01
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 35 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
 JEANETTE DEFLORIO

Mailing Address 1034 N Washington

City State Zip Code
 Lansing MI 48906

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME MI CN 25 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 242.19

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.89904

Amount of Each Receipt this Period
 27.05

B. Full Name (Last, First, Middle Initial)
 EDGAR DE JESUS

Mailing Address 8 Ralph Street,
 First Floor

City State Zip Code
 Bergenfield NJ 07621

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME INT'L AREA ORGANIZING DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 282.78

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.88716

Amount of Each Receipt this Period
 30.00

C. Full Name (Last, First, Middle Initial)
 EDGAR DE JESUS

Mailing Address 8 Ralph Street,
 First Floor

City State Zip Code
 Bergenfield NJ 07621

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME INT'L AREA ORGANIZING DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 324.91

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.88895

Amount of Each Receipt this Period
 42.13

SUBTOTAL of Receipts This Page (optional)	▶	99.18
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:	PAGE 36 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. EDGAR DE JESUS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 8 Ralph Street, First Floor		Transaction ID: SA11A1.89622
City Bergenfield	State NJ	Zip Code 07621
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 43.29
Name of Employer AFSCME INT'L	Occupation AREA ORGANIZING DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 368.20	

Full Name (Last, First, Middle Initial) B. JOHN C DEMPSEY		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 20235 Watermark Place		Transaction ID: SA11A1.88896
City Sterling	State VA	Zip Code 20165
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 86.83
Name of Employer AFSCME INT'L	Occupation GENERAL COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 607.81	

Full Name (Last, First, Middle Initial) C. JOHN C DEMPSEY		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 20235 Watermark Place		Transaction ID: SA11A1.89623
City Sterling	State VA	Zip Code 20165
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 86.83
Name of Employer AFSCME INT'L	Occupation GENERAL COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 694.64	

SUBTOTAL of Receipts This Page (optional)	▶	216.95
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 37 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
CONSTANCE DERR

Mailing Address **P.O. Box 116**

City **Maspeth** State **NY** Zip Code **11378**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **REGIONAL DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **367.99**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 10 / 2007

Transaction ID: SA11A1.88897

Amount of Each Receipt this Period
52.57

B. Full Name (Last, First, Middle Initial)
CONSTANCE DERR

Mailing Address **P.O. Box 116**

City **Maspeth** State **NY** Zip Code **11378**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **REGIONAL DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.56**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 25 / 2007

Transaction ID: SA11A1.89624

Amount of Each Receipt this Period
52.57

C. Full Name (Last, First, Middle Initial)
GREG DEVEREUX

Mailing Address **3561 S.E. Kamilehe
 Point Road**

City **Shelton** State **WA** Zip Code **98584**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME WA CN 28** Occupation **EXECUTIVE DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1198.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 24 / 2007

Transaction ID: SA11A1.89520

Amount of Each Receipt this Period
13.00

SUBTOTAL of Receipts This Page (optional)	118.14
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 38 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
GREG DEVEREUX

Mailing Address **3561 S.E. Kamilehe
 Point Road**

City **Shelton** State **WA** Zip Code **98584**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME WA CN 28** Occupation **EXECUTIVE DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1298.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 26 / 2007

Transaction ID: SA11A1.89571

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
JUDY DEVOE

Mailing Address **3256 Ocean Beach Hwy**

City **Longview** State **WA** Zip Code **98632**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STATE EMP VANCOUVER** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 26 / 2007

Transaction ID: SA11A1.89572

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
WILLIAM A DEVORE

Mailing Address **6 Patrick Drive**

City **Oxford** State **CT** Zip Code **45056**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME CT CN 4** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **202.28**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 23 / 2007

Transaction ID: SA11A1.89488

Amount of Each Receipt this Period
53.18

SUBTOTAL of Receipts This Page (optional)	193.18
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:	PAGE 39 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. JEAN M DIEDERICH		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 4741 Grand Ave. S No. 3		Transaction ID: SA11A1.89221
City Minneapolis	State MN	Zip Code 55419-5443
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 156.00
Name of Employer HENNEPIN COUNTY	Occupation PRINCIPAL CHILD SUPPORT OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 721.00	

Full Name (Last, First, Middle Initial) B. JOHN A DINICOLA		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 320 2nd Street		Transaction ID: SA11A1.88527
City Bergenline	State NJ	Zip Code 07087
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.18
Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.96	

Full Name (Last, First, Middle Initial) C. KEVIN DOEING		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 316 Quittie Park Dr.		Transaction ID: SA11A1.89030
City Annville	State PA	Zip Code 17003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 65.84
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.34	

SUBTOTAL of Receipts This Page (optional)	▶	282.02
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:	PAGE 40 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
MARY DONNELLY

Mailing Address **3617 AUTUMNWOOD COURT, S.E.**

City **BOSTON HARBOR** State **WA** Zip Code **98501**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME WA CN 28** Occupation **ADMINISTRATIVE ASSISTANT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 26 / 2007

Transaction ID: SA11A1.89573

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
ANDY DOUGLAS

Mailing Address **390 Worthington Road**

City **Westerville** State **OH** Zip Code **43082**

FEC ID number of contributing federal political committee. **C**

Name of Employer **OCSEA Local 11** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 02 / 2007

Transaction ID: SA11A1.88444

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
ANDY DOUGLAS

Mailing Address **390 Worthington Road**

City **Westerville** State **OH** Zip Code **43082**

FEC ID number of contributing federal political committee. **C**

Name of Employer **OCSEA Local 11** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 30 / 2007

Transaction ID: SA11A1.89844

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)	155.00
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:	PAGE 41 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

Full Name (Last, First, Middle Initial) A. LAURA E. DRAKE		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 238 S. OAK PARK AVENUE		Transaction ID: SA11A1.88543	
City State Zip Code OAK PARK IL 60302		Amount of Each Receipt this Period 60.18	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME IL CN 31 SENIOR ORGANIZER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 238.96	

Full Name (Last, First, Middle Initial) B. PAMELA DUNCAN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 2895 Arrow Smith Drive		Transaction ID: SA11A1.88842	
City State Zip Code Reynoldsburg, OH 43068		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME OH LOC 4 STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) C. JAMES W DURKIN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 8 Beacon Street		Transaction ID: SA11A1.89885	
City State Zip Code Boston MA 02108		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME MA CN 93 COMMUNICATIONS SPECIALIST			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	140.18
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 42 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
DENNIS EAGLE

Mailing Address **5007 26th Ave., SE**

City **Lacey** State **WA** Zip Code **98503**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME WA CN 28** Occupation **STAFF REPRESENTATIVE**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1040.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 26 / 2007

Transaction ID: SA11A1.89574

Amount of Each Receipt this Period
80.00

B. Full Name (Last, First, Middle Initial)
THOMAS EDSTROM

Mailing Address **4106 N. SACRAMENTO**

City **CHICAGO** State **IL** Zip Code **60618**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME IL CN 31** Occupation **LEGAL COUNSEL**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **279.56**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 02 / 2007

Transaction ID: SA11A1.88607

Amount of Each Receipt this Period
70.40

C. Full Name (Last, First, Middle Initial)
FLORENCE ESTES

Mailing Address **4328 N. HERMITAGE AVENUE #1-W**

City **CHICAGO** State **IL** Zip Code **60613**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME IL CN 31** Occupation **STAFF REPRESENTATIVE**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **238.96**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 02 / 2007

Transaction ID: SA11A1.88541

Amount of Each Receipt this Period
60.18

SUBTOTAL of Receipts This Page (optional)	210.58
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 43 / 197
	<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	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. MICHELLE EVANS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 10201 Galana Pointe Drive		Transaction ID: SA11A1.89489	
City State Zip Code Galana Pointe OH 43021		Amount of Each Receipt this Period 65.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME OH CN 8 STAFF ATTORNEY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 248.96	

Full Name (Last, First, Middle Initial) B. MARY FALK		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 11236 Georgia Avenue		Transaction ID: SA11A1.88844	
City State Zip Code North Champlin MN 55316		Amount of Each Receipt this Period 54.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation STATE OF MINNESOTA STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 299.00	

Full Name (Last, First, Middle Initial) C. STEPHAN FANTAUZZO		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 3840 N. Delaware Street		Transaction ID: SA11A1.88898	
City State Zip Code Indianapolis IN 46205		Amount of Each Receipt this Period 57.01	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L REGIONAL DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 399.07	

SUBTOTAL of Receipts This Page (optional) ▶	176.01
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:	PAGE 44 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. STEPHAN FANTAUZZO		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 3840 N. Delaware Street		Transaction ID: SA11A1.89625
City Indianapolis	State IN	Zip Code 46205
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.01
Name of Employer AFSCME INT'L	Occupation REGIONAL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 456.08	

Full Name (Last, First, Middle Initial) B. RICHARD FELLER		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 4705 Butterworth Place, NW		Transaction ID: SA11A1.88899
City Washington	State DC	Zip Code 20016
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 51.86
Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECTOR, POLITICAL ACTION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 363.02	

Full Name (Last, First, Middle Initial) C. RICHARD FELLER		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 4705 Butterworth Place, NW		Transaction ID: SA11A1.89626
City Washington	State DC	Zip Code 20016
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 51.86
Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECTOR, POLITICAL ACTION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 414.88	

SUBTOTAL of Receipts This Page (optional)	▶	160.73
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 45 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
CATHRYN FELLINGER

Mailing Address **1282 OAKFIELD DR., N**

City **COLUMBUS** State **OH** Zip Code **43229**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME OH LOC 11** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **209.44**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 30 / 2007

Transaction ID: SA11A1.89845

Amount of Each Receipt this Period
38.08

B. Full Name (Last, First, Middle Initial)
RICHARD C FERLAUTO

Mailing Address **2806 North Somerset Street**

City **Arlington** State **VA** Zip Code **22213**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **MANAGER, PENSION INVESTMENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **311.08**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 10 / 2007

Transaction ID: SA11A1.88900

Amount of Each Receipt this Period
46.54

C. Full Name (Last, First, Middle Initial)
RICHARD C FERLAUTO

Mailing Address **2806 North Somerset Street**

City **Arlington** State **VA** Zip Code **22213**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **MANAGER, PENSION INVESTMENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **357.62**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 25 / 2007

Transaction ID: SA11A1.89627

Amount of Each Receipt this Period
46.54

SUBTOTAL of Receipts This Page (optional)	131.16
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 46 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. JASPER FERRARO		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 710 JOHN STREET		Transaction ID: SA11A1.88604
City ROCKFORD	State IL	Zip Code 61103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 61.98
Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 246.12	

Full Name (Last, First, Middle Initial) B. JOHN J FILAK JR		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 6160 Galena Point Drive		Transaction ID: SA11A1.89490
City Poland	State OH	Zip Code 44514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 84.68
Name of Employer AFSCME OH CN 8	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 324.32	

Full Name (Last, First, Middle Initial) C. DAVID FILLMAN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 2520 HELEN STREET		Transaction ID: SA11A1.89031
City HATBORO	State PA	Zip Code 19040
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 128.86
Name of Employer AFSCME PA CN 13	Occupation DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 547.44	

SUBTOTAL of Receipts This Page (optional)	▶	275.52
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 47 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-ED

Full Name (Last, First, Middle Initial) A. DAVID FILLMAN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 2520 HELEN STREET		Transaction ID: SA11A1.89522	
City State Zip Code HATBORO PA 19040		Amount of Each Receipt this Period 13.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME PA CN 13 DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 560.44	

Full Name (Last, First, Middle Initial) B. DENNIS P. FLEMING		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 449 ST. MARY DRIVE		Transaction ID: SA11A1.88592	
City State Zip Code EDWARDSVILLE IL 62025		Amount of Each Receipt this Period 51.54	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME IL CN 31 MEMBERSHIP COORDINATOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 204.66	

Full Name (Last, First, Middle Initial) C. WILLIAM F. FOGLE		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 1777 BUCKLEW DRIVE		Transaction ID: SA11A1.89491	
City State Zip Code TOLEDO OH 43613		Amount of Each Receipt this Period 62.53	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME OH CN 8 STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 237.85	

SUBTOTAL of Receipts This Page (optional) ▶	127.07
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 48 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

Full Name (Last, First, Middle Initial) A. MICHAEL FOX		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address 3818 SHEFFIELD LANE		Transaction ID: SA11A1.89107	
City HARRISBURG	State PA	Amount of Each Receipt this Period 103.80	
Zip Code 17110-3044		Amount of Each Receipt this Period 103.80	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 103.80	
Name of Employer AFSCME PA CN 13	Occupation DIRECTOR	Amount of Each Receipt this Period 103.80	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 604.56	Amount of Each Receipt this Period 103.80	

Full Name (Last, First, Middle Initial) B. MICHAEL FOX		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 3818 SHEFFIELD LANE		Transaction ID: SA11A1.89523	
City HARRISBURG	State PA	Amount of Each Receipt this Period 65.00	
Zip Code 17110-3044		Amount of Each Receipt this Period 65.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 65.00	
Name of Employer AFSCME PA CN 13	Occupation DIRECTOR	Amount of Each Receipt this Period 65.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 669.56	Amount of Each Receipt this Period 65.00	

Full Name (Last, First, Middle Initial) C. GARETH J FRANK		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 2309 Parkway		Transaction ID: SA11A1.88901	
City Cheverly	State MD	Amount of Each Receipt this Period 51.86	
Zip Code 20785		Amount of Each Receipt this Period 51.86	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 51.86	
Name of Employer AFSCME INT'L	Occupation ASSOC DIRECTOR ORGANIZING & FIELD SVCS	Amount of Each Receipt this Period 51.86	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 363.02	Amount of Each Receipt this Period 51.86	

SUBTOTAL of Receipts This Page (optional) ▶	220.66
TOTAL This Period (last page this line number only) ▶	220.66

**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 49 / 197
	<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	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial) GARETH J FRANK		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 2309 Parkway		Transaction ID: SA11A1.89628	
City State Zip Code Cheverly MD 20785	Amount of Each Receipt this Period 51.86		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSOC DIRECTOR ORGANIZING & FIELD SVCS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 414.88		

B. Full Name (Last, First, Middle Initial) BRIAN FUITEN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 445 MAYFAIR DRIVE		Transaction ID: SA11A1.88589	
City State Zip Code LINCOLN IL 62656	Amount of Each Receipt this Period 64.56		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation DATA PROCESSING SPECIALIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 256.36		

C. Full Name (Last, First, Middle Initial) AMY GALATIAN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 10925 Southern Highlands Parkway		Transaction ID: SA11A1.88902	
City State Zip Code Las Vegas NV 89141	Amount of Each Receipt this Period 32.05		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation REGIONAL FIELD ADMINISTRATOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.63		

SUBTOTAL of Receipts This Page (optional) ▶	148.47
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 50 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

Full Name (Last, First, Middle Initial) A. AMY GALATIAN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 10925 Southern Highlands Parkway		Transaction ID: SA11A1.89629	
City State Zip Code Las Vegas NV 89141		Amount of Each Receipt this Period 32.05	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L REGIONAL FIELD ADMINISTRATOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 254.68	

Full Name (Last, First, Middle Initial) B. ALBERT GARRETT		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 18491 LAUDER		Transaction ID: SA11A1.88457	
City State Zip Code DETROIT MI 48235		Amount of Each Receipt this Period 55.10	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME MI CN 25 PRESIDENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 424.70	

Full Name (Last, First, Middle Initial) C. ALBERT GARRETT		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 18491 LAUDER		Transaction ID: SA11A1.89295	
City State Zip Code DETROIT MI 48235		Amount of Each Receipt this Period 55.10	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME MI CN 25 PRESIDENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 479.80	

SUBTOTAL of Receipts This Page (optional) ▶	142.25
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 51 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
ALBERT GARRETT

Mailing Address **18491 LAUDER**

City **DETROIT** State **MI** Zip Code **48235**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME MI CN 25** Occupation **PRESIDENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **492.80**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 24 / 2007

Transaction ID: SA11A1.89524

Amount of Each Receipt this Period
13.00

B. Full Name (Last, First, Middle Initial)
ALBERT GARRETT

Mailing Address **18491 LAUDER**

City **DETROIT** State **MI** Zip Code **48235**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME MI CN 25** Occupation **PRESIDENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **547.90**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 30 / 2007

Transaction ID: SA11A1.89906

Amount of Each Receipt this Period
55.10

C. Full Name (Last, First, Middle Initial)
IRASEMA T. GARZA

Mailing Address **6804 Granby Street**

City **Bethesda** State **MD** Zip Code **20817**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **DIRECTOR, WOMEN'S RIGHTS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **399.07**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 10 / 2007

Transaction ID: SA11A1.88903

Amount of Each Receipt this Period
57.01

SUBTOTAL of Receipts This Page (optional)	125.11
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 52 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

Full Name (Last, First, Middle Initial) A. IRASEMA T. GARZA		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 6804 Granby Street		Transaction ID: SA11A1.89630	
City State Zip Code Bethesda MD 20817		Amount of Each Receipt this Period 57.01	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L DIRECTOR, WOMEN'S RIGHTS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 456.08	

Full Name (Last, First, Middle Initial) B. DAVID GASH		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address 226 HARTLEY ROAD		Transaction ID: SA11A1.89116	
City State Zip Code HERSHEY PA 17033		Amount of Each Receipt this Period 61.32	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME PA CN 13 REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 245.28	

Full Name (Last, First, Middle Initial) C. RAGLAN GEORGE		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 75 Varick Street Suite #1404		Transaction ID: SA11A1.89525	
City State Zip Code New York NY 10013-9902		Amount of Each Receipt this Period 13.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME NY CN 1707 EXECUTIVE DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 309.52	

SUBTOTAL of Receipts This Page (optional) ▶	131.33
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 53 / 197
	<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	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
 THOMAS GIBBS

Mailing Address 152 Upper Claar Rd.

City State Zip Code
 Claysburg PA 16625

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME PA CN 13 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 245.28

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.89054

Amount of Each Receipt this Period
 61.32

B. Full Name (Last, First, Middle Initial)
 KAREN GILGOFF

Mailing Address 3003 Van Ness Street NW, #W1023

City State Zip Code
 Washington DC 20008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME INT'L ASST. DIRECTOR, RETIREES PROGRAM

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 297.29

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.88904

Amount of Each Receipt this Period
 42.47

C. Full Name (Last, First, Middle Initial)
 KAREN GILGOFF

Mailing Address 3003 Van Ness Street NW, #W1023

City State Zip Code
 Washington DC 20008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME INT'L ASST. DIRECTOR, RETIREES PROGRAM

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 339.76

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.89631

Amount of Each Receipt this Period
 42.47

SUBTOTAL of Receipts This Page (optional)	▶	146.26
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 54 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

Full Name (Last, First, Middle Initial) A. HERMAN GILMAN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 4202 45th S		Transaction ID: SA11A1.89575
City State Zip Code Seattle WA 98118-1403	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME WA CN 28	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. PATRICIA GLYNN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 55 Aberdeen Avenue		Transaction ID: SA11A1.88905
City State Zip Code Cambridge MA 02138-4646	Amount of Each Receipt this Period 42.13	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation AREA FIELD SERVICES DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.91	

Full Name (Last, First, Middle Initial) C. PATRICIA GLYNN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 55 Aberdeen Avenue		Transaction ID: SA11A1.89632
City State Zip Code Cambridge MA 02138-4646	Amount of Each Receipt this Period 42.13	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation AREA FIELD SERVICES DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.04	

SUBTOTAL of Receipts This Page (optional) ▶	104.26
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 55 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. ALICE GOFF		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 9 / 2 0 0 7
Mailing Address 8124 Alix Ave.		Transaction ID: SA11A1.88834
City Los Angeles	State CA	Zip Code 90001-3517
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer AFSCME CA CN 36	Occupation BUSINESS REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 239.00	

Full Name (Last, First, Middle Initial) B. ALICE GOFF		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 8124 Alix Ave.		Transaction ID: SA11A1.89018
City Los Angeles	State CA	Zip Code 90001-3517
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.00
Name of Employer AFSCME CA CN 36	Occupation BUSINESS REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 309.00	

Full Name (Last, First, Middle Initial) C. ALICE GOFF		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 8124 Alix Ave.		Transaction ID: SA11A1.89526
City Los Angeles	State CA	Zip Code 90001-3517
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 13.00
Name of Employer AFSCME CA CN 36	Occupation BUSINESS REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 322.00	

SUBTOTAL of Receipts This Page (optional)	▶	123.00
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 56 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
MARK GOLDEN

Mailing Address **74 ICE POND ROAD**

City **LEVITTOWN** State **PA** Zip Code **19057**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME PA CN 13** Occupation **REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **245.28**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 12 / 2007

Transaction ID: SA11A1.89099

Amount of Each Receipt this Period
61.32

B. Full Name (Last, First, Middle Initial)
MARY GOULDING

Mailing Address **2183 King James Dr.**

City **Green Bay** State **WI** Zip Code **54304**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME WI CN 40** Occupation **SECRETARY**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **245.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 02 / 2007

Transaction ID: SA11A1.88568

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
MARY GOULDING

Mailing Address **2183 King James Dr.**

City **Green Bay** State **WI** Zip Code **54304**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME WI CN 40** Occupation **SECRETARY**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **295.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 03 / 2007

Transaction ID: SA11A1.88634

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)	146.32
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 57 / 197
	<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	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

Full Name (Last, First, Middle Initial) A. MARY GOULDING		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 2183 King James Dr.		Transaction ID: SA11A1.89867	
City State Zip Code Green Bay WI 54304	Amount of Each Receipt this Period 35.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME WI CN 40	Occupation SECRETARY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00		

Full Name (Last, First, Middle Initial) B. STEPHEN M. GRAHAM		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 10105 Baltimore Avenue, Apt 3407		Transaction ID: SA11A1.88906	
City State Zip Code College Park MD 20740	Amount of Each Receipt this Period 38.72		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation PROJECT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.04		

Full Name (Last, First, Middle Initial) C. STEPHEN M. GRAHAM		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 10105 Baltimore Avenue, Apt 3407		Transaction ID: SA11A1.89633	
City State Zip Code College Park MD 20740	Amount of Each Receipt this Period 38.72		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation PROJECT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 309.76		

SUBTOTAL of Receipts This Page (optional) ▶	112.44
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:	PAGE 58 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. PATRICIA GRANT		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 17420 Aquasco Farm Road		Transaction ID: SA11A1.88907	
City State Zip Code Aquasco MD 20608		Amount of Each Receipt this Period 31.79	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L EXECUTIVE OFFICE ASSISTANT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 222.53	

Full Name (Last, First, Middle Initial) B. PATRICIA GRANT		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 17420 Aquasco Farm Road		Transaction ID: SA11A1.89634	
City State Zip Code Aquasco MD 20608		Amount of Each Receipt this Period 31.79	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L EXECUTIVE OFFICE ASSISTANT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 254.32	

Full Name (Last, First, Middle Initial) C. BEN GRANTHAM		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 1110 Chestnut Street S.E. #202		Transaction ID: SA11A1.89576	
City State Zip Code Olympia WA 98501		Amount of Each Receipt this Period 27.60	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME WA CN 28 STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 305.27	

SUBTOTAL of Receipts This Page (optional) ▶	91.18
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 59 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

A. Full Name (Last, First, Middle Initial)
R. SEAN GRAYSON

Mailing Address 10201 GALENA POINTE DRIVE

City State Zip Code
GALENA OH 43021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME OH CN 8 GENERAL COUNSEL

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 394.86

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: SA11A1.89493

Amount of Each Receipt this Period
103.08

B. Full Name (Last, First, Middle Initial)
JONATHAN GREBNER

Mailing Address 840 Randolph Ave.

City State Zip Code
St. Paul MN 55102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME MN CN 14 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 222.44

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.88867

Amount of Each Receipt this Period
52.36

C. Full Name (Last, First, Middle Initial)
RONALD J GREEN

Mailing Address 16425 Bubbling View Drive

City State Zip Code
Cerritos CA 90703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME CA LOC 3634 TRANSIT SUPERVISOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.88508

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	▶	455.44
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:	PAGE 60 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

Full Name (Last, First, Middle Initial) A. RONALD J GREEN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 16425 Bubbling View Drive		Transaction ID: SA11A1.89565	
City State Zip Code Cerritos CA 90703		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME CA LOC 3634 TRANSIT SUPERVISOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. STEVE GRETSUK		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 7803 Desiree Street		Transaction ID: SA11A1.88908	
City State Zip Code Alexandria VA 22315		Amount of Each Receipt this Period 74.62	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L DIRECTOR, INFORMATION SYSTEMS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 522.34	

Full Name (Last, First, Middle Initial) C. STEVE GRETSUK		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 7803 Desiree Street		Transaction ID: SA11A1.89635	
City State Zip Code Alexandria VA 22315		Amount of Each Receipt this Period 74.62	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L DIRECTOR, INFORMATION SYSTEMS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 596.96	

SUBTOTAL of Receipts This Page (optional) ▶	249.24
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 61 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

Full Name (Last, First, Middle Initial) A. DANIEL GROVE		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address 131 Scanlon Dirve		Transaction ID: SA11A1.89079	
City State Zip Code Franklin PA 16323		Amount of Each Receipt this Period 55.68	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 222.72	

Full Name (Last, First, Middle Initial) B. A. JENNIFER HALL		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 1205 SWEENEY DRIVE, APT. 6		Transaction ID: SA11A1.89637	
City State Zip Code MIDDLETON WI 53562		Amount of Each Receipt this Period 27.50	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME WI CN 40 ORGANIZER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. YVONNE J HARGROVE		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 12832 Evansport PI		Transaction ID: SA11A1.89638	
City State Zip Code Woodbridge VA 22192		Amount of Each Receipt this Period 28.29	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L ADMINISTRATIVE ASSISTANT I			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 226.32	

SUBTOTAL of Receipts This Page (optional) ▶	111.47
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 62 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. WILLIAM HARPER		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 5073 ROHNS		Transaction ID: SA11A1.88461
City	State	Zip Code
DETROIT	MI	48213
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.60
Name of Employer AFSCME MI CN 25	Occupation STAFF SPECIALIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.20	

Full Name (Last, First, Middle Initial) B. WILLIAM HARPER		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 5073 ROHNS		Transaction ID: SA11A1.89299
City	State	Zip Code
DETROIT	MI	48213
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.60
Name of Employer AFSCME MI CN 25	Occupation STAFF SPECIALIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.80	

Full Name (Last, First, Middle Initial) C. WILLIAM HARPER		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 5073 ROHNS		Transaction ID: SA11A1.89910
City	State	Zip Code
DETROIT	MI	48213
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 29.60
Name of Employer AFSCME MI CN 25	Occupation STAFF SPECIALIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.40	

SUBTOTAL of Receipts This Page (optional)	▶	88.80
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 63 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-ED

Full Name (Last, First, Middle Initial) A. LORA HARRIS		Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2007	
Mailing Address 265 Forest Blvd		Transaction ID: SA11A1.88575	
City State Zip Code Park Forest IL 60466-1750	Amount of Each Receipt this Period 60.18		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.62		

Full Name (Last, First, Middle Initial) B. LOUIS HARRIS		Date of Receipt M M / D D / Y Y Y Y Y 04 / 09 / 2007	
Mailing Address 1516 172nd Street East		Transaction ID: SA11A1.88833	
City State Zip Code Spanaway WA 98387	Amount of Each Receipt this Period 62.40		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME CA CN 36	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.00		

Full Name (Last, First, Middle Initial) C. RAYMOND HARRIS		Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2007	
Mailing Address 3 INDIGO COURT		Transaction ID: SA11A1.88590	
City State Zip Code BOLINGBROOK IL 60440	Amount of Each Receipt this Period 68.24		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation DIRECTOR INT GOVERNMENT RELATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.00		

SUBTOTAL of Receipts This Page (optional) ▶	190.82
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 64 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

Full Name (Last, First, Middle Initial) A. STEPHANIE HARRISON		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 7824 Main Falls Creek		Transaction ID: SA11A1.88912
City State Zip Code Catonsville MD 21228	Amount of Each Receipt this Period 78.81	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation DIRECTOR, HUMAN RESOURCES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 486.27	

Full Name (Last, First, Middle Initial) B. STEPHANIE HARRISON		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 7824 Main Falls Creek		Transaction ID: SA11A1.89639
City State Zip Code Catonsville MD 21228	Amount of Each Receipt this Period 78.81	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation DIRECTOR, HUMAN RESOURCES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 565.08	

Full Name (Last, First, Middle Initial) C. FRED L. HARTSEL		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 518 23RD STREET NW		Transaction ID: SA11A1.89495
City State Zip Code CANTON OH 44709	Amount of Each Receipt this Period 62.53	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME OH CN 8	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.85	

SUBTOTAL of Receipts This Page (optional) ▶	220.15
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 65 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
MICHAEL D HATCHER

Mailing Address **P. O. Box 231**

City **Monticello** State **KY** Zip Code **42633**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **LEAD ORGANIZER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.26**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 25 / 2007

Transaction ID: SA11A1.89640

Amount of Each Receipt this Period
27.81

B. Full Name (Last, First, Middle Initial)
KAREN HATHAWAY

Mailing Address **29 Jenny Lind Street**

City **Taunton** State **MA** Zip Code **02780**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME MA CN 93** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **202.30**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 30 / 2007

Transaction ID: SA11A1.89886

Amount of Each Receipt this Period
40.46

C. Full Name (Last, First, Middle Initial)
JIMMY HEARNS

Mailing Address **18509 MENDOTA**

City **DETROIT** State **MI** Zip Code **48221**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME MI CN 25** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **216.40**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 20 / 2007

Transaction ID: SA11A1.89301

Amount of Each Receipt this Period
27.05

SUBTOTAL of Receipts This Page (optional)	95.32
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 66 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

A. Full Name (Last, First, Middle Initial)
JIMMY HEARNS

Mailing Address 18509 MENDOTA

City State Zip Code
DETROIT MI 48221

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME MI CN 25 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 243.45

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.89912

Amount of Each Receipt this Period
27.05

B. Full Name (Last, First, Middle Initial)
JUDITH HEH

Mailing Address 408 ORRS BRIDGE ROAD

City State Zip Code
CAMP HILL PA 17011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME PA CN 13 DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 409.56

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.89117

Amount of Each Receipt this Period
103.80

C. Full Name (Last, First, Middle Initial)
PHILIP W. HELMS

Mailing Address 4108 MENTON

City State Zip Code
FLINT MI 48507

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME MI CN 25 EDITOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 353.57

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.88464

Amount of Each Receipt this Period
50.51

SUBTOTAL of Receipts This Page (optional)	▶	181.36
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 67 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
 PHILIP W. HELMS

Mailing Address 4108 MENTON

City State Zip Code
 FLINT MI 48507

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME MI CN 25 EDITOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 404.08

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.89302

Amount of Each Receipt this Period
 50.51

B. Full Name (Last, First, Middle Initial)
 PHILIP W. HELMS

Mailing Address 4108 MENTON

City State Zip Code
 FLINT MI 48507

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME MI CN 25 EDITOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 454.59

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.89913

Amount of Each Receipt this Period
 50.51

C. Full Name (Last, First, Middle Initial)
 SIDNEY L. HELSETH

Mailing Address 6554 CRAIG AVENUE

City State Zip Code
 INVER GROVE HGTS. MN 55076

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME MN CN 6 BUSINESS REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 256.08

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.88866

Amount of Each Receipt this Period
 65.10

SUBTOTAL of Receipts This Page (optional) ► **166.12**

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 68 / 197
	<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	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. J DAVID HENDERSON		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 20405 SPRING VALLEY ROAD		Transaction ID: SA11A1.89070
City State Zip Code PITTSBURGH PA 15243	Amount of Each Receipt this Period 61.32	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME PA CN 13	Occupation REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.28	

Full Name (Last, First, Middle Initial) B. ELIZABETH C HO		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 1511 Kalaniewai Street		Transaction ID: SA11A1.88915
City State Zip Code Honolulu HI 96821	Amount of Each Receipt this Period 42.13	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation AREA FIELD SERVICES DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.91	

Full Name (Last, First, Middle Initial) C. ELIZABETH C HO		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 1511 Kalaniewai Street		Transaction ID: SA11A1.89642
City State Zip Code Honolulu HI 96821	Amount of Each Receipt this Period 42.13	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation AREA FIELD SERVICES DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.04	

SUBTOTAL of Receipts This Page (optional) ▶	145.58
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 69 / 197
	<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	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

Full Name (Last, First, Middle Initial) A. MARGARET HOAK		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address 605 LINCOLN AVENUE		Transaction ID: SA11A1.89032	
City State Zip Code WARREN PA 16365	Amount of Each Receipt this Period 61.32		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13	Occupation REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.28		

Full Name (Last, First, Middle Initial) B. KARLA HODGE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address 1212 N. 14th Street		Transaction ID: SA11A1.89118	
City State Zip Code Harrisburg PA 17103	Amount of Each Receipt this Period 61.32		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.52		

Full Name (Last, First, Middle Initial) C. DANNY HOMAN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7	
Mailing Address 3000 ISABELLA		Transaction ID: SA11A1.88729	
City State Zip Code SIOUX CITY IA 51103-2134	Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IA CN 61	Occupation REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	182.64
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: PAGE 70 / 197 (check only one)
	<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

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

<p>A. Full Name (Last, First, Middle Initial) CARLA INSINGA-MINSER</p> <p>Mailing Address 4287 SOUTH CAROLINA DRIVE</p> <p>City State Zip Code BLUE RIDGE PA 17112</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 302.22</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 2 / 2 0 0 7</p> <p>Transaction ID: SA11A1.89033</p> <p>Amount of Each Receipt this Period 76.60</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) ANNE IRVING</p> <p>Mailing Address 5243 N. LIND AVENUE</p> <p>City State Zip Code CHICAGO IL 60630</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IL CN 31 DIRECTOR OF PUBLIC POLICY</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 258.74</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7</p> <p>Transaction ID: SA11A1.88571</p> <p>Amount of Each Receipt this Period 65.16</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) WILLIAM ISLER</p> <p>Mailing Address 7708 Quest Lane</p> <p>City State Zip Code Bowie MD 20720</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASST DIRECTOR, GENERAL SERVICES</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 243.25</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7</p> <p>Transaction ID: SA11A1.88917</p> <p>Amount of Each Receipt this Period 34.75</p>
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SUBTOTAL of Receipts This Page (optional)	176.51
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 71 / 197
	<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	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

Full Name (Last, First, Middle Initial) A. WILLIAM ISLER		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 7708 Quest Lane		Transaction ID: SA11A1.89643	
City State Zip Code Bowie MD 20720	Amount of Each Receipt this Period 34.75		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASST DIRECTOR, GENERAL SERVICES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 278.00		

Full Name (Last, First, Middle Initial) B. EDWIN JAYNE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 3304 Alabama Avenue		Transaction ID: SA11A1.88918	
City State Zip Code Alexandria VA 22305	Amount of Each Receipt this Period 51.86		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECTOR, LEGISLATION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 363.02		

Full Name (Last, First, Middle Initial) C. EDWIN JAYNE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 3304 Alabama Avenue		Transaction ID: SA11A1.89644	
City State Zip Code Alexandria VA 22305	Amount of Each Receipt this Period 51.86		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECTOR, LEGISLATION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 414.88		

SUBTOTAL of Receipts This Page (optional) ▶	138.47
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 72 / 197
	<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	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. PAMELA L JENKINS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 47604 Sandbank Square		Transaction ID: SA11A1.88919
City State Zip Code Sterling VA 20165	Amount of Each Receipt this Period 31.79	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation EXECUTIVE OFFICE ASSISTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.53	

Full Name (Last, First, Middle Initial) B. PAMELA L JENKINS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 47604 Sandbank Square		Transaction ID: SA11A1.89645
City State Zip Code Sterling VA 20165	Amount of Each Receipt this Period 31.79	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation EXECUTIVE OFFICE ASSISTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 254.32	

Full Name (Last, First, Middle Initial) C. RUTH JERELS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 1170 Winton Avenue		Transaction ID: SA11A1.89015
City State Zip Code Akron OH 44320	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer COUNTY OF SUMMIT	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	113.58
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:	PAGE 73 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

A. Full Name (Last, First, Middle Initial) RUTH JERELS Mailing Address 1170 Winton Avenue City Akron State OH Zip Code 44320 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.89554 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	6		2	0	0	7	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	6		2	0	0	7														
50.00																							
Name of Employer COUNTY OF SUMMIT Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>450.00</td> </tr> </table>		450.00																					
450.00																							

B. Full Name (Last, First, Middle Initial) FRANK X JEREZ Mailing Address 460 Center Street Apt# 3 City Nutley State NJ Zip Code 07110 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.88920 Amount of Each Receipt this Period <table border="1"> <tr> <td>30.98</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	0		2	0	0	7	30.98
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		1	0		2	0	0	7														
30.98																							
Name of Employer AFSCME INT'L Occupation LEAD ORGANIZER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>212.76</td> </tr> </table>		212.76																					
212.76																							

C. Full Name (Last, First, Middle Initial) FRANK X JEREZ Mailing Address 460 Center Street Apt# 3 City Nutley State NJ Zip Code 07110 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.89646 Amount of Each Receipt this Period <table border="1"> <tr> <td>30.98</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	5		2	0	0	7	30.98
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	5		2	0	0	7														
30.98																							
Name of Employer AFSCME INT'L Occupation LEAD ORGANIZER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>243.74</td> </tr> </table>		243.74																					
243.74																							

SUBTOTAL of Receipts This Page (optional)	111.96
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 74 / 197
	<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	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
 EMILY JOHNSON

Mailing Address **444 DRIFTWOOD DRIVE**

City **HOBART** State **IN** Zip Code **46342**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME IL CN 31** Occupation **CONTRACT ADMINISTRATOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **251.17**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 02 / 2007

Transaction ID: SA11A1.88552

Amount of Each Receipt this Period
63.24

B. Full Name (Last, First, Middle Initial)
 GEORGE Q JOHNSON

Mailing Address **204 Turnstone Road**

City **Columbus** State **OH** Zip Code **43235**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME OH CN 8** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **208.86**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 23 / 2007

Transaction ID: SA11A1.89497

Amount of Each Receipt this Period
54.90

C. Full Name (Last, First, Middle Initial)
 GEORGE T JOHNSON

Mailing Address **3853 Fairfax Square**

City **Fairfax** State **VA** Zip Code **22031-4200**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **AREA FIELD SERVICES DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **294.91**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 10 / 2007

