

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** 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:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 05 01 2007 through 05 31 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 06 20 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.

**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	5

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	5

D	D
3	1

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	743332.00									
(c) Total Receipts (from Line 19)	479390.06	2628571.93								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1222722.06	3355016.97								
7. Total Disbursements (from Line 31)	690163.87	2822458.78								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	532558.19	532558.19								
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)	625333.36									

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, QUALIFI-
ED

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	5

D	D
3	1

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	31448.87	94955.57
(i) Itemized (use Schedule A)	398547.95	2246372.21
(ii) Unitemized	429996.82	2341327.78
(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)	429996.82	2341327.78
12. Transfers From Affiliated/Other Party Committees	47426.00	261139.15
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)	1695.75	24574.07
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	271.49	1530.93
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))	479390.06	2628571.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	479390.06	2628571.93

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	14197.21	89201.31
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	14197.21	89201.31
22. Transfers to Affiