

DISTRICT



RECEIVED

NATIONAL UNION OF HOSPITAL AND HEALTH CARE EMPLOYEES
AFSCME AFL-CIO

2015 JAN 15 AM 9:37

1319 LOCUST STREET • PHILADELPHIA, PENNSYLVANIA 19107-5498 • 215-735-1300 • FAX 215-735-9878

REC MAIL CENTER

HENRY NICHOLAS
President

CHRIS WOODS
Executive Vice-President

PETER GOULD
Executive Vice-President

MARGUERITE STANFORD
Secretary-Treasurer

JOHN HUNDZYNSKI
Vice President

January 5, 2015

Attention: Deborah Chacona

I.D.# C00034066

Re: Post General Report (10/1/2014 - 11/24/2014)

January 31 Year End Report (11/25/2014 - 12/31/2014)

Dear Ms. Chacona,

Enclosed please find the above-mentioned reports.

Sincerely,

Marguerite Stanford

United We Care



PHN 1 800 444 4444

**FEC
FORM 3X**

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

RECEIVED

2015 JAN 15 AM 9:37

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

DISTRICT 11199C NATIONAL UNION OF HOSPITAL AND HEALTH CARE EMPLOYEES

ADDRESS (number and street)

1319 LOCUST ST

Check if different than previously reported. (ACC)

PHILADELPHIA

PA

19107-

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 000 340 66

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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on

MM / DD / YYYY

in the State of

AA

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

MM / DD / YYYY

in the State of

PA

5. Covering Period

MM / DD / YYYY

through

MM / DD / YYYY

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

MARGUERITE STANFORD (MORRISON)

Signature of Treasurer

Marguerite Stanford

Date

MM / DD / YYYY

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

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

DISTRICT 11990, NUNHEE, POLITICAL ACTION FUND

Report Covering the Period:

From:

10 ' 01 ' 2014

To:

11 ' 24 ' 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1,	<u>30.74</u>	<u>690.52</u>
(b) Cash on Hand at Beginning of Reporting Period.....	<u>690.50</u>	
(c) Total Receipts (from Line 19)	<u>-0-</u>	<u>1,000.00</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<u>690.50</u>	<u>1,690.50</u>
7. Total Disbursements (from Line 31)	<u>-0-</u>	<u>1,000.00</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<u>690.50</u>	<u>690.50</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<u>-0-</u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<u>12,186.00</u>	



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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

DISTRICT 1199C, POLITICAL ACTION FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

DISTRICT 1199C POLITICAL ACTION FUND

Nature of Debt (Purpose):

Deposited in error
Funds Disbursed
Not available to repay.

Mailing Address

1319 LOCUST ST.

City

State

Zip Code

PHILA.

PA

19107

Outstanding Balance Beginning This Period

6,666.00

Amount Incurred This Period

-0-

Payment This Period

-0-

Outstanding Balance at Close of This Period

6,666.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

DISTRICT 1199C POLITICAL ACTION FUND

Nature of Debt (Purpose):

Deposited in error.
Funds Disbursed
Not available to repay.

Mailing Address

1319 LOCUST ST.

City

State

Zip Code

PHILA.

PA

19107

Outstanding Balance Beginning This Period

50,000.00

Amount Incurred This Period

-0-

Payment This Period

-0-

Outstanding Balance at Close of This Period

50,000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

DISTRICT 1199C POLITICAL ACTION FUND

Nature of Debt (Purpose):

Deposited in error
Funds Disbursed
Not available to repay.

Mailing Address

1319 LOCUST STREET

City

State

Zip Code

PHILA.

PA

19107

Outstanding Balance Beginning This Period

5200.00

Amount Incurred This Period

5,200.00

Payment This Period

-0-

Outstanding Balance at Close of This Period

5,200.00

1) SUBTOTALS This Period This Page (optional)..... ▶

121,866.00

2) TOTALS This Period (last page this line number only)..... ▶

121,866.00

3) TOTAL 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) ▶

121,866.00

2011-11-11 11:11:11

UNITED STATES POSTAL SERVICE



National Union of Hospital
Health Care Employees
AFSCME, AFL-CIO
1319 Locust Street
Philadelphia, PA 19107-5498

FIRST-CLASS MAIL
Hasler
01/06/2015
US POSTAGE
\$00.69
ZIP 19107
011D11617558

Federal Election Commission
999 E Street NW
Washington, DC 20463

Att: Deborah Chacona

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Postage Correction Requested



Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 1/6/15
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


PREPARER

1/15/15
DATE PREPARED

00000111111111111111111111111111