Transaction ID: SA11A1.88922

Amount of Each Receipt this Period
42.13

SUBTOTAL of Receipts This Page (optional)	160.27
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:	PAGE 75 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. GEORGE T JOHNSON		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 3853 Fairfax Square		Transaction ID: SA11A1.89648	
City State Zip Code Fairfax VA 22031-4200	Amount of Each Receipt this Period 42.13		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation AREA FIELD SERVICES DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.04		

Full Name (Last, First, Middle Initial) B. WINSTON JOHNSON		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 14574 Longacre		Transaction ID: SA11A1.89915	
City State Zip Code Detroit MI 48227	Amount of Each Receipt this Period 24.32		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 217.51		

Full Name (Last, First, Middle Initial) C. JUDY A JONES		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 115 S Oak Street		Transaction ID: SA11A1.88923	
City State Zip Code Falls Church VA 22046	Amount of Each Receipt this Period 51.86		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSOC. DIRECTOR, INFORMATION SYSTEMS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 363.02		

SUBTOTAL of Receipts This Page (optional) ▶	118.31
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:	PAGE 76 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. JUDY A JONES		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 115 S Oak Street		Transaction ID: SA11A1.89649	
City Falls Church	State VA	Zip Code 22046	Amount of Each Receipt this Period 51.86
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSOC. DIRECTOR, INFORMATION SYSTEMS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 414.88		

Full Name (Last, First, Middle Initial) B. CHARLES JURGONIS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 11704 Bobs Ford Road		Transaction ID: SA11A1.88924	
City Fairfax	State VA	Zip Code 22030	Amount of Each Receipt this Period 74.62
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation DIRECTOR, FINANCIAL SERVICES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 511.06		

Full Name (Last, First, Middle Initial) C. CHARLES JURGONIS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 11704 Bobs Ford Road		Transaction ID: SA11A1.89650	
City Fairfax	State VA	Zip Code 22030	Amount of Each Receipt this Period 74.62
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation DIRECTOR, FINANCIAL SERVICES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.68		

SUBTOTAL of Receipts This Page (optional) ▶	201.10
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:	PAGE 77 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

Full Name (Last, First, Middle Initial) A. JASON KAY		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		0	2		2	0	0	7													
Mailing Address 2000 Cleveland		Transaction ID: SA11A1.88535																				
City Evanston	State IL	Zip Code 60202																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 65.16																				
Name of Employer AFSCME IL CN 31	Occupation POLITICAL ACTION DIRECTOR																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 258.74																					

Full Name (Last, First, Middle Initial) B. DONALD KEELING		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		0	2		2	0	0	7													
Mailing Address P.O. BOX 9014		Transaction ID: SA11A1.88606																				
City SPRINGFIELD	State IL	Zip Code 62791																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 69.96																				
Name of Employer AFSCME IL CN 31	Occupation COLLECTIVE BARGAINING ADMN.																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.44																					

Full Name (Last, First, Middle Initial) C. LISA HARRIS KELLY		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		1	0		2	0	0	7													
Mailing Address 9800 Muirfield Drive		Transaction ID: SA11A1.88925																				
City Upper Marlboro	State MD	Zip Code 20772																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.54																				
Name of Employer AFSCME INT'L	Occupation SENIOR SPEECH WRITER																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.78																					

SUBTOTAL of Receipts This Page (optional)	181.66
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:	PAGE 78 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

A. Full Name (Last, First, Middle Initial)
LISA HARRIS KELLY

Mailing Address 9800 Muirfield Drive

City State Zip Code
Upper Marlboro MD 20772

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME INT'L SENIOR SPEECH WRITER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 372.32

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.89651

Amount of Each Receipt this Period
46.54

B. Full Name (Last, First, Middle Initial)
PEGGY KERMEEN

Mailing Address 609 3RD AVENUE

City State Zip Code
STERLING IL 61081

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME IL CN 31 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 238.96

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.88576

Amount of Each Receipt this Period
60.18

C. Full Name (Last, First, Middle Initial)
JILL KIELBLOCK

Mailing Address 581 GOTZIAN STREET

City State Zip Code
ST. PAUL MN 55106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME MN CN 14 BUSINESS REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 273.50

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.88864

Amount of Each Receipt this Period
65.10

SUBTOTAL of Receipts This Page (optional)	▶	171.82
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 79 / 197
	<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	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
 LYNNE C KIRK

Mailing Address 17 Londonderry Ct.

City State Zip Code
 Cochranville PA 19330

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME PA CN 13 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 302.22

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.89034

Amount of Each Receipt this Period
 76.60

B. Full Name (Last, First, Middle Initial)
 R. MICHAEL KIRKPATRICK

Mailing Address 6131 MIFFLIN AVENUE

City State Zip Code
 HARRISBURG PA 17111-4259

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME PA CN 13 DIRECTOR OF GRIEVANCE DEPT.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 349.94

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.89035

Amount of Each Receipt this Period
 88.10

C. Full Name (Last, First, Middle Initial)
 SHIRLEY KIRKWOOD

Mailing Address 1232 WINDING WAY

City State Zip Code
 TOBYHANNA PA 18466

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME PA CN 13 REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 245.28

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.89036

Amount of Each Receipt this Period
 61.32

SUBTOTAL of Receipts This Page (optional)	226.02
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:	PAGE 80 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

A. Full Name (Last, First, Middle Initial)
JOSEPH KLEMAN

Mailing Address c/o 4031 EXECUTIVE PARK DRIVE
PA CN 13

City State Zip Code
HARRISBURG PA 17111-1599

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME PA CN 13 REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 302.22

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.89037

Amount of Each Receipt this Period
76.60

B. Full Name (Last, First, Middle Initial)
CAROLYN KLINGLESMTIH

Mailing Address 2812 Windsor Forest Drive

City State Zip Code
Louisville KY 40272

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME INT'L AREA ORGANIZING DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 281.57

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.88928

Amount of Each Receipt this Period
41.01

C. Full Name (Last, First, Middle Initial)
CAROLYN KLINGLESMTIH

Mailing Address 2812 Windsor Forest Drive

City State Zip Code
Louisville KY 40272

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME INT'L AREA ORGANIZING DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 322.58

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.89653

Amount of Each Receipt this Period
41.01

SUBTOTAL of Receipts This Page (optional)	▶	158.62
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 81 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
NANCY KNEPP

Mailing Address **150 South 43rd Street, Suite #2**

City **Harrisburg** State **PA** Zip Code **17111-5708**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME PA CN 13** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **245.28**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 12 / 2007

Transaction ID: SA11A1.89108

Amount of Each Receipt this Period
61.32

B. Full Name (Last, First, Middle Initial)
MARCIA R. KNOX

Mailing Address **1660 NEWTON AVENUE**

City **DAYTON** State **OH** Zip Code **45406-4110**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME OH CN 8** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **259.64**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 17 / 2007

Transaction ID: SA11A1.89259

Amount of Each Receipt this Period
5.00

C. Full Name (Last, First, Middle Initial)
MARCIA R. KNOX

Mailing Address **1660 NEWTON AVENUE**

City **DAYTON** State **OH** Zip Code **45406-4110**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME OH CN 8** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **344.32**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 23 / 2007

Transaction ID: SA11A1.89498

Amount of Each Receipt this Period
84.68

SUBTOTAL of Receipts This Page (optional)	151.00
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 82 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial) KERRY KORPI		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 8913 First Avenue		Transaction ID: SA11A1.88929
City State Zip Code Silver Spring MD 20910	Amount of Each Receipt this Period 66.44	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation DIRECTOR, RESEARCH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 465.08	

B. Full Name (Last, First, Middle Initial) KERRY KORPI		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 8913 First Avenue		Transaction ID: SA11A1.89654
City State Zip Code Silver Spring MD 20910	Amount of Each Receipt this Period 66.44	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation DIRECTOR, RESEARCH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 531.52	

C. Full Name (Last, First, Middle Initial) STEVEN KREISBERG		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 9954 Whitewater Drive		Transaction ID: SA11A1.88930
City State Zip Code Burke VA 22015	Amount of Each Receipt this Period 51.86	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECTOR, RESEARCH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 363.02	

SUBTOTAL of Receipts This Page (optional) ▶	184.74
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:	PAGE 83 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. STEVEN KREISBERG		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 9954 Whitewater Drive		Transaction ID: SA11A1.89655
City State Zip Code Burke VA 22015	Amount of Each Receipt this Period 51.86	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECTOR, RESEARCH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 414.88	

Full Name (Last, First, Middle Initial) B. BARBARA KREMP		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 302 DONNELLY AVENUE		Transaction ID: SA11A1.89101
City State Zip Code ASTON PA 19014	Amount of Each Receipt this Period 61.32	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.28	

Full Name (Last, First, Middle Initial) C. THOMAS E KULIKOSKY		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 400 Old Dominion Avenue		Transaction ID: SA11A1.88931
City State Zip Code Herndon VA 20170	Amount of Each Receipt this Period 44.09	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation AUDITING MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 308.63	

SUBTOTAL of Receipts This Page (optional) ▶	157.27
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 84 / 197
	<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	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

Full Name (Last, First, Middle Initial) A. THOMAS E KULIKOSKY		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 400 Old Dominion Avenue		Transaction ID: SA11A1.89656
City Herndon	State VA	Zip Code 20170
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 44.09
Name of Employer AFSCME INT'L	Occupation AUDITING MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 352.72	

Full Name (Last, First, Middle Initial) B. FRANCIS M. LALLY III		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 5 Vansant Rd., Deacon's Walk		Transaction ID: SA11A1.88648
City Newark	State DE	Zip Code 19711
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.36
Name of Employer AFSCME DE CN 81	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 246.02	

Full Name (Last, First, Middle Initial) C. JOSE A JR. LA LUZ		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 16 E 98 Street Apt 6F		Transaction ID: SA11A1.88932
City New York	State NY	Zip Code 10029
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 54.81
Name of Employer AFSCME INT'L	Occupation SPECIAL PROJECTS MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 383.67	

SUBTOTAL of Receipts This Page (optional)	▶	159.26
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 85 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

A. Full Name (Last, First, Middle Initial) JOSE A JR. LA LUZ		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 16 E 98 Street Apt 6F		Transaction ID: SA11A1.89657
City State Zip Code New York NY 10029	Amount of Each Receipt this Period 54.81	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation SPECIAL PROJECTS MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 438.48	

B. Full Name (Last, First, Middle Initial) SUSAN LANDER		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 385 First Avenue Apt #7-D		Transaction ID: SA11A1.88933
City State Zip Code New York NY 10010	Amount of Each Receipt this Period 32.92	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation REGIONAL FIELD ADMINISTRATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.44	

C. Full Name (Last, First, Middle Initial) SUSAN LANDER		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 385 First Avenue Apt #7-D		Transaction ID: SA11A1.89658
City State Zip Code New York NY 10010	Amount of Each Receipt this Period 32.92	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation REGIONAL FIELD ADMINISTRATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 263.36	

SUBTOTAL of Receipts This Page (optional) ▶	120.65
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 86 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
 ELIZABETH LARSEN

Mailing Address 900 Grant Street SW

City State Zip Code
 Tumwater WA 98512-6335

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME WA CN 28 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 257.50

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 6 / 2 0 0 7

Transaction ID: SA11A1.89582

Amount of Each Receipt this Period
 40.00

B. Full Name (Last, First, Middle Initial)
 SUE LEE-ALLEN

Mailing Address 7935 SW SANTOLINA PLACE

City State Zip Code
 BEAVERTON OR 97008-6272

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME OR CN 75 ORGANIZING DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 280.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 0 5 / 2 0 0 7

Transaction ID: SA11A1.88674

Amount of Each Receipt this Period
 70.00

C. Full Name (Last, First, Middle Initial)
 ERIC N LEHTO

Mailing Address 2122 West 2nd Street #2

City State Zip Code
 Duluth MN 55086

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME MN CN 5 DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 409.98

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.88863

Amount of Each Receipt this Period
 103.22

SUBTOTAL of Receipts This Page (optional)	213.22
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 87 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial) DINO LEONE		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 9115 TURKEY HOLLOW ROAD		Transaction ID: SA11A1.88585	
City State Zip Code TAYLOR RIDGE IL 61284-9646	Amount of Each Receipt this Period 61.98		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 246.12		

B. Full Name (Last, First, Middle Initial) AMBER LEWIS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address P. O. BOX 1563		Transaction ID: SA11A1.89583	
City State Zip Code Olympia WA 98507	Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME WA CN 28	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00		

C. Full Name (Last, First, Middle Initial) VALERY LIGHT		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address 32 Barley Lane		Transaction ID: SA11A1.89038	
City State Zip Code Palmyra PA 17078	Amount of Each Receipt this Period 56.98		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.82		

SUBTOTAL of Receipts This Page (optional) ▶	178.96
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 88 / 197
	<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	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

Full Name (Last, First, Middle Initial) A. ANDERS LINDALL		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 2524 West Hutchinson		Transaction ID: SA11A1.88533	
City State Zip Code Chicago IL 60618	Amount of Each Receipt this Period 50.37		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 219.53		

Full Name (Last, First, Middle Initial) B. DEBORAH LIPPINCOTT		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 535 BIRDWELL CHURCH LANE		Transaction ID: SA11A1.88578	
City State Zip Code CREAL SPRINGS IL 62922	Amount of Each Receipt this Period 60.18		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.96		

Full Name (Last, First, Middle Initial) C. COREY LOCKARD		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address P. O. Box 22		Transaction ID: SA11A1.89086	
City State Zip Code Benton PA 17814	Amount of Each Receipt this Period 51.28		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.12		

SUBTOTAL of Receipts This Page (optional) ▶	161.83
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 89 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

A. Full Name (Last, First, Middle Initial) KIP LOCKHART		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 9 / 2 0 0 7	
Mailing Address 139 Simpkins Drive		Transaction ID: SA11A1.88746	
City State Zip Code Bristol CT 06010		Amount of Each Receipt this Period 87.75	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME CT CN 4		Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 261.28	

B. Full Name (Last, First, Middle Initial) PAMELA LOFQUIST		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address RR 1 BOX 47		Transaction ID: SA11A1.88861	
City State Zip Code STURGEON LAKE MN 55783-9693		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer SPP TREATMENT CTR		Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 215.00	

C. Full Name (Last, First, Middle Initial) LISABETH LONG		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address P.O. BOX 82		Transaction ID: SA11A1.89039	
City State Zip Code FALLS CREEK PA 15840-0082		Amount of Each Receipt this Period 85.62	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13		Occupation EDUCATION DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 337.82	

SUBTOTAL of Receipts This Page (optional) ▶	223.37
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 90 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. CHARLES M LOVELESS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 1112 Euclid Street NW		Transaction ID: SA11A1.88934
City State Zip Code WASHINGTON DC 20009	Amount of Each Receipt this Period 66.44	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation DIRECTOR, LEGISLATION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 465.08	

Full Name (Last, First, Middle Initial) B. CHARLES M LOVELESS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 1112 Euclid Street NW		Transaction ID: SA11A1.89659
City State Zip Code WASHINGTON DC 20009	Amount of Each Receipt this Period 66.44	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation DIRECTOR, LEGISLATION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 531.52	

Full Name (Last, First, Middle Initial) C. GEORGE LOVELL		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address RR 3 BOX 3403		Transaction ID: SA11A1.88402
City State Zip Code Goshen VT 05733	Amount of Each Receipt this Period 60.76	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME MA CN 93	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.04	

SUBTOTAL of Receipts This Page (optional) ▶	193.64
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 91 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. GEORGE LOVELL		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address RR 3 BOX 3403		Transaction ID: SA11A1.89890	
City State Zip Code Goshen VT 05733	Amount of Each Receipt this Period 60.76		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MA CN 93	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 303.80		

Full Name (Last, First, Middle Initial) B. SARA LOWE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 3630 E J STREET		Transaction ID: SA11A1.89585	
City State Zip Code TACOMA WA 98404	Amount of Each Receipt this Period 52.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME WA CN 28	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00		

Full Name (Last, First, Middle Initial) C. SALVATORE LUCIANO		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7	
Mailing Address 947 BUNKER HILL RD		Transaction ID: SA11A1.88747	
City State Zip Code WATERTOWN CT 06795-3231	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME CT CN 4	Occupation EXECUTIVE DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 489.00		

SUBTOTAL of Receipts This Page (optional) ▶	262.76
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 92 / 197
	<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	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. SALVATORE LUCIANO		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 947 BUNKER HILL RD		Transaction ID: SA11A1.89529	
City State Zip Code WATERTOWN CT 06795-3231		Amount of Each Receipt this Period 13.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME CT CN 4 EXECUTIVE DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 502.00	

Full Name (Last, First, Middle Initial) B. WILLIAM LUCY		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 1831 Sudbury Lane NW		Transaction ID: SA11A1.88936	
City State Zip Code WASHINGTON DC 20012-2202		Amount of Each Receipt this Period 124.82	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L SECRETARY TREASURER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 873.72	

Full Name (Last, First, Middle Initial) C. WILLIAM LUCY		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 1831 Sudbury Lane NW		Transaction ID: SA11A1.89660	
City State Zip Code WASHINGTON DC 20012-2202		Amount of Each Receipt this Period 124.82	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L SECRETARY TREASURER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 998.54	

SUBTOTAL of Receipts This Page (optional) ▶	262.64
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:	PAGE 93 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. CHARLES LUNEY		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 425 Chaparral Creek #2724		Transaction ID: SA11A1.88937
City State Zip Code Hazelwood MO 63042	Amount of Each Receipt this Period 39.91	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation AREA FIELD SERVICES DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 279.37	

Full Name (Last, First, Middle Initial) B. CHARLES LUNEY		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 425 Chaparral Creek #2724		Transaction ID: SA11A1.89661
City State Zip Code Hazelwood MO 63042	Amount of Each Receipt this Period 39.91	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation AREA FIELD SERVICES DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 319.28	

Full Name (Last, First, Middle Initial) C. JOHN A. LYALL		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 383 ASHMOORE CIRCLE EAST		Transaction ID: SA11A1.89501
City State Zip Code POWELL OH 43065	Amount of Each Receipt this Period 111.64	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME OH CN 8	Occupation VICE PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 427.60	

SUBTOTAL of Receipts This Page (optional) ▶	191.46
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 94 / 197
	<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	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

A. Full Name (Last, First, Middle Initial) RANDELL LYNCH		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address P O Box 3311		Transaction ID: SA11A1.88531	
City Peoria	State IL	Zip Code 61612	Amount of Each Receipt this Period 60.18
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.96		

B. Full Name (Last, First, Middle Initial) ROBERTA LYNCH		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 4650 N. HERMITAGE STREET		Transaction ID: SA11A1.88595	
City CHICAGO	State IL	Zip Code 60640	Amount of Each Receipt this Period 96.62
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation DEPUTY DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 422.68		

C. Full Name (Last, First, Middle Initial) ROBERTA LYNCH		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 4650 N. HERMITAGE STREET		Transaction ID: SA11A1.89530	
City CHICAGO	State IL	Zip Code 60640	Amount of Each Receipt this Period 13.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation DEPUTY DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 435.68		

SUBTOTAL of Receipts This Page (optional) ▶	169.80
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 95 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial) LONIE MACCONNELL		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 618 Frances Drive		Transaction ID: SA11A1.89040
City State Zip Code Harrisburg PA 17109	Amount of Each Receipt this Period 65.84	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.40	

B. Full Name (Last, First, Middle Initial) KATHRYN S. MALONE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 988 CIRCLE ON THE GREEN		Transaction ID: SA11A1.89781
City State Zip Code COLUMBUS OH 43235	Amount of Each Receipt this Period 68.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation DIRECTOR OF PUBLIC AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.00	

C. Full Name (Last, First, Middle Initial) LINDA FAY MANN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 15103 Hunter Mountain Lane		Transaction ID: SA11A1.88938
City State Zip Code Silver Spring MD 20906	Amount of Each Receipt this Period 31.49	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation ADMINISTRATIVE ASSISTANT II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 217.43	

SUBTOTAL of Receipts This Page (optional) ▶	165.33
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 96 / 197
	<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	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

A. Full Name (Last, First, Middle Initial)
LINDA FAY MANN

Mailing Address 15103 Hunter Mountain Lane

City State Zip Code
Silver Spring MD 20906

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME INT'L ADMINISTRATIVE ASSISTANT II

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 248.92

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.89662

Amount of Each Receipt this Period
31.49

B. Full Name (Last, First, Middle Initial)
MICHAEL MANN

Mailing Address 15103 Hunter Mountain Lane

City State Zip Code
Silver Spring MD 20906

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME INT'L ASSISTANT DIRECTOR, AUDITING

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 363.02

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.88939

Amount of Each Receipt this Period
51.86

C. Full Name (Last, First, Middle Initial)
MICHAEL MANN

Mailing Address 15103 Hunter Mountain Lane

City State Zip Code
Silver Spring MD 20906

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME INT'L ASSISTANT DIRECTOR, AUDITING

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 414.88

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.89663

Amount of Each Receipt this Period
51.86

SUBTOTAL of Receipts This Page (optional)	135.21
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 97 / 197
	<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	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

Full Name (Last, First, Middle Initial) A. TED MANNA		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address 101 BRISTOL LANE		Transaction ID: SA11A1.89055	
City State Zip Code HOLLIDAYSBURG PA 16648	Amount of Each Receipt this Period 61.32		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13	Occupation REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.28		

Full Name (Last, First, Middle Initial) B. MICHAEL MARETTE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address P.O. Box 314		Transaction ID: SA11A1.88940	
City State Zip Code Charlestown WV 25414	Amount of Each Receipt this Period 47.82		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASST. DIRECTOR, ORG & FIELD SERVICES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 329.62		

Full Name (Last, First, Middle Initial) C. MICHAEL MARETTE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address P.O. Box 314		Transaction ID: SA11A1.89664	
City State Zip Code Charlestown WV 25414	Amount of Each Receipt this Period 47.82		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASST. DIRECTOR, ORG & FIELD SERVICES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 377.44		

SUBTOTAL of Receipts This Page (optional) ▶	156.96
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 98 / 197
	<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	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

Full Name (Last, First, Middle Initial) A. STEPHEN MARINCEL		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 247 KENNARD STREET		Transaction ID: SA11A1.88857
City State Zip Code ST. PAUL MN 55106	Amount of Each Receipt this Period 65.10	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME MN CN 14	Occupation BUSINESS REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 258.50	

Full Name (Last, First, Middle Initial) B. KIMBERLY A MASSENGILL-BERNARDIN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 8000 BROOKPOINT PLACE		Transaction ID: SA11A1.89503
City State Zip Code WESTERVILLE OH 43081	Amount of Each Receipt this Period 69.42	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME OH CN 8	Occupation ASSOCIATE COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.86	

Full Name (Last, First, Middle Initial) C. CLYDE MAUK		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7
Mailing Address 4842 BRIDGE LANE, APT. #1		Transaction ID: SA11A1.88811
City State Zip Code MASON OH 45050	Amount of Each Receipt this Period 90.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME OH LOC 4	Occupation REGIONAL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional) ▶	224.52
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 99 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

Full Name (Last, First, Middle Initial) A. CLYDE MAUK		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 4842 BRIDGE LANE, APT. #1		Transaction ID: SA11A1.89254	
City MASON	State OH	Amount of Each Receipt this Period 30.00	
Zip Code 45050			
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH LOC 4	Occupation REGIONAL DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. JAMES MAUPIN, JR.		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 535 BIRDWELL CHURCH LANE		Transaction ID: SA11A1.88579	
City CREAL SPRINGS	State IL	Amount of Each Receipt this Period 73.52	
Zip Code 62922			
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation REGIONAL DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.94		

Full Name (Last, First, Middle Initial) C. ELISSA MCBRIDE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 9 Sherman Avenue		Transaction ID: SA11A1.88941	
City Takoma Park	State MD	Amount of Each Receipt this Period 99.66	
Zip Code 20912			
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation DIRECTOR, EDUCATION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 655.17		

SUBTOTAL of Receipts This Page (optional) ▶	203.18
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 100 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. ELISSA MCBRIDE		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 9 Sherman Avenue		Transaction ID: SA11A1.89665	
City State Zip Code Takoma Park MD 20912	Amount of Each Receipt this Period 99.66		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation DIRECTOR, EDUCATION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 754.83		

Full Name (Last, First, Middle Initial) B. MARGARET MCCANN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 103 Lynnmore Drive		Transaction ID: SA11A1.88942	
City State Zip Code Silver Spring MD 20901	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSOCIATE GENERAL COUNSEL II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) C. MARGARET MCCANN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 103 Lynnmore Drive		Transaction ID: SA11A1.89666	
City State Zip Code Silver Spring MD 20901	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSOCIATE GENERAL COUNSEL II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional) ▶	199.66
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 101 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
GARY MCCAULLEY

Mailing Address **84 MIC NAN DRIVE**

City **LONDONBERRY** State **PA** Zip Code **17057**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME PA CN 13** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **302.22**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 12 / 2007

Transaction ID: SA11A1.89041

Amount of Each Receipt this Period
76.60

B. Full Name (Last, First, Middle Initial)
TONY MCCUBBIN

Mailing Address **7740 Cordova Road**

City **Erie** State **IL** Zip Code **61250**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME IL CN 31** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **223.96**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 02 / 2007

Transaction ID: SA11A1.88540

Amount of Each Receipt this Period
56.40

C. Full Name (Last, First, Middle Initial)
BRIAN P MCDONNELL

Mailing Address **1322 Myron Street**

City **Niskayuna** State **NY** Zip Code **12309**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **POLITICAL ACTION COORDINATOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **276.99**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 10 / 2007

Transaction ID: SA11A1.88943

Amount of Each Receipt this Period
39.57

SUBTOTAL of Receipts This Page (optional)	172.57
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:	PAGE 102 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. BRIAN P MCDONNELL		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 1322 Myron Street		Transaction ID: SA11A1.89667	
City State Zip Code Niskayuna NY 12309		Amount of Each Receipt this Period 39.57	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L POLITICAL ACTION COORDINATOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 316.56	

Full Name (Last, First, Middle Initial) B. GERALD MCENTEE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 800 25th Street NW Apt. #406		Transaction ID: SA11A1.88944	
City State Zip Code Washington DC 20037-2207		Amount of Each Receipt this Period 147.11	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L PRESIDENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1029.74	

Full Name (Last, First, Middle Initial) C. GERALD MCENTEE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 800 25th Street NW Apt. #406		Transaction ID: SA11A1.89668	
City State Zip Code Washington DC 20037-2207		Amount of Each Receipt this Period 147.11	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L PRESIDENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1176.85	

SUBTOTAL of Receipts This Page (optional) ▶	333.79
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 103 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. FREDERICK MCGRAW		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 1258 Summerset Way		Transaction ID: SA11A1.89252
City Pickerington State OH Zip Code 43147	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME OH LOC 4	Occupation EDUCATION & RESEARCH DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) B. LYNNE MCGRAW		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address 1258 SOMERSET WAY		Transaction ID: SA11A1.89253
City PICKERINGTON State OH Zip Code 43147	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME OH LOC 4	Occupation DIRECTOR MEM. ACCTG.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) C. THOMAS MCLAUGHLIN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 2056 CAMBRIDGE ROAD		Transaction ID: SA11A1.88586
City SPRINGFIELD State IL Zip Code 62704-4130	Amount of Each Receipt this Period 73.52	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME IL CN 31	Occupation REGIONAL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.94	

SUBTOTAL of Receipts This Page (optional) ▶	133.52
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 104 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

A. Full Name (Last, First, Middle Initial)
PETER M MCLINDEN

Mailing Address 935 PAMELA ROAD

City ANDERSON State OH Zip Code 45255

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH CN 8 Occupation ASSOCIATE COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 324.32

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: SA11A1.89504

Amount of Each Receipt this Period
84.68

B. Full Name (Last, First, Middle Initial)
ORAN MCMICHEAL

Mailing Address 2777 Northtowne Lane, Apt. 2088S

City Reno State NV Zip Code 89512

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES, DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 294.91

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.88945

Amount of Each Receipt this Period
42.13

C. Full Name (Last, First, Middle Initial)
ORAN MCMICHEAL

Mailing Address 2777 Northtowne Lane, Apt. 2088S

City Reno State NV Zip Code 89512

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES, DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 337.04

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.89669

Amount of Each Receipt this Period
42.13

SUBTOTAL of Receipts This Page (optional)	▶	168.94
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 105 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial) LEILA MCMULLEN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 3014 Laurel Avenue		Transaction ID: SA11A1.88946	
City State Zip Code Cheverly MD 20785	Amount of Each Receipt this Period 38.72		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASST. TO SECRETARY TREASURER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 349.76		

B. Full Name (Last, First, Middle Initial) LEILA MCMULLEN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 3014 Laurel Avenue		Transaction ID: SA11A1.89670	
City State Zip Code Cheverly MD 20785	Amount of Each Receipt this Period 38.72		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASST. TO SECRETARY TREASURER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 388.48		

C. Full Name (Last, First, Middle Initial) EDWARD MCNEIL		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 2546 Edison		Transaction ID: SA11A1.88468	
City State Zip Code Detroit MI 48206	Amount of Each Receipt this Period 38.10		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.70		

SUBTOTAL of Receipts This Page (optional) ▶	115.54
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 106 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-ED

Full Name (Last, First, Middle Initial) A. EDWARD MCNEIL		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 2546 Edison		Transaction ID: SA11A1.89306
City State Zip Code Detroit MI 48206	Amount of Each Receipt this Period 38.10	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 304.80	

Full Name (Last, First, Middle Initial) B. EDWARD MCNEIL		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 2546 Edison		Transaction ID: SA11A1.89917
City State Zip Code Detroit MI 48206	Amount of Each Receipt this Period 38.10	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.90	

Full Name (Last, First, Middle Initial) C. LAURIE MERTA		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 9829 59th Street, Court W		Transaction ID: SA11A1.89586
City State Zip Code Tacoma WA 98467-1007	Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME WA CN 28	Occupation CONVENTION FUNDRAISER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	156.20
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 107 / 197
	<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	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial) GLEN MIDDLETON Mailing Address 5108 Yellowwood Ave City State Zip Code Baltimore MD 21209-4611 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7 Transaction ID: SA11A1.89531 Amount of Each Receipt this Period 13.00
Name of Employer AFSCME MD CN 67 Occupation EXECUTIVE DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.04	

B. Full Name (Last, First, Middle Initial) SCOTT D. MILLER Mailing Address 2056 W HUTCHINSON, 2ND FL City State Zip Code CHICAGO IL 60618 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7 Transaction ID: SA11A1.88539 Amount of Each Receipt this Period 66.96
Name of Employer AFSCME IL CN 31 Occupation LEGAL COUNSEL Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.88	

C. Full Name (Last, First, Middle Initial) TIMOTHY MILLER Mailing Address 2724 PINE AVENUE City State Zip Code ALTOONA PA 16601 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7 Transaction ID: SA11A1.89056 Amount of Each Receipt this Period 61.32
Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.28	

SUBTOTAL of Receipts This Page (optional) ▶	141.28
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 108 / 197
	<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	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial) HAROLD F. MITCHELL		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 3999 KENSINGWOOD DRIVE		Transaction ID: SA11A1.89508
City State Zip Code COLUMBUS OH 43230	Amount of Each Receipt this Period 96.33	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME OH CN 8	Occupation ASSISTANT ORGANIZING DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 368.97	

B. Full Name (Last, First, Middle Initial) HARRY MOBLEY		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 2635 Cranberry Circle		Transaction ID: SA11A1.89102
City State Zip Code Harrisburg PA 17110	Amount of Each Receipt this Period 61.32	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.28	

C. Full Name (Last, First, Middle Initial) ERIC MOMBERGER		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 1021 MANOR ROAD		Transaction ID: SA11A1.89071
City State Zip Code NEW KENSINGTON PA 15068	Amount of Each Receipt this Period 61.32	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME PA CN 13	Occupation REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.28	

SUBTOTAL of Receipts This Page (optional) ▶	218.97
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 109 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. KAREN MOMBERGER		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address 1021 MANOR ROAD		Transaction ID: SA11A1.89072	
City NEW KENSINGTON	State PA	Zip Code 15068	Amount of Each Receipt this Period 61.32
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13	Occupation REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.28		

Full Name (Last, First, Middle Initial) B. GEORGE MONTGOMERY		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 6170 Bay Cpur		Transaction ID: SA11A1.88469	
City Waterford	State MI	Zip Code 48327	Amount of Each Receipt this Period 33.84
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MI CN 25	Occupation PARLIAMENTARIAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.88		

Full Name (Last, First, Middle Initial) C. GEORGE MONTGOMERY		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 6170 Bay Cpur		Transaction ID: SA11A1.89307	
City Waterford	State MI	Zip Code 48327	Amount of Each Receipt this Period 33.84
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MI CN 25	Occupation PARLIAMENTARIAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.72		

SUBTOTAL of Receipts This Page (optional) ▶	129.00
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 110 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
 GEORGE MONTGOMERY

Mailing Address 6170 Bay Cpurt

City State Zip Code
 Waterford MI 48327

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME MI CN 25 PARLIAMENTARIAN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 304.56

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.89918

Amount of Each Receipt this Period
 33.84

B. Full Name (Last, First, Middle Initial)
 RHONDA M. MONTGOMERY

Mailing Address 1602 Temperance

City State Zip Code
 Indianapolis IN 46203

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME INT'L REGIONAL FIELD ADMINISTRATOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.44

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.88947

Amount of Each Receipt this Period
 32.92

C. Full Name (Last, First, Middle Initial)
 RHONDA M. MONTGOMERY

Mailing Address 1602 Temperance

City State Zip Code
 Indianapolis IN 46203

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME INT'L REGIONAL FIELD ADMINISTRATOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 263.36

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.89671

Amount of Each Receipt this Period
 32.92

SUBTOTAL of Receipts This Page (optional)	99.68
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 111 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. RUTH MONTGOMERY		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 6170 BAY COURT		Transaction ID: SA11A1.88470	
City WATERFORD	State MI	Zip Code 48327	Amount of Each Receipt this Period 33.84
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MI CN 25	Occupation ADMINISTRATIVE DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.88		

Full Name (Last, First, Middle Initial) B. RUTH MONTGOMERY		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 6170 BAY COURT		Transaction ID: SA11A1.89308	
City WATERFORD	State MI	Zip Code 48327	Amount of Each Receipt this Period 33.84
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MI CN 25	Occupation ADMINISTRATIVE DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.72		

Full Name (Last, First, Middle Initial) C. RUTH MONTGOMERY		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 6170 BAY COURT		Transaction ID: SA11A1.89919	
City WATERFORD	State MI	Zip Code 48327	Amount of Each Receipt this Period 33.84
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MI CN 25	Occupation ADMINISTRATIVE DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 304.56		

SUBTOTAL of Receipts This Page (optional) ▶	101.52
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 112 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

Full Name (Last, First, Middle Initial) A. DOUGLAS MOORE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 79 Putnam Street		Transaction ID: SA11A1.88948
City State Zip Code San Francisco CA 94110	Amount of Each Receipt this Period 45.92	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation ASSISTANT TO REGIONAL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 317.72	

Full Name (Last, First, Middle Initial) B. DOUGLAS MOORE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 79 Putnam Street		Transaction ID: SA11A1.89672
City State Zip Code San Francisco CA 94110	Amount of Each Receipt this Period 46.54	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation ASSISTANT TO REGIONAL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 364.26	

Full Name (Last, First, Middle Initial) C. PATRICK G MORAN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 415 U Street, NW		Transaction ID: SA11A1.88950
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 39.91	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation AREA ORGANIZING DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 296.88	

SUBTOTAL of Receipts This Page (optional) ▶	132.37
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 113 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial) PATRICK G MORAN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 415 U Street, NW		Transaction ID: SA11A1.89674
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 41.01	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation AREA ORGANIZING DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.89	

B. Full Name (Last, First, Middle Initial) MICHAEL B MORRELL		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 8446 Grafton Ave S		Transaction ID: SA11A1.88858
City State Zip Code Cottage Grove MN 55016	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME MN CN 5	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

C. Full Name (Last, First, Middle Initial) JEANNE MORRIS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 2315 Reddings Run Road		Transaction ID: SA11A1.89045
City State Zip Code Home PA 15747	Amount of Each Receipt this Period 61.32	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.28	

SUBTOTAL of Receipts This Page (optional) ▶	177.33
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 114 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

A. Full Name (Last, First, Middle Initial)
PATRICIA MOSS

Mailing Address 9583 DUCAN PLAINS ROAD

City JOHNSTOWN State OH Zip Code 43031-9305

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH CN 8 Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 534.94

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 7

Transaction ID: SA11A1.89512

Amount of Each Receipt this Period
125.56

B. Full Name (Last, First, Middle Initial)
PATRICIA MOSS

Mailing Address 9583 DUCAN PLAINS ROAD

City JOHNSTOWN State OH Zip Code 43031-9305

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH CN 8 Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 547.94

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 4 / 2 0 0 7

Transaction ID: SA11A1.89532

Amount of Each Receipt this Period
13.00

C. Full Name (Last, First, Middle Initial)
MICHELLE MULHERIN

Mailing Address 2462 CLEVELAND AVENUE

City WEST WYOMISSING State PA Zip Code 19609

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13 Occupation REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.28

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.89103

Amount of Each Receipt this Period
61.32

SUBTOTAL of Receipts This Page (optional)	199.88
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 115 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
LAWRENCE MURIN

Mailing Address **500 N. 26TH STREET**

City **READING** State **PA** Zip Code **19606**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME PA CN 13** Occupation **ASSISTANT DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **292.06**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 12 / 2007

Transaction ID: SA11A1.89104

Amount of Each Receipt this Period
74.02

B. Full Name (Last, First, Middle Initial)
MICHAEL D. MURPHY

Mailing Address **4221 Wanetah Trail**

City **Madison** State **WI** Zip Code **53711**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME WI CN 40** Occupation **FIELD ORGANIZER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2007

Transaction ID: SA11A1.89533

Amount of Each Receipt this Period
26.00

C. Full Name (Last, First, Middle Initial)
PHYLLIS NAIAD

Mailing Address **13304 58th Drive NE**

City **Marysville** State **WA** Zip Code **98271**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME WA CN 28** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **679.38**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 26 / 2007

Transaction ID: SA11A1.89587

Amount of Each Receipt this Period
52.26

SUBTOTAL of Receipts This Page (optional)	152.28
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 116 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
JAMES NEBLETT

Mailing Address **17635 GREENVIEW**

City **DETROIT** State **MI** Zip Code **48219-3588**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME MI CN 25** Occupation **ADMINISTRATIVE DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **234.85**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 02 / 2007

Transaction ID: SA11A1.88471

Amount of Each Receipt this Period
33.55

B. Full Name (Last, First, Middle Initial)
JAMES NEBLETT

Mailing Address **17635 GREENVIEW**

City **DETROIT** State **MI** Zip Code **48219-3588**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME MI CN 25** Occupation **ADMINISTRATIVE DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **268.40**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 20 / 2007

Transaction ID: SA11A1.89309

Amount of Each Receipt this Period
33.55

C. Full Name (Last, First, Middle Initial)
JAMES NEBLETT

Mailing Address **17635 GREENVIEW**

City **DETROIT** State **MI** Zip Code **48219-3588**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME MI CN 25** Occupation **ADMINISTRATIVE DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **301.95**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 30 / 2007

Transaction ID: SA11A1.89920

Amount of Each Receipt this Period
33.55

SUBTOTAL of Receipts This Page (optional)	100.65
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 117 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
 CYNTHIA NELSON

Mailing Address 2648 GARFIELD STREET NE

City State Zip Code
MINNEAPOLIS MN 55418

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME MN CN 14 BUSINESS REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **248.58**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 10 2007

Transaction ID: SA11A1.88856

Amount of Each Receipt this Period
62.60

B. Full Name (Last, First, Middle Initial)
 MATTHEW NELSON

Mailing Address 909 Carmen Lane

City State Zip Code
Mendota Heights MN 55406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME MN CN 14 BUSINESS REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **273.50**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 10 2007

Transaction ID: SA11A1.88854

Amount of Each Receipt this Period
65.10

C. Full Name (Last, First, Middle Initial)
 JESSE NEWCOMER IV

Mailing Address 2109 Circle Road

City State Zip Code
Carlisle PA 17013

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME PA CN 13 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **271.78**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 12 2007

Transaction ID: SA11A1.89046

Amount of Each Receipt this Period
68.88

SUBTOTAL of Receipts This Page (optional) ► **196.58**

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 118 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
MICHAEL NEWMAN

Mailing Address **4031 N. HERMITAGE AVENUE**

City **CHICAGO** State **IL** Zip Code **60613**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME IL CN 31** Occupation **ASSOCIATE DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **334.44**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 02 / 2007

Transaction ID: SA11A1.88596

Amount of Each Receipt this Period
84.22

B. Full Name (Last, First, Middle Initial)
JAMES B NILAND

Mailing Address **2728 Pleasant Ave**

City **Minneapolis** State **MN** Zip Code **55408**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME MN CN 5** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **418.30**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 10 / 2007

Transaction ID: SA11A1.88855

Amount of Each Receipt this Period
102.54

C. Full Name (Last, First, Middle Initial)
JOSEPH NILSSON

Mailing Address **3215 Eastland CIR SE**

City **Olympia** State **WA** Zip Code **98501**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME WA CN 28** Occupation **CLERICAL**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 26 / 2007

Transaction ID: SA11A1.89603

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)	201.76
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 119 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

Full Name (Last, First, Middle Initial) A. LORRAINE M O'HARA		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 5308 Wehawken Road		Transaction ID: SA11A1.88952	
City State Zip Code Bethesda MD 20816	Amount of Each Receipt this Period 57.01		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation DIRECTOR, PEOPLE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 399.07		

Full Name (Last, First, Middle Initial) B. LORRAINE M O'HARA		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 5308 Wehawken Road		Transaction ID: SA11A1.89676	
City State Zip Code Bethesda MD 20816	Amount of Each Receipt this Period 57.01		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation DIRECTOR, PEOPLE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 456.08		

Full Name (Last, First, Middle Initial) C. TRAVIS OHM		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address 8 HIGHLAND ROAD		Transaction ID: SA11A1.89047	
City State Zip Code SEVEN VALLEYS PA 17360	Amount of Each Receipt this Period 74.02		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 292.06		

SUBTOTAL of Receipts This Page (optional) ▶	188.04
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 120 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. RUSSELL K. OKATA		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 1015 Wilder Avenue #203		Transaction ID: SA11A1.89335
City State Zip Code Honolulu HI 96822-2655	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME HI LOC 152	Occupation EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 439.00	

Full Name (Last, First, Middle Initial) B. RUSSELL K. OKATA		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 1015 Wilder Avenue #203		Transaction ID: SA11A1.89535
City State Zip Code Honolulu HI 96822-2655	Amount of Each Receipt this Period 13.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME HI LOC 152	Occupation EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 452.00	

Full Name (Last, First, Middle Initial) C. SUSAN M. OSTHUS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 5200 DEERWOOD LAKE DRIVE		Transaction ID: SA11A1.88544
City State Zip Code SPRINGFIELD IL 62703	Amount of Each Receipt this Period 66.96	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME IL CN 31	Occupation LEGAL COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.88	

SUBTOTAL of Receipts This Page (optional) ▶	179.96
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 121 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
VICTOR OSUNA

Mailing Address **615 S. Second Street**

City **Springfield** State **IL** Zip Code **62705-2328**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME IL CN 31** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **238.96**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 02 / 2007

Transaction ID: SA11A1.88532

Amount of Each Receipt this Period
60.18

B. Full Name (Last, First, Middle Initial)
GERALD OTTEN

Mailing Address **2905 Evergreen Way**

City **Ellicott City** State **MD** Zip Code **21042**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **BENEFITS MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **259.79**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 10 / 2007

Transaction ID: SA11A1.88953

Amount of Each Receipt this Period
37.69

C. Full Name (Last, First, Middle Initial)
GERALD OTTEN

Mailing Address **2905 Evergreen Way**

City **Ellicott City** State **MD** Zip Code **21042**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **BENEFITS MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **297.48**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 25 / 2007

Transaction ID: SA11A1.89677

Amount of Each Receipt this Period
37.69

SUBTOTAL of Receipts This Page (optional)	135.56
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 122 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

A. Full Name (Last, First, Middle Initial)
HAROLD PALMER, JR

Mailing Address 7565 LIDDESDALE BLVD.

City State Zip Code
BLACKLICK OH 43004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME OH LOC 4 REGIONAL DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.88803

Amount of Each Receipt this Period
90.00

B. Full Name (Last, First, Middle Initial)
HAROLD PALMER, JR

Mailing Address 7565 LIDDESDALE BLVD.

City State Zip Code
BLACKLICK OH 43004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME OH LOC 4 REGIONAL DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 8 / 2 0 0 7

Transaction ID: SA11A1.89251

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
CHERYL PARISI

Mailing Address 1932 WALCOTT WAY

City State Zip Code
LOS ANGELES CA 90039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME CA CN 36 BUSINESS REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.88830

Amount of Each Receipt this Period
70.00

SUBTOTAL of Receipts This Page (optional)	▶	190.00
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 123 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

Full Name (Last, First, Middle Initial) A. CHERYL PARISI		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address 1932 WALCOTT WAY		Transaction ID: SA11A1.89017	
City LOS ANGELES	State CA	Zip Code 90039	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME CA CN 36	Occupation BUSINESS REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name (Last, First, Middle Initial) B. DEBORAH JO PATTON		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 29 N Wacker		Transaction ID: SA11A1.88534	
City Chicago	State IL	Zip Code 60606	Amount of Each Receipt this Period 65.16
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 258.74		

Full Name (Last, First, Middle Initial) C. BARRY PEARCE		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address 130 N. WILSON STREET		Transaction ID: SA11A1.89057	
City BELLEFONTE	State PA	Zip Code 16823	Amount of Each Receipt this Period 61.32
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13	Occupation REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.28		

SUBTOTAL of Receipts This Page (optional) ▶	136.48
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:	PAGE 124 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. WILLIE L PELOTE		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 351 Ross Way		Transaction ID: SA11A1.88955
City State Zip Code Sacramento CA 95864	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 47.82
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, POLITICAL ACTION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.74	

Full Name (Last, First, Middle Initial) B. WILLIE L PELOTE		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 351 Ross Way		Transaction ID: SA11A1.89408
City State Zip Code Sacramento CA 95864	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 90.00
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, POLITICAL ACTION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 424.74	

Full Name (Last, First, Middle Initial) C. WILLIE L PELOTE		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 351 Ross Way		Transaction ID: SA11A1.89679
City State Zip Code Sacramento CA 95864	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 47.82
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, POLITICAL ACTION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 472.56	

SUBTOTAL of Receipts This Page (optional)	185.64
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 125 / 197
	<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	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

Full Name (Last, First, Middle Initial) A. JOANNE M PELS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 6987 County 38 NW		Transaction ID: SA11A1.88852
City Walker	State MN	Zip Code 56484
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 68.52
Name of Employer AFSCME MN CN 6	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 289.08	

Full Name (Last, First, Middle Initial) B. ELIZABETH PERROW		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 958 N. Harrison Street		Transaction ID: SA11A1.88957
City Arlington	State VA	Zip Code 22205
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.72
Name of Employer AFSCME INT'L	Occupation ASSISTANT TO JUD. PANEL CHAIRPERSON	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.04	

Full Name (Last, First, Middle Initial) C. ELIZABETH PERROW		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 958 N. Harrison Street		Transaction ID: SA11A1.89681
City Arlington	State VA	Zip Code 22205
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.72
Name of Employer AFSCME INT'L	Occupation ASSISTANT TO JUD. PANEL CHAIRPERSON	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 309.76	

SUBTOTAL of Receipts This Page (optional)	▶	145.96
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 126 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
MICHAEL S. PERRY

Mailing Address **313 SHERIDAN ROAD**

City **WILMETTE** State **IL** Zip Code **60091**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME IL CN 31** Occupation **DIRECTOR EMP. INV. DEV. & TRAINING**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **258.76**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 02 / 2007

Transaction ID: SA11A1.88549

Amount of Each Receipt this Period
65.16

B. Full Name (Last, First, Middle Initial)
STEVAN P. PICKARD

Mailing Address **3325 CAPRICIO STREET NE**

City **CANTON** State **OH** Zip Code **44721-2702**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME OH CN 8** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.20**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 23 / 2007

Transaction ID: SA11A1.89515

Amount of Each Receipt this Period
60.52

C. Full Name (Last, First, Middle Initial)
RONALD W PITTS

Mailing Address **2001-A Industrial Drive**

City **Marion** State **IL** Zip Code **62959**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME IL CN 31** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **249.81**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 02 / 2007

Transaction ID: SA11A1.88598

Amount of Each Receipt this Period
62.66

SUBTOTAL of Receipts This Page (optional)	188.34
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 127 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

Full Name (Last, First, Middle Initial) A. JOSEPH PLUGER		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 605 South Jackson		Transaction ID: SA11A1.88526
City State Zip Code Gardner IL 60424	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 56.40
Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 223.96	

Full Name (Last, First, Middle Initial) B. KEVAN L. PLUMLEE		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 14039 ALLEN ROAD		Transaction ID: SA11A1.88551
City State Zip Code CARTERVILLE IL 62918	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 60.18
Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.96	

Full Name (Last, First, Middle Initial) C. NICOLE R POLLARD		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 9404 Nicklaus Lane		Transaction ID: SA11A1.88958
City State Zip Code Laurel MD 20708	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 45.33
Name of Employer AFSCME INT'L	Occupation ASSOCIATE GENERAL COUNSEL I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 317.31	

SUBTOTAL of Receipts This Page (optional)	161.91
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 128 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
 NICOLE R POLLARD

Mailing Address 9404 Nicklaus Lane

City State Zip Code
 Laurel MD 20708

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME INT'L ASSOCIATE GENERAL COUNSEL I

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 362.64

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.89682

Amount of Each Receipt this Period
 45.33

B. Full Name (Last, First, Middle Initial)
 KENNETH POTOCKI

Mailing Address 17614 MANHATTEN ROAD

City State Zip Code
 ELWOOD IL 60421-9419

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME IL CN 31 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 282.60

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.88599

Amount of Each Receipt this Period
 73.52

C. Full Name (Last, First, Middle Initial)
 GREGORY POWELL

Mailing Address 11505 Circle Drive

City State Zip Code
 Austin TX 78748

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME TX LOC 1624 VICE PRESIDENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 335.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 6 / 2 0 0 7

Transaction ID: SA11A1.89190

Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)	158.85
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 129 / 197		
	<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

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. GREGORY POWELL		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 11505 Circle Drive		Transaction ID: SA11A1.89537	
City State Zip Code Austin TX 78748	Amount of Each Receipt this Period 65.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME TX LOC 1624	Occupation VICE PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) B. SALLY A POWLESS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 2410 WESTBROOK DRIVE		Transaction ID: SA11A1.89474	
City State Zip Code TOLEDO OH 43613-3921	Amount of Each Receipt this Period 84.68		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH CN 8	Occupation LEAD STAFF ORGANIZER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 324.32		

Full Name (Last, First, Middle Initial) C. ZOLLIE RAYNER		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address P. O. BOX 51		Transaction ID: SA11A1.89081	
City State Zip Code Albion PA 16401	Amount of Each Receipt this Period 61.32		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.28		

SUBTOTAL of Receipts This Page (optional) ▶	211.00
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 130 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

Full Name (Last, First, Middle Initial) A. TERRY REED		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 2737 Yellowrock Place		Transaction ID: SA11A1.88959	
City State Zip Code Hilliard OH 43026		Amount of Each Receipt this Period 42.13	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L AREA FIELD SERVICES DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 294.91	

Full Name (Last, First, Middle Initial) B. TERRY REED		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 2737 Yellowrock Place		Transaction ID: SA11A1.89683	
City State Zip Code Hilliard OH 43026		Amount of Each Receipt this Period 42.13	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L AREA FIELD SERVICES DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 337.04	

Full Name (Last, First, Middle Initial) C. STEPHEN REGENSTREIF		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 3214 38th Street NW		Transaction ID: SA11A1.88960	
City State Zip Code WASHINGTON DC 20016		Amount of Each Receipt this Period 57.01	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L DIRECTOR, RETIREE PROGRAMS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 399.07	

SUBTOTAL of Receipts This Page (optional) ▶	141.27
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 131 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

A. Full Name (Last, First, Middle Initial) STEPHEN REGENSTREIF		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 3214 38th Street NW		Transaction ID: SA11A1.89684
City State Zip Code WASHINGTON DC 20016	Amount of Each Receipt this Period 57.01	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation DIRECTOR, RETIREE PROGRAMS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 456.08	

B. Full Name (Last, First, Middle Initial) LAURA REISDORPH		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 1212 Jefferson St. SE		Transaction ID: SA11A1.89590
City State Zip Code Olympia WA 98501	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME WA CN 28	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

C. Full Name (Last, First, Middle Initial) DEAN REYNOLDS, III		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address R. R. 1 , BOX 512		Transaction ID: SA11A1.89087
City State Zip Code JERSEY SHORE PA 17740	Amount of Each Receipt this Period 61.32	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME PA CN 13	Occupation REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.28	

SUBTOTAL of Receipts This Page (optional) ▶	138.33
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 132 / 197
	<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	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

A. Full Name (Last, First, Middle Initial) LISA RICE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 1456 Greenmont Court		Transaction ID: SA11A1.88961	
City State Zip Code Reston VA 20190		Amount of Each Receipt this Period 35.70	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L PROJECT COORDINATOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 259.50	

B. Full Name (Last, First, Middle Initial) LISA RICE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 1456 Greenmont Court		Transaction ID: SA11A1.89685	
City State Zip Code Reston VA 20190		Amount of Each Receipt this Period 35.70	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L PROJECT COORDINATOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 295.20	

C. Full Name (Last, First, Middle Initial) SHAWN E RICHARDSON		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7	
Mailing Address 6688 Markwood St.		Transaction ID: SA11A1.89154	
City State Zip Code Worthington OH 43085		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation STATE OF OHIO TRANSPORTATION			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.00	

SUBTOTAL of Receipts This Page (optional) ▶	111.40
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 133 / 197
	<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	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. SHAWN E RICHARDSON		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 6688 Markwood St.		Transaction ID: SA11A1.89756	
City State Zip Code Worthington OH 43085		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C			
Name of Employer STATE OF OHIO Occupation TRANSPORTATION			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) B. PETER RICKERT		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address 722 E. FRONT STREET		Transaction ID: SA11A1.89088	
City State Zip Code DANVILLE PA 17821		Amount of Each Receipt this Period 61.32	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13 Occupation REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 245.28	

Full Name (Last, First, Middle Initial) C. DIANE RIGOTTI		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 10261 FENNER ROAD		Transaction ID: SA11A1.88472	
City State Zip Code PERRY MI 48878		Amount of Each Receipt this Period 38.10	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MI CN 25 Occupation SPECIAL ASSISTANT TO THE PRESIDENT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 266.70	

SUBTOTAL of Receipts This Page (optional) ▶	139.42
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:	PAGE 134 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

A. Full Name (Last, First, Middle Initial) DIANE RIGOTTI		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 10261 FENNER ROAD		Transaction ID: SA11A1.89310	
City State Zip Code PERRY MI 48878	Amount of Each Receipt this Period 38.10		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MI CN 25	Occupation SPECIAL ASSISTANT TO THE PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 304.80		

B. Full Name (Last, First, Middle Initial) DIANE RIGOTTI		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 10261 FENNER ROAD		Transaction ID: SA11A1.89921	
City State Zip Code PERRY MI 48878	Amount of Each Receipt this Period 38.10		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MI CN 25	Occupation SPECIAL ASSISTANT TO THE PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.90		

C. Full Name (Last, First, Middle Initial) THOMAS J. RITCHIE, JR.		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 1644 SPAULDING ROAD		Transaction ID: SA11A1.89471	
City State Zip Code DAYTON OH 45432	Amount of Each Receipt this Period 95.53		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH CN 8	Occupation REGIONAL DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.89		

SUBTOTAL of Receipts This Page (optional) ▶	171.73
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 135 / 197
	<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	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

Full Name (Last, First, Middle Initial) A. CLAUDIA ROBERSON		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 7340 S. YATES 2ND FLOOR		Transaction ID: SA11A1.88600	
City State Zip Code CHICAGO IL 60649	Amount of Each Receipt this Period 84.22		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation ASSOCIATE DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.44		

Full Name (Last, First, Middle Initial) B. STEPHEN M. ROBERTS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 1115 Wisconsin Blvd APT# B		Transaction ID: SA11A1.89470	
City State Zip Code Dayton OH 45408	Amount of Each Receipt this Period 60.52		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH CN 8	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.20		

Full Name (Last, First, Middle Initial) C. JESSICA R ROBINSON		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 7901 Chicago Avenue		Transaction ID: SA11A1.88963	
City State Zip Code SilverSpring MD 20910	Amount of Each Receipt this Period 43.17		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSOCIATE GENERAL COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 292.87		

SUBTOTAL of Receipts This Page (optional) ▶	187.91
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 136 / 197
	<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	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

A. Full Name (Last, First, Middle Initial)
JESSICA R ROBINSON

Mailing Address 7901 Chicago Avenue

City State Zip Code
SilverSpring MD 20910

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME INT'L ASSOCIATE GENERAL COUNSEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 336.04

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.89687

Amount of Each Receipt this Period
43.17

B. Full Name (Last, First, Middle Initial)
YVONNE ROBINSON

Mailing Address 112444 S Carpenter Street

City State Zip Code
Calumet Park IL 60827

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME IL CN 31 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 238.96

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.88572

Amount of Each Receipt this Period
60.18

C. Full Name (Last, First, Middle Initial)
LYNN ANN RODENHUIS

Mailing Address 9135 Cowenton Avenue

City State Zip Code
Perry Hall MD 21128

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME INT'L AREA ORGANIZING DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 274.07

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.88964

Amount of Each Receipt this Period
39.91

SUBTOTAL of Receipts This Page (optional)	▶	143.26
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 137 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-ED

A. Full Name (Last, First, Middle Initial)
LYNN ANN RODENHUIS

Mailing Address 9135 Cowenton Avenue

City State Zip Code
Perry Hall MD 21128

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME INT'L AREA ORGANIZING DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 313.98

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.89688

Amount of Each Receipt this Period
39.91

B. Full Name (Last, First, Middle Initial)
LAWRENCE ROEHRIG

Mailing Address 13084 LIA COURT

City State Zip Code
LINDON MI 48451

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME MI CN 25 SECRETARY - TREASURER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 349.86

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.88473

Amount of Each Receipt this Period
49.98

C. Full Name (Last, First, Middle Initial)
LAWRENCE ROEHRIG

Mailing Address 13084 LIA COURT

City State Zip Code
LINDON MI 48451

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME MI CN 25 SECRETARY - TREASURER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 399.84

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.89313

Amount of Each Receipt this Period
49.98

SUBTOTAL of Receipts This Page (optional)	▶	139.87
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 138 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

Full Name (Last, First, Middle Initial) A. LAWRENCE ROEHRIG		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 13084 LIA COURT		Transaction ID: SA11A1.89923	
City LINDON	State MI	Zip Code 48451	Amount of Each Receipt this Period 49.98
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MI CN 25	Occupation SECRETARY - TREASURER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 449.82		

Full Name (Last, First, Middle Initial) B. CHARLES ROGINSKI		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 6124 CRYSTAL VALLEY DRIVE		Transaction ID: SA11A1.89250	
City GALENA	State OH	Zip Code 43021	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH LOC 4	Occupation REGIONAL DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00		

Full Name (Last, First, Middle Initial) C. ETHAN ROME		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 1414 17th Street NW, Apt. 603		Transaction ID: SA11A1.88965	
City WASHINGTON	State DC	Zip Code 20036	Amount of Each Receipt this Period 66.44
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation DIRECTOR, PUBLIC AFFAIRS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 465.08		

SUBTOTAL of Receipts This Page (optional) ▶	146.42
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 139 / 197
	<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	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial) ETHAN ROME		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 1414 17th Street NW, Apt. 603		Transaction ID: SA11A1.89689	
City State Zip Code WASHINGTON DC 20036	Amount of Each Receipt this Period 66.44		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation DIRECTOR, PUBLIC AFFAIRS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 531.52		

B. Full Name (Last, First, Middle Initial) JOYCE L ROONEY		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 13080 Dronfield Avenue #73		Transaction ID: SA11A1.89236	
City State Zip Code Sylmar CA 91342	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CITY OF WEST HOLLYWOOD	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

C. Full Name (Last, First, Middle Initial) JOYCE L ROONEY		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 13080 Dronfield Avenue #73		Transaction ID: SA11A1.89779	
City State Zip Code Sylmar CA 91342	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer CITY OF WEST HOLLYWOOD	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00		

SUBTOTAL of Receipts This Page (optional) ▶	291.44
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 140 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. MICHAEL ROSS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 9432 S. HARDING		Transaction ID: SA11A1.88548	
City EVERGREEN PARK	State IL	Zip Code 60805	Amount of Each Receipt this Period 60.18
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.96		

Full Name (Last, First, Middle Initial) B. JOSEPH K. ROWE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address 34 LAKESIDE DRIVE		Transaction ID: SA11A1.89048	
City HONESDALE	State PA	Zip Code 18431	Amount of Each Receipt this Period 76.60
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13	Occupation REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 302.22		

Full Name (Last, First, Middle Initial) C. JOSEPH RUGOLA		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7	
Mailing Address 4771 POWDERHORN LANE		Transaction ID: SA11A1.88799	
City WESTERVILLE	State OH	Zip Code 43081	Amount of Each Receipt this Period 210.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH LOC 4	Occupation EXECUTIVE DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 529.00		

SUBTOTAL of Receipts This Page (optional) ▶	346.78
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:	PAGE 141 / 197						
	(check only one)							
	<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

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. JOSEPH RUGOLA		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 4771 POWDERHORN LANE		Transaction ID: SA11A1.89540	
City WESTERVILLE	State OH	Zip Code 43081	Amount of Each Receipt this Period 13.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH LOC 4	Occupation EXECUTIVE DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 542.00		

Full Name (Last, First, Middle Initial) B. JOSEPH RUGOLA		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 4771 POWDERHORN LANE		Transaction ID: SA11A1.89545	
City WESTERVILLE	State OH	Zip Code 43081	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH LOC 4	Occupation EXECUTIVE DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 572.00		

Full Name (Last, First, Middle Initial) C. VEDA RUGOLA		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 4771 POWDERHORN LN		Transaction ID: SA11A1.89546	
City WESTERVILLE	State OH	Zip Code 43081	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH LOC 4	Occupation REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00		

SUBTOTAL of Receipts This Page (optional) ▶	73.00
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 142 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
 LISABETH L. RYDER

Mailing Address 1514 Peralta Street

City State Zip Code
 Oakland CA 94607

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME INT'L REGIONAL FIELD ADMINISTRATOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.44

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.88966

Amount of Each Receipt this Period
 32.92

B. Full Name (Last, First, Middle Initial)
 LISABETH L. RYDER

Mailing Address 1514 Peralta Street

City State Zip Code
 Oakland CA 94607

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME INT'L REGIONAL FIELD ADMINISTRATOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 263.36

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.89690

Amount of Each Receipt this Period
 32.92

C. Full Name (Last, First, Middle Initial)
 GEORGE SACHARIAN

Mailing Address 126 S. LYNN BLVD.

City State Zip Code
 UPPER DARBY PA 19082

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME PA CN 13 REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 245.28

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.89105

Amount of Each Receipt this Period
 61.32

SUBTOTAL of Receipts This Page (optional)	127.16
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 143 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

Full Name (Last, First, Middle Initial) A. WILLIAM SAMS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 6200 GARBER ROAD		Transaction ID: SA11A1.89469	
City State Zip Code DAYTON OH 45415		Amount of Each Receipt this Period 84.68	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH CN 8		Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 324.32	

Full Name (Last, First, Middle Initial) B. WILLIAM SARVER		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 1804 S. COUNTRY CLUB ROAD		Transaction ID: SA11A1.88587	
City State Zip Code DECATUR IL 62521-4462		Amount of Each Receipt this Period 75.14	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31		Occupation BUSINESS MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 298.36	

Full Name (Last, First, Middle Initial) C. LEE ALAN SAUNDERS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 7510 Alaska Avenue NW		Transaction ID: SA11A1.88968	
City State Zip Code WASHINGTON DC 20012		Amount of Each Receipt this Period 86.83	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L		Occupation EXECUTIVE ASSISTANT TO PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 607.81	

SUBTOTAL of Receipts This Page (optional) ▶	246.65
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 144 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial) LEE ALAN SAUNDERS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 7510 Alaska Avenue NW		Transaction ID: SA11A1.89692
City State Zip Code WASHINGTON DC 20012	Amount of Each Receipt this Period 86.83	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation EXECUTIVE ASSISTANT TO PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 694.64	

B. Full Name (Last, First, Middle Initial) MARIANNE SAUNDERS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 116 Boulevard of the Allies		Transaction ID: SA11A1.89074
City State Zip Code Pittsburgh PA 15222	Amount of Each Receipt this Period 51.28	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.12	

C. Full Name (Last, First, Middle Initial) BELINDA C SAVERINO		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 11007 Pompey Drive		Transaction ID: SA11A1.88969
City State Zip Code Upper Malboro MD 20772	Amount of Each Receipt this Period 42.47	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation EXECUTIVE OFFICE ADMINISTRATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 297.29	

SUBTOTAL of Receipts This Page (optional) ▶	180.58
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: PAGE 145 / 197 (check only one) <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
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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial) BELINDA C SAVERINO Mailing Address 11007 Pompey Drive <hr/> City State Zip Code Upper Malboro MD 20772 <hr/> FEC ID number of contributing federal political committee. C <hr/> Name of Employer Occupation AFSCME INT'L EXECUTIVE OFFICE ADMINISTRATOR <hr/> Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 339.76	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.89693 <hr/> Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">42.47</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	5		2	0	0	7												

B. Full Name (Last, First, Middle Initial) LAWRENCE SCANLON Mailing Address 1108 Duke Street <hr/> City State Zip Code Alexandria VA 22314-3514 <hr/> FEC ID number of contributing federal political committee. C <hr/> Name of Employer Occupation AFSCME INT'L DIRECTOR, POLITICAL ACTION <hr/> Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 482.76	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.88970 <hr/> Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">70.86</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	0		2	0	0	7												

C. Full Name (Last, First, Middle Initial) LAWRENCE SCANLON Mailing Address 1108 Duke Street <hr/> City State Zip Code Alexandria VA 22314-3514 <hr/> FEC ID number of contributing federal political committee. C <hr/> Name of Employer Occupation AFSCME INT'L DIRECTOR, POLITICAL ACTION <hr/> Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 553.62	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.89694 <hr/> Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 5px; text-align: right;">70.86</div>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	5		2	0	0	7												

SUBTOTAL of Receipts This Page (optional)	<div style="border: 1px solid black; padding: 5px;">184.19</div>
TOTAL This Period (last page this line number only)	<div style="border: 1px solid black; padding: 5px; height: 20px;"></div>

**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 146 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

Full Name (Last, First, Middle Initial) A. PETER SCHMALZ		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 1227 N. RIDGELAND AVENUE		Transaction ID: SA11A1.88583
City State Zip Code OAK PARK IL 60302	Amount of Each Receipt this Period 73.52	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME IL CN 31	Occupation REGIONAL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.94	

Full Name (Last, First, Middle Initial) B. JAMES SCHMITZ		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 15237 Dufief Drive		Transaction ID: SA11A1.88971
City State Zip Code North Potomac MD 20878	Amount of Each Receipt this Period 70.86	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation DIRECTOR, ORGANIZING & FIELD SVCS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 482.76	

Full Name (Last, First, Middle Initial) C. JAMES SCHMITZ		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 15237 Dufief Drive		Transaction ID: SA11A1.89695
City State Zip Code North Potomac MD 20878	Amount of Each Receipt this Period 70.86	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation DIRECTOR, ORGANIZING & FIELD SVCS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 553.62	

SUBTOTAL of Receipts This Page (optional) ▶	215.24
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 147 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
ALBERT SCHNAUFER

Mailing Address **400 SOUTH FLOWER #65**

City **ORANGE** State **CA** Zip Code **92868**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME CA CN 36** Occupation **BUSINESS REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **214.80**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 09 / 2007

Transaction ID: SA11A1.88829

Amount of Each Receipt this Period
62.40

B. Full Name (Last, First, Middle Initial)
MARY SCHWANGER

Mailing Address **419 VALLEY STREET**

City **MARYSVILLE** State **PA** Zip Code **17053**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME PA CN 13** Occupation **REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **409.56**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 12 / 2007

Transaction ID: SA11A1.89121

Amount of Each Receipt this Period
103.80

C. Full Name (Last, First, Middle Initial)
SHELLEY K SEEBERG

Mailing Address **13096 Charlston Way**

City **Rosemount** State **ND** Zip Code **55068**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **279.67**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 10 / 2007

Transaction ID: SA11A1.88972

Amount of Each Receipt this Period
37.81

SUBTOTAL of Receipts This Page (optional)	204.01
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:	PAGE 148 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. SHELLEY K SEEBERG		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 13096 Charlston Way		Transaction ID: SA11A1.89696
City State Zip Code Rosemount ND 55068	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 37.81
Name of Employer AFSCME INT'L	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 317.48	

Full Name (Last, First, Middle Initial) B. JOHN SEFERIAN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 1425 Foxhall Road NW		Transaction ID: SA11A1.88973
City State Zip Code WASHINGTON DC 20007	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 78.81
Name of Employer AFSCME INT'L	Occupation CHAIRPERSON, JUDICIAL PANEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 551.67	

Full Name (Last, First, Middle Initial) C. JOHN SEFERIAN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 1425 Foxhall Road NW		Transaction ID: SA11A1.89697
City State Zip Code WASHINGTON DC 20007	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 78.81
Name of Employer AFSCME INT'L	Occupation CHAIRPERSON, JUDICIAL PANEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.48	

SUBTOTAL of Receipts This Page (optional)	195.43
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 149 / 197
	<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	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. ELIOT A SEIDE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 300 Hardman Avenue		Transaction ID: SA11A1.88851
City State Zip Code South St. Paul MN 55075	Amount of Each Receipt this Period 87.72	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME MN CN 5	Occupation DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 348.32	

Full Name (Last, First, Middle Initial) B. JERRY SERFLING		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 2388 HIDDEN VALLEY LANE		Transaction ID: SA11A1.88850
City State Zip Code STILLWATER MN 55082	Amount of Each Receipt this Period 72.46	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME MN CN 14	Occupation ASSISTANT DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 302.72	

Full Name (Last, First, Middle Initial) C. MICHELLE A SFORZA		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 415 U Street, NW		Transaction ID: SA11A1.88974
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 40.66	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation ASST. DIRECTOR, STRATEGIC AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 284.62	

SUBTOTAL of Receipts This Page (optional) ▶	200.84
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 150 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
MICHELLE A SFORZA

Mailing Address **415 U Street, NW**

City **Washington** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **ASST. DIRECTOR, STRATEGIC AFFAIRS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.28**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 25 / 2007

Transaction ID: SA11A1.89698

Amount of Each Receipt this Period
40.66

B. Full Name (Last, First, Middle Initial)
DOMINIC SGRO

Mailing Address **144 STORMER ROAD**

City **INDIANA** State **PA** Zip Code **15701-0144**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME PA CN 13** Occupation **REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **409.56**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 12 / 2007

Transaction ID: SA11A1.89058

Amount of Each Receipt this Period
103.80

C. Full Name (Last, First, Middle Initial)
DONALD G. SHAFFER

Mailing Address **R. D. #5, BOX 82**

City **BROOKEVILLE** State **PA** Zip Code **15825-9501**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME PA CN 13** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **245.28**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 12 / 2007

Transaction ID: SA11A1.89082

Amount of Each Receipt this Period
61.32

SUBTOTAL of Receipts This Page (optional) ► **205.78**

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 151 / 197
	<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	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial) STEVEN SHAFFER		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address R. D. 1, BOX 37		Transaction ID: SA11A1.89083	
City State Zip Code SIGEL PA 15860	Amount of Each Receipt this Period 59.30		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.26		

B. Full Name (Last, First, Middle Initial) MELISSA SIMONETTA		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 43845 Thornberry Square, Bldg 7, Apt. 212		Transaction ID: SA11A1.89699	
City State Zip Code Leesburg VA 20176	Amount of Each Receipt this Period 27.20		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ADMINISTRATIVE ASSISTANT II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 217.60		

C. Full Name (Last, First, Middle Initial) ANTHONY L. SIMS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 6284 Shackelford Terrace		Transaction ID: SA11A1.88976	
City State Zip Code Alexandria VA 22312	Amount of Each Receipt this Period 36.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00		

SUBTOTAL of Receipts This Page (optional) ▶	122.50
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 152 / 197
	<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	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

Full Name (Last, First, Middle Initial) A. ANTHONY L. SIMS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 6284 Shackelford Terrace		Transaction ID: SA11A1.89700	
City Alexandria	State VA	Zip Code 22312	Amount of Each Receipt this Period 36.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.00		

Full Name (Last, First, Middle Initial) B. CAROL ANN SIMS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 7337 S. SHORE DRIVE #724		Transaction ID: SA11A1.88602	
City CHICAGO	State IL	Zip Code 60649	Amount of Each Receipt this Period 61.98
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 246.06		

Full Name (Last, First, Middle Initial) C. ROBERTA J. SKOK		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 775 TOWNSHIP ROAD #2204		Transaction ID: SA11A1.89467	
City PERRYSVILLE	State OH	Zip Code 44864	Amount of Each Receipt this Period 84.68
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH CN 8	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 324.32		

SUBTOTAL of Receipts This Page (optional) ▶	182.66
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:	PAGE 153 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

A. Full Name (Last, First, Middle Initial)
BETTY SMITH

Mailing Address 19292 ARCHER

City State Zip Code
DETROIT MI 48219

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME MI CN 25 ASSISTANT TO THE PRESIDENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 216.44

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.88476

Amount of Each Receipt this Period
30.92

B. Full Name (Last, First, Middle Initial)
BETTY SMITH

Mailing Address 19292 ARCHER

City State Zip Code
DETROIT MI 48219

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME MI CN 25 ASSISTANT TO THE PRESIDENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 247.36

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.89316

Amount of Each Receipt this Period
30.92

C. Full Name (Last, First, Middle Initial)
BETTY SMITH

Mailing Address 19292 ARCHER

City State Zip Code
DETROIT MI 48219

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME MI CN 25 ASSISTANT TO THE PRESIDENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 278.28

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 7

Transaction ID: SA11A1.89926

Amount of Each Receipt this Period
30.92

SUBTOTAL of Receipts This Page (optional)	▶	92.76
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 154 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

Full Name (Last, First, Middle Initial) A. DAVID SMITH		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 621 CYPRESS		Transaction ID: SA11A1.88601	
City CHATHAM	State IL	Amount of Each Receipt this Period 61.98	
Zip Code 62629			
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 246.06		

Full Name (Last, First, Middle Initial) B. NEFERTITI SMITH		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 2013 S. 16TH AVENUE		Transaction ID: SA11A1.88581	
City BROADVIEW	State IL	Amount of Each Receipt this Period 60.18	
Zip Code 60155			
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.96		

Full Name (Last, First, Middle Initial) C. ZACH SMITH		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	
Mailing Address 3505 26th Avenue NE		Transaction ID: SA11A1.89591	
City Olympia	State WA	Amount of Each Receipt this Period 20.00	
Zip Code 98506			
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME WA CN 28	Occupation PRINTER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

SUBTOTAL of Receipts This Page (optional) ▶	142.16
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 155 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
 CHRISTOPHER SMUDDE

Mailing Address 1821 Clearview Drive

City State Zip Code
 Springfield IL 62704

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME IL CN 31 MIS SPECIALIST

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 253.85

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.88542

Amount of Each Receipt this Period
 65.16

B. Full Name (Last, First, Middle Initial)
 SHARON SOBER

Mailing Address 212 5TH STREET

City State Zip Code
 CATAWISSA PA 17820

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME PA CN 13 REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 245.28

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.89089

Amount of Each Receipt this Period
 61.32

C. Full Name (Last, First, Middle Initial)
 DARRIN SPANN

Mailing Address 6130 Springford Drive, #C6

City State Zip Code
 Harrisburg PA 17111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME PA CN 13 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 302.22

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.89051

Amount of Each Receipt this Period
 76.60

SUBTOTAL of Receipts This Page (optional)	▶	203.08
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:	PAGE 156 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

Full Name (Last, First, Middle Initial) A. LARRY SPIVACK		Date of Receipt M M / D D / Y Y Y Y 04 / 02 / 2007	
Mailing Address 733 S. LOMBARD AVENUE		Transaction ID: SA11A1.88597	
City State Zip Code OAK PARK IL 60304-1607	Amount of Each Receipt this Period 73.52		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation COLLECTIVE BARGAINING SUPERVISOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.94		

Full Name (Last, First, Middle Initial) B. KAMALA B SRIKAR		Date of Receipt M M / D D / Y Y Y Y 04 / 10 / 2007	
Mailing Address 9908 Colebrook Avenue		Transaction ID: SA11A1.88977	
City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period 37.69		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation MANAGER, MEETING & TRAVEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.51		

Full Name (Last, First, Middle Initial) C. KAMALA B SRIKAR		Date of Receipt M M / D D / Y Y Y Y 04 / 25 / 2007	
Mailing Address 9908 Colebrook Avenue		Transaction ID: SA11A1.89701	
City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period 37.69		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation MANAGER, MEETING & TRAVEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 299.20		

SUBTOTAL of Receipts This Page (optional) ▶	148.90
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 157 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
MARIANNE STEGER

Mailing Address **2930 WOODSON DRIVE**

City **HILLIARD** State **OH** Zip Code **43026-1925**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME OH CN 8** Occupation **DIRECTOR OF ADMINISTRATIVE SERVICES**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **331.55**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 23 / 2007

Transaction ID: SA11A1.89465

Amount of Each Receipt this Period
86.57

B. Full Name (Last, First, Middle Initial)
WILLIAM STOUFFER

Mailing Address **29B - 2ND STREET**

City **NORTH IRWIN** State **PA** Zip Code **15642**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME PA CN 13** Occupation **REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **245.28**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 12 / 2007

Transaction ID: SA11A1.89065

Amount of Each Receipt this Period
61.32

C. Full Name (Last, First, Middle Initial)
TIMOTHY J STRECKER

Mailing Address **1603 E STREET SE**

City **WASHINGTON** State **DC** Zip Code **20003**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **PROJECT MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.44**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 10 / 2007

Transaction ID: SA11A1.88979

Amount of Each Receipt this Period
42.92

SUBTOTAL of Receipts This Page (optional)	190.81
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 158 / 197
	<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	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

Full Name (Last, First, Middle Initial) A. TIMOTHY J STRECKER		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 1603 E STREET SE		Transaction ID: SA11A1.89704	
City State Zip Code WASHINGTON DC 20003		Amount of Each Receipt this Period 42.92	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L PROJECT MANAGER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 343.36	

Full Name (Last, First, Middle Initial) B. MICHELE-SUZANNE STREET		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 16808 Westbourne Terrace		Transaction ID: SA11A1.89705	
City State Zip Code Gaithersburg MD 20878		Amount of Each Receipt this Period 28.56	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L ADMINISTRATIVE ASSISTANT II			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 224.40	

Full Name (Last, First, Middle Initial) C. MICHAEL E SUKAL		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 852 Darlington Drive		Transaction ID: SA11A1.88982	
City State Zip Code Avon IN 46123		Amount of Each Receipt this Period 45.30	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L ASSISTANT TO REGIONAL DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 312.26	

SUBTOTAL of Receipts This Page (optional) ▶	116.78
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 159 / 197
	<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	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
MICHAEL E SUKAL

Mailing Address **852 Darlington Drive**

City **Avon** State **IN** Zip Code **46123**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **ASSISTANT TO REGIONAL DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **357.56**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 25 / 2007

Transaction ID: SA11A1.89707

Amount of Each Receipt this Period
45.30

B. Full Name (Last, First, Middle Initial)
MARY SULLIVAN

Mailing Address **61 WOODSIDE DRIVE**

City **ALBANY** State **NY** Zip Code **12208-1157**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME NY LOC 1000** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 03 / 2007

Transaction ID: SA11A1.88609

Amount of Each Receipt this Period
15.00

C. Full Name (Last, First, Middle Initial)
MARY SULLIVAN

Mailing Address **61 WOODSIDE DRIVE**

City **ALBANY** State **NY** Zip Code **12208-1157**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME NY LOC 1000** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 17 / 2007

Transaction ID: SA11A1.89224

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)	75.30
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 160 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. MARY SULLIVAN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address 61 WOODSIDE DRIVE		Transaction ID: SA11A1.89542	
City ALBANY	State NY	Zip Code 12208-1157	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME NY LOC 1000	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00		

Full Name (Last, First, Middle Initial) B. MARY SULLIVAN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 61 WOODSIDE DRIVE		Transaction ID: SA11A1.89816	
City ALBANY	State NY	Zip Code 12208-1157	Amount of Each Receipt this Period 15.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME NY LOC 1000	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 535.00		

Full Name (Last, First, Middle Initial) C. JEFFREY TAGGART		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 12001 Market Street, Unit 450		Transaction ID: SA11A1.88983	
City Reston	State VA	Zip Code 20190	Amount of Each Receipt this Period 49.13
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECTOR, ACCOUNTING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 343.91		

SUBTOTAL of Receipts This Page (optional) ▶	164.13
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 161 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

Full Name (Last, First, Middle Initial) A. JEFFREY TAGGART		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	5		2	0	0	7													
Mailing Address 12001 Market Street, Unit 450		Transaction ID: SA11A1.89708																				
City Reston	State VA	Zip Code 20190																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 49.13																				
Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECTOR, ACCOUNTING																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 393.04																					

Full Name (Last, First, Middle Initial) B. JAMES TAIT		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		1	2		2	0	0	7													
Mailing Address 119 HELLS KITCHEN COURT		Transaction ID: SA11A1.89096																				
City DRUMS	State PA	Zip Code 18222																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 61.32																				
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.28																					

Full Name (Last, First, Middle Initial) C. MIGUEL TAMAYO		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		0	9		2	0	0	7													
Mailing Address 2201 Broadway Suite 715		Transaction ID: SA11A1.88736																				
City Oakland	State CA	Zip Code 94612																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 65.00																				
Name of Employer AFSCME LOC 3299, HED	Occupation REPRESENTATIVE																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00																					

SUBTOTAL of Receipts This Page (optional)	175.45
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 162 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

A. Full Name (Last, First, Middle Initial)
NANCY P TAYLOR

Mailing Address 55 Northwest Drive

City State Zip Code
Huntingtown MD 20639

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME INT'L AFFILIATE RELATIONS, MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
256.76

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.88984

Amount of Each Receipt this Period
36.68

B. Full Name (Last, First, Middle Initial)
NANCY P TAYLOR

Mailing Address 55 Northwest Drive

City State Zip Code
Huntingtown MD 20639

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME INT'L AFFILIATE RELATIONS, MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
293.44

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.89709

Amount of Each Receipt this Period
36.68

C. Full Name (Last, First, Middle Initial)
MARY THEUER

Mailing Address 1328 E. 9th Street

City State Zip Code
Duluth MN 55805-1609

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME MN CN 5 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.88846

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional)	▶	133.36
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: PAGE 163 / 197 (check only one) <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
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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial) PATRICK S. THOMASSON Mailing Address 1347 MAROT DRIVE City State Zip Code TROTWOOD OH 45427 FEC ID number of contributing federal political committee. C Name of Employer Occupation AFSCME OH CN 8 LEAD STAFF ORGANIZER Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 237.85	Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Transaction ID: SA11A1.89463 Amount of Each Receipt this Period 62.53
--	--

B. Full Name (Last, First, Middle Initial) LYNN G. THOMASSON, SR. Mailing Address 5079 ALTRIM ROAD City State Zip Code DAYTON OH 45418-2015 FEC ID number of contributing federal political committee. C Name of Employer Occupation AFSCME OH CN 8 STAFF REPRESENTATIVE Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 237.85	Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Transaction ID: SA11A1.89462 Amount of Each Receipt this Period 62.53
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C. Full Name (Last, First, Middle Initial) ROBERT L. THOMPSON Mailing Address 927 GIBBS AVENUE NE City State Zip Code CANTON OH 44705-1074 FEC ID number of contributing federal political committee. C Name of Employer Occupation AFSCME OH CN 8 REGIONAL DIRECTOR Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 324.32	Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7 Transaction ID: SA11A1.89461 Amount of Each Receipt this Period 84.68
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SUBTOTAL of Receipts This Page (optional) ▶	209.74
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 164 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial) HELEN THORNTON		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 500 N. Elmwood		Transaction ID: SA11A1.88528	
City State Zip Code Oak Park IL 60302	Amount of Each Receipt this Period 66.96		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.88		

B. Full Name (Last, First, Middle Initial) JOHN THORSON		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 555 SELBY AVENUE		Transaction ID: SA11A1.88847	
City State Zip Code ST. PAUL MN 55102	Amount of Each Receipt this Period 62.60		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MN CN 14	Occupation POLITICAL ACTION REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 246.22		

C. Full Name (Last, First, Middle Initial) TAMARA L TOCHER		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 321 E. 19th Street		Transaction ID: SA11A1.88985	
City State Zip Code Olympia WA 98501	Amount of Each Receipt this Period 36.80		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation AREA FIELD SERVICES DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.60		

SUBTOTAL of Receipts This Page (optional) ▶	166.36
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 165 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

Full Name (Last, First, Middle Initial) A. TAMARA L TOCHER		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 321 E. 19th Street		Transaction ID: SA11A1.89710
City Olympia State WA Zip Code 98501	Amount of Each Receipt this Period 36.80	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES DIRECTOR	Aggregate Year-to-Date ▼ 294.40	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. LEIGH TOMLINSON		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 930 STAG THICKET LANE		Transaction ID: SA11A1.88478
City MASON State MI Zip Code 48854-1400	Amount of Each Receipt this Period 34.33	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME MI CN 25 Occupation ACCTG. /HUMAN RESOURCE DIRECTOR	Aggregate Year-to-Date ▼ 240.31	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. LEIGH TOMLINSON		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 930 STAG THICKET LANE		Transaction ID: SA11A1.89318
City MASON State MI Zip Code 48854-1400	Amount of Each Receipt this Period 34.33	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME MI CN 25 Occupation ACCTG. /HUMAN RESOURCE DIRECTOR	Aggregate Year-to-Date ▼ 274.64	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	105.46
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 166 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

Full Name (Last, First, Middle Initial) A. LEIGH TOMLINSON		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 930 STAG THICKET LANE		Transaction ID: SA11A1.89928	
City MASON	State MI	Zip Code 48854-1400	Amount of Each Receipt this Period 34.33
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MI CN 25	Occupation ACCTG. /HUMAN RESOURCE DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 308.97		

Full Name (Last, First, Middle Initial) B. KATHLEEN TOPACIO-FLORES		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 7402 Edmondston Road		Transaction ID: SA11A1.88986	
City College Park	State MD	Zip Code 20740	Amount of Each Receipt this Period 47.82
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, PEOPLE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 328.34		

Full Name (Last, First, Middle Initial) C. KATHLEEN TOPACIO-FLORES		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 7402 Edmondston Road		Transaction ID: SA11A1.89711	
City College Park	State MD	Zip Code 20740	Amount of Each Receipt this Period 47.82
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, PEOPLE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 376.16		

SUBTOTAL of Receipts This Page (optional) ▶	129.97
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 167 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
DOROTHY TOWNSEND

Mailing Address **6837 SW 39th Drive**

City **Miramar** State **FL** Zip Code **33023**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **AREA FIELD SERVICES DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **501.55**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 10 / 2007

Transaction ID: SA11A1.88987

Amount of Each Receipt this Period
71.65

B. Full Name (Last, First, Middle Initial)
DOROTHY TOWNSEND

Mailing Address **6837 SW 39th Drive**

City **Miramar** State **FL** Zip Code **33023**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **AREA FIELD SERVICES DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **573.20**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2007

Transaction ID: SA11A1.89712

Amount of Each Receipt this Period
71.65

C. Full Name (Last, First, Middle Initial)
ELIZABETH TURNBOW

Mailing Address **4443 Libby N.E.**

City **Olympia** State **WA** Zip Code **98506**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME WA CN 28** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 26 / 2007

Transaction ID: SA11A1.89595

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional)	183.30
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 168 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

A. Full Name (Last, First, Middle Initial)
KAREN VALENTINE

Mailing Address 154 STONEY DRIVE

City DOVER State DE Zip Code 19904

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME DE CN 81 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 246.57

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 4 / 2 0 0 7

Transaction ID: SA11A1.88647

Amount of Each Receipt this Period
60.36

B. Full Name (Last, First, Middle Initial)
OSVALDO VALENZUELA

Mailing Address 6962 N. Hamilton Avenue
#E

City Chicago State IL Zip Code 60645

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 223.96

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 2 / 2 0 0 7

Transaction ID: SA11A1.88529

Amount of Each Receipt this Period
56.40

C. Full Name (Last, First, Middle Initial)
FLORA M WALKER

Mailing Address 2492 Ram Crossingway

City Henderson State NV Zip Code 89074

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation REGIONAL DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 599.07

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.88988

Amount of Each Receipt this Period
57.01

SUBTOTAL of Receipts This Page (optional)	173.77
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 169 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
FLORA M WALKER

Mailing Address **2492 Ram Crossingway**

City **Henderson** State **NV** Zip Code **89074**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **REGIONAL DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **656.08**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2007

Transaction ID: SA11A1.89713

Amount of Each Receipt this Period
57.01

B. Full Name (Last, First, Middle Initial)
CRYSTAL M WALLACE

Mailing Address **38426 Village Lane**

City **Mechanicsville** State **MD** Zip Code **20659**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **EXECUTIVE OFFICE ASSISTANT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.04**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2007

Transaction ID: SA11A1.89714

Amount of Each Receipt this Period
25.13

C. Full Name (Last, First, Middle Initial)
DAVID WARRICK

Mailing Address **2638 JAY COURT**

City **Indianapolis** State **IN** Zip Code **46229**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME IN CN 62** Occupation **UNION DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 02 / 2007

Transaction ID: SA11A1.88433

Amount of Each Receipt this Period
180.00

SUBTOTAL of Receipts This Page (optional)	262.14
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 170 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
 DAVID WARRICK

Mailing Address 2638 JAY COURT

City Indianapolis State IN Zip Code 46229

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IN CN 62 Occupation UNION DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 4 / 2 0 0 7

Transaction ID: SA11A1.89543

Amount of Each Receipt this Period
 65.00

B. Full Name (Last, First, Middle Initial)
 VERNON WATKINS

Mailing Address 5736 Showalter Court

City Rancho Cucamongo State CA Zip Code 91701

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation EXECUTIVE ASST. TO SECRETARY TREASURER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 490.21

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.88991

Amount of Each Receipt this Period
 70.03

C. Full Name (Last, First, Middle Initial)
 VERNON WATKINS

Mailing Address 5736 Showalter Court

City Rancho Cucamongo State CA Zip Code 91701

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation EXECUTIVE ASST. TO SECRETARY TREASURER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.24

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.89716

Amount of Each Receipt this Period
 70.03

SUBTOTAL of Receipts This Page (optional)	205.06
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:	PAGE 171 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. LONITAM WAYBRIGHT		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7	
Mailing Address 3008 Athens Circle		Transaction ID: SA11A1.88992	
City State Zip Code Bowie MD 20716	Amount of Each Receipt this Period 46.54		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, BENEFITS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.78		

Full Name (Last, First, Middle Initial) B. LONITAM WAYBRIGHT		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 3008 Athens Circle		Transaction ID: SA11A1.89717	
City State Zip Code Bowie MD 20716	Amount of Each Receipt this Period 46.54		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, BENEFITS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 372.32		

Full Name (Last, First, Middle Initial) C. JOANNE L. WEBB-GAUVIN		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 1200 W. LAWRENCE #12		Transaction ID: SA11A1.88546	
City State Zip Code SPRINGFIELD IL 62704	Amount of Each Receipt this Period 62.68		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation RETIREE PROGRAMS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.90		

SUBTOTAL of Receipts This Page (optional) ▶	155.76
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:	PAGE 172 / 197
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. BRIAN V. WEEKS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 8033 Exceisor Drive Apt. A		Transaction ID: SA11A1.88993
City State Zip Code Madison WI 53717	Amount of Each Receipt this Period 35.52	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation POLITICAL ACTION COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 248.64	

Full Name (Last, First, Middle Initial) B. BRIAN V. WEEKS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 8033 Exceisor Drive Apt. A		Transaction ID: SA11A1.89718
City State Zip Code Madison WI 53717	Amount of Each Receipt this Period 40.66	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation POLITICAL ACTION COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 289.30	

Full Name (Last, First, Middle Initial) C. JOSEPH WEIDNER		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 255 BINNS BOULEVARD		Transaction ID: SA11A1.89458
City State Zip Code COLUMBUS OH 43204-2515	Amount of Each Receipt this Period 63.46	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME OH CN 8	Occupation EDITOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.04	

SUBTOTAL of Receipts This Page (optional) ▶	139.64
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 173 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
LARRY P WEINBERG

Mailing Address **1730 Chesterford Way**

City **McLean** State **VA** Zip Code **22101**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **GENERAL COUNSEL**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **607.81**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 10 / 2007

Transaction ID: SA11A1.88994

Amount of Each Receipt this Period
86.83

B. Full Name (Last, First, Middle Initial)
LARRY P WEINBERG

Mailing Address **1730 Chesterford Way**

City **McLean** State **VA** Zip Code **22101**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **GENERAL COUNSEL**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **694.64**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2007

Transaction ID: SA11A1.89719

Amount of Each Receipt this Period
86.83

C. Full Name (Last, First, Middle Initial)
JOHN P. WESTMORELAND

Mailing Address **4678 West Rd.**

City **Moose Lake** State **MN** Zip Code **55767**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME MN CN 5** Occupation **BUSINESS AGENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **229.76**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 10 / 2007

Transaction ID: SA11A1.88845

Amount of Each Receipt this Period
57.86

SUBTOTAL of Receipts This Page (optional)	231.52
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 174 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
JAMES RANDY WESTON

Mailing Address **1495 IRVIN - SHOOTS ROAD**

City **MORRAL** State **OH** Zip Code **43337**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME OH LOC 4** Occupation **ASSOCIATE DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 09 / 2007

Transaction ID: SA11A1.88792

Amount of Each Receipt this Period
120.00

B. Full Name (Last, First, Middle Initial)
CHARLES B. WESTOVER

Mailing Address **1428 Monroe Street
 #D**

City **Washington** State **DC** Zip Code **20010**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **ONLINE MOBILIZATION COORDINATOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.03**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 10 / 2007

Transaction ID: SA11A1.88995

Amount of Each Receipt this Period
29.29

C. Full Name (Last, First, Middle Initial)
CHARLES B. WESTOVER

Mailing Address **1428 Monroe Street
 #D**

City **Washington** State **DC** Zip Code **20010**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME INT'L** Occupation **ONLINE MOBILIZATION COORDINATOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **234.32**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 25 / 2007

Transaction ID: SA11A1.89720

Amount of Each Receipt this Period
29.29

SUBTOTAL of Receipts This Page (optional)	178.58
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 175 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-ED

Full Name (Last, First, Middle Initial) A. DIANE WHITE-HARRIS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7	
Mailing Address 1142 WOLF RUN		Transaction ID: SA11A1.89321	
City State Zip Code LANSING MI 48917		Amount of Each Receipt this Period 26.10	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME MI CN 25 EXECUTIVE SECRETARY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 208.80	

Full Name (Last, First, Middle Initial) B. DIANE WHITE-HARRIS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 1142 WOLF RUN		Transaction ID: SA11A1.89931	
City State Zip Code LANSING MI 48917		Amount of Each Receipt this Period 26.10	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME MI CN 25 EXECUTIVE SECRETARY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 234.90	

Full Name (Last, First, Middle Initial) C. BRYCE WICKSTROM		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 1267 MATILDA STREET		Transaction ID: SA11A1.89450	
City State Zip Code ST PAUL MN 55117-4473		Amount of Each Receipt this Period 92.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME MN CN 5 RECORDING SECRETARY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 368.00	

SUBTOTAL of Receipts This Page (optional) ▶	144.20
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 176 / 197
	<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	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial) GUY WIEDERHOLD		Date of Receipt M M / D D / Y Y Y Y 04 / 12 / 2007	
Mailing Address 906 LAUREL BOULEVARD		Transaction ID: SA11A1.89112	
City State Zip Code POTTSVILLE PA 17901	Amount of Each Receipt this Period 61.32		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.28		

B. Full Name (Last, First, Middle Initial) WILLIAM WILKINSON		Date of Receipt M M / D D / Y Y Y Y 04 / 10 / 2007	
Mailing Address 5272 Bradgen Court		Transaction ID: SA11A1.88996	
City State Zip Code Springfield VA 22151	Amount of Each Receipt this Period 44.09		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, RESEARCH		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 308.63		

C. Full Name (Last, First, Middle Initial) WILLIAM WILKINSON		Date of Receipt M M / D D / Y Y Y Y 04 / 25 / 2007	
Mailing Address 5272 Bradgen Court		Transaction ID: SA11A1.89721	
City State Zip Code Springfield VA 22151	Amount of Each Receipt this Period 44.09		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, RESEARCH		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 352.72		

SUBTOTAL of Receipts This Page (optional) ▶	149.50
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 177 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. BRENDA WILLIAMS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 444 NE Ravenna Blvd. STE. 108		Transaction ID: SA11A1.89596
City State Zip Code Seattle WA 98115	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 30.00
Name of Employer AFSCME WA CN 28	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.00	

Full Name (Last, First, Middle Initial) B. ELIZABETH U WILLIAMS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address P.O. BOX 933		Transaction ID: SA11A1.89374
City State Zip Code Wailuku HI 96793	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00
Name of Employer AFSCME HI LOC 152	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. MICHAEL WILLIAMS		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 6800 Fleetwood Rd. Apt. 1118		Transaction ID: SA11A1.88997
City State Zip Code McLean VA 22101	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 41.63
Name of Employer AFSCME INT'L	Occupation SPECIAL ASST. TO SECRY-TREASURER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 291.41	

SUBTOTAL of Receipts This Page (optional)	▶	171.63
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 178 / 197
	<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	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

Full Name (Last, First, Middle Initial) A. MICHAEL WILLIAMS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7	
Mailing Address 6800 Fleetwood Rd. Apt. 1118		Transaction ID: SA11A1.89722	
City State Zip Code McLean VA 22101	Amount of Each Receipt this Period 41.63		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation SPECIAL ASST. TO SECY-TREASURER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.04		

Full Name (Last, First, Middle Initial) B. PHILLIP WILLIAMS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 296 Churchmans Road		Transaction ID: SA11A1.88646	
City State Zip Code New Castle DE 19720-9930	Amount of Each Receipt this Period 60.36		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME DE CN 81	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 246.57		

Full Name (Last, First, Middle Initial) C. SAUNDRA WILLIAMS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 16218 BRAILE		Transaction ID: SA11A1.88482	
City State Zip Code DETROIT MI 48219-4727	Amount of Each Receipt this Period 39.12		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.84		

SUBTOTAL of Receipts This Page (optional) ▶	141.11
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 179 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. SAUNDRA WILLIAMS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 16218 BRAILE		Transaction ID: SA11A1.89322
City State Zip Code DETROIT MI 48219-4727	Amount of Each Receipt this Period 39.12	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312.96	

Full Name (Last, First, Middle Initial) B. SAUNDRA WILLIAMS		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 16218 BRAILE		Transaction ID: SA11A1.89932
City State Zip Code DETROIT MI 48219-4727	Amount of Each Receipt this Period 39.12	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 352.08	

Full Name (Last, First, Middle Initial) C. ALLAN WINEY		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 765 MOUNT AIRY ROAD		Transaction ID: SA11A1.89053
City State Zip Code LEWISBERRY PA 17339	Amount of Each Receipt this Period 85.62	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME PA CN 13	Occupation ASSISTANT BUSINESS MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 337.82	

SUBTOTAL of Receipts This Page (optional) ▶	163.86
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 180 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial) KRISTIE WOLF		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address c/o 4031 EXECUTIVE PARK DRIVE PA CN 13		Transaction ID: SA11A1.89113
City HARRISBURG State PA Zip Code 17111-1599	Amount of Each Receipt this Period 61.32	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.28	

B. Full Name (Last, First, Middle Initial) ARTHUR WOOD		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 0 / 2 0 0 7
Mailing Address 780 FAIRWOOD		Transaction ID: SA11A1.89323
City INKSTER State MI Zip Code 48141	Amount of Each Receipt this Period 25.78	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 206.24	

C. Full Name (Last, First, Middle Initial) ARTHUR WOOD		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 780 FAIRWOOD		Transaction ID: SA11A1.89933
City INKSTER State MI Zip Code 48141	Amount of Each Receipt this Period 25.78	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 232.02	

SUBTOTAL of Receipts This Page (optional) ▶	112.88
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 181 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

Full Name (Last, First, Middle Initial) A. DOUGLAS WOODSON		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 108 ELGIN, APT. 1		Transaction ID: SA11A1.88556	
City FOREST PARK	State IL	Amount of Each Receipt this Period 68.64	
Zip Code 60130			
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation ORGANIZER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 268.52		

Full Name (Last, First, Middle Initial) B. PETER WRAY		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 4374 STINSON DRIVE W.		Transaction ID: SA11A1.89848	
City COLUMBUS	State OH	Amount of Each Receipt this Period 38.06	
Zip Code 43214			
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH LOC 11	Occupation COMMUNICATIONS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 209.33		

Full Name (Last, First, Middle Initial) C. JERRY WRIGHT		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7	
Mailing Address 20235 E. 1280 N ROAD		Transaction ID: SA11A1.88574	
City DANVILLE	State IL	Amount of Each Receipt this Period 62.98	
Zip Code 61832			
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.12		

SUBTOTAL of Receipts This Page (optional) ▶	169.68
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 182 / 197
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI- ED

Full Name (Last, First, Middle Initial) A. PETER WRIGHT		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 28 WASHINGTON STREET		Transaction ID: SA11A1.88394
City State Zip Code MARBLEHEAD MA 01945	Amount of Each Receipt this Period 74.14	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME MA CN 93	Occupation DIRECTOR POLITICAL ACTION & LEGIS.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 296.56	

Full Name (Last, First, Middle Initial) B. PETER WRIGHT		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 28 WASHINGTON STREET		Transaction ID: SA11A1.89898
City State Zip Code MARBLEHEAD MA 01945	Amount of Each Receipt this Period 74.14	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME MA CN 93	Occupation DIRECTOR POLITICAL ACTION & LEGIS.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.70	

Full Name (Last, First, Middle Initial) C. BRUCE WYNGAARD		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 7
Mailing Address 1310 HUNTER AVENUE		Transaction ID: SA11A1.88439
City State Zip Code COLUMBUS OH 43201	Amount of Each Receipt this Period 80.37	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME OH LOC 11	Occupation OPERATIONS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.11	

SUBTOTAL of Receipts This Page (optional) ▶	228.65
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 183 / 197
	<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	

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
BRUCE WYNGAARD

Mailing Address **1310 HUNTER AVENUE**

City **COLUMBUS** State **OH** Zip Code **43201**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME OH LOC 11** Occupation **OPERATIONS DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **294.69**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 30 / 2007

Transaction ID: SA11A1.89849

Amount of Each Receipt this Period
53.58

B. Full Name (Last, First, Middle Initial)
PEGGY LEE ZIMMERMAN

Mailing Address **197 BLAIR AVENUE**

City **COTTAGE HILLS** State **IL** Zip Code **62018**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AFSCME IL CN 31** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.10**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 02 / 2007

Transaction ID: SA11A1.88605

Amount of Each Receipt this Period
62.98

SUBTOTAL of Receipts This Page (optional)	116.56
TOTAL This Period (last page this line number only)	30601.04

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 184 / 197
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED**

A. Full Name (Last, First, Middle Initial)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY

Mailing Address **PO BOX 2882
 CHURCH STREET STATION**

City	State	Zip Code
NEW YORK	NY	10008

FEC ID number of contributing federal political committee. **C C00149211**

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
213713.15

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	3	/	2	0	0	7

Transaction ID: SA12.89406

Amount of Each Receipt this Period
40773.67

SUBTOTAL of Receipts This Page (optional)	40773.67
TOTAL This Period (last page this line number only)	40773.67

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 185 / 197	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

A. Full Name (Last, First, Middle Initial)
AMALGAMATED BANK

Mailing Address 15 Union Square

City	State	Zip Code
New York	NY	10003

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1259.44

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	0	7

Transaction ID: SA17.89814

Amount of Each Receipt this Period
289.55

Interest Income 4/30/07

SUBTOTAL of Receipts This Page (optional)	▶	289.55
TOTAL This Period (last page this line number only)	▶	289.55

**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 186 / 197

<input checked="" type="checkbox"/> 21b	<input 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. AMALGAMATED BANK		Transaction ID: SB21B.88392	
Mailing Address 15 Union Square		Date of Disbursement MM / DD / YYYY 04 / 02 / 2007	
City New York	State NY	Zip Code 10003	Amount of Each Disbursement this Period 12511.05
Purpose of Disbursement Interest Payment 4/2/07		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. AMALGAMATED BANK		Transaction ID: SB21B.89812	
Mailing Address 15 Union Square		Date of Disbursement MM / DD / YYYY 04 / 30 / 2007	
City New York	State NY	Zip Code 10003	Amount of Each Disbursement this Period 9503.16
Purpose of Disbursement Interest Payment 4/30/07		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS		Transaction ID: SB21B.88714	
Mailing Address P.O. Box 53852		Date of Disbursement MM / DD / YYYY 04 / 02 / 2007	
City Phoenix	State AZ	Zip Code 85072-3852	Amount of Each Disbursement this Period 3.50
Purpose of Disbursement Service Charge 4/2/07		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	22017.71
TOTAL This Period (last page this line number only)	

**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)

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<input checked="" type="checkbox"/> 21b	<input 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-ED

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement Service Charge 4/3/07

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B.90750

Date of Disbursement

04 / 03 / 2007

Amount of Each Disbursement this Period

3.90

B. AMERICAN EXPRESS

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement Service Charge 4/20/07

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B.89405

Date of Disbursement

04 / 20 / 2007

Amount of Each Disbursement this Period

7.65

C. BART GROUP

Mailing Address 171 Main Street

City Port Washington State NY Zip Code 11050

Purpose of Disbursement Service Charge 4/4/07

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B.88304

Date of Disbursement

04 / 04 / 2007

Amount of Each Disbursement this Period

108.38

SUBTOTAL of Disbursements This Page (optional) ►

119.93

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

22137.64

**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)

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<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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED

Full Name (Last, First, Middle Initial)

A. AFSCME PEOPLE- Non Federal Account

Mailing Address 1625 L Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Tfr non-fed acct for non-fed activity

Candidate Name

008
Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Transaction ID: SB22.88785

Date of Disbursement

04 / 10 / 2007

Amount of Each Disbursement this Period

4400.00

Full Name (Last, First, Middle Initial)

B. AFSCME PEOPLE- Non Federal Account

Mailing Address 1625 L Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Tfr non-fed acct for non-fed activity

Candidate Name

008
Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Transaction ID: SB22.88998

Date of Disbursement

04 / 12 / 2007

Amount of Each Disbursement this Period

22470.00

Full Name (Last, First, Middle Initial)

C. AFSCME PEOPLE- Non Federal Account

Mailing Address 1625 L Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Tfr non-fed acct for non-fed activity

Candidate Name

008
Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Transaction ID: SB22.89277

Date of Disbursement

04 / 20 / 2007

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

27370.00

TOTAL This Period (last page this line number only)

**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)

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<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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-ED

Full Name (Last, First, Middle Initial)

A. AFSCME PEOPLE- Non Federal Account

Mailing Address 1625 L Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement Tfr non-fed acct for non-fed activity

Candidate Name

008
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB22.89429

Date of Disbursement

04 / 26 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. AFSCME PEOPLE- Non Federal Account

Mailing Address 1625 L Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement Tfr non-fed acct for non-fed activity

Candidate Name

008
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB22.89787

Date of Disbursement

04 / 30 / 2007

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

31370.00

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial)

A. COMMITTEE TO RE-ELECT LORETTA SANCHEZ

Mailing Address 604 S. Harbor Blvd.

City Santa Ana State CA Zip Code 92704

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CA District: 47

Transaction ID: SB23.89431

Date of Disbursement

04 / 26 / 2007

Amount of Each Disbursement this Period

3000.00

B. CONNECTICUT DSCC - FEDERAL ACCOUNT

Mailing Address 179 Allyn St.,
Suite 301

City Hartford State CT Zip Code 06103

Purpose of Disbursement
Contribution- PAC

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2007
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.89271

Date of Disbursement

04 / 19 / 2007

Amount of Each Disbursement this Period

350.00

C. FRIENDS OF CONGRESSMAN GEORGE MILLER

Mailing Address P. O. BOX 5864

City Concord State CA Zip Code 94524

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CA District: 07

Transaction ID: SB23.88565

Date of Disbursement

04 / 05 / 2007

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ►

8350.00

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

**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 191 / 197

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial)

A. FRIENDS OF DICK DURBIN COMMITTEE

Mailing Address P. O. BOX 1949

City Springfield State IL Zip Code 62705

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: IL District: 00

Transaction ID: SB23.89430

Date of Disbursement

04 / 26 / 2007

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. LEAGUE OF CONSERVATION VOTERS PAC

Mailing Address 1920 L Street NW Suite 800

City Washington State DC Zip Code 20036

Purpose of Disbursement
Contribution-PAC

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2007 Primary General Other (specify) ▼
State: District:

Transaction ID: SB23.89783

Date of Disbursement

04 / 27 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. TOM VILSACK FOR PRESIDENT

Mailing Address P. O. BOX 1377

City Des Moines State IA Zip Code 50305

Purpose of Disbursement
Contribution- PRIMARY DEBT

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: District: 00

Transaction ID: SB23.88999

Date of Disbursement

04 / 12 / 2007

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ►

14000.00

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

22350.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input checked="" type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED

Full Name (Last, First, Middle Initial)

A. AMALGAMATED BANK

Mailing Address 15 Union Square

City New York State NY Zip Code 10003

Purpose of Disbursement
Principal Payment 4/2/07

Candidate Name

009
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB26.88305

Date of Disbursement

04 / 02 / 2007

Amount of Each Disbursement this Period

208333.33

B. AMALGAMATED BANK

Mailing Address 15 Union Square

City New York State NY Zip Code 10003

Purpose of Disbursement
Principal Payment 4/19/07

Candidate Name

009
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB26.89276

Date of Disbursement

04 / 19 / 2007

Amount of Each Disbursement this Period

208333.33

C. AMALGAMATED BANK

Full Name (Last, First, Middle Initial)

Mailing Address 15 Union Square

City New York State NY Zip Code 10003

Purpose of Disbursement
Principal Payment 4/30/07

Candidate Name

009
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB26.89790

Date of Disbursement

04 / 30 / 2007

Amount of Each Disbursement this Period

208333.33

SUBTOTAL of Disbursements This Page (optional) ►

624999.99

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

624999.99

**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 193 / 197

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial)

A. KATHLEEN BORRIE

Mailing Address P. O. BOX 274

City Champlain State NY Zip Code 12919

Purpose of Disbursement Refund

Candidate Name

010
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB28A.89283

Date of Disbursement

04 / 20 / 2007

Amount of Each Disbursement this Period

4.00

Full Name (Last, First, Middle Initial)

B. CITY OF SAGINAW

Mailing Address 1315 S. Washington Ave.

City Saginaw State MI Zip Code 48601

Purpose of Disbursement Refund

Candidate Name

010
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB28A.89278

Date of Disbursement

04 / 19 / 2007

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. JEAN L LINDBERG

Mailing Address 5417 Jackpot Ave.

City Sparta State WI Zip Code 54656

Purpose of Disbursement Refund

Candidate Name

010
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB28A.89280

Date of Disbursement

04 / 19 / 2007

Amount of Each Disbursement this Period

765.00

SUBTOTAL of Disbursements This Page (optional) ►

789.00

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

**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 194 / 197

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-ED

Full Name (Last, First, Middle Initial)

A. ERIC REISNER

Mailing Address 2180 Carter Road

City Dubuque State IA Zip Code 52001

Purpose of Disbursement Refund

Candidate Name

010
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB28A.89785

Date of Disbursement

04 / 27 / 2007

Amount of Each Disbursement this Period

40.00

Full Name (Last, First, Middle Initial)

B. WAYNE COUNTY EMPLOYEES' RETIREMENT SYS

Mailing Address 28 W. Adams, Suite 1900

City Detroit State MI Zip Code 48226

Purpose of Disbursement Refund

Candidate Name

010
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB28A.88787

Date of Disbursement

04 / 10 / 2007

Amount of Each Disbursement this Period

476.78

SUBTOTAL of Disbursements This Page (optional)

516.78

TOTAL This Period (last page this line number only)

1305.78

SCHEDULE C (FEC Form 3X)

LOANS

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

PAGE 195 / 197
FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Transaction ID: SC/10.80771

LOAN SOURCE Full Name (Last, First, Middle Initial)

AMALGAMATED BANK

Election:

- Primary
- General
- Other (specify) ▼

Mailing Address 15 Union Square

City New York State NY ZIP Code 10003

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2000000.00	1457999.98	542000.02

TERMS

Date Incurred: MM DD YYYY 10 19 2006 Date Due: 12/31/2007 Interest Rate: 8.25000%(apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional) ▶ 542000.02

TOTALS This Period (last page in this line only) ▶ []

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

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

PAGE 196 / 197
FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Transaction ID: SC/10.80997

LOAN SOURCE Full Name (Last, First, Middle Initial)

AMALGAMATED BANK

Election:

- Primary
- General
- Other (specify) ▼

Mailing Address 15 Union Square

City New York State NY ZIP Code 10003

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
500000.00	0.00	500000.00

TERMS

Date Incurred: MM DD YYYY 10 25 2006 Date Due: 12/31/2007 Interest Rate: 8.25000%(apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	500000.00
TOTALS This Period (last page in this line only)	1042000.02

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 197 / 197
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AMALGAMATED BANK	Nature of Debt (Purpose): Interest Payment 3/07
Mailing Address 15 Union Square	
City State ZIP Code New York NY 10003	

Outstanding Balance Beginning This Period	Transaction ID: SD10.88390	
12511.05		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	12511.05	0.00

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	0.00
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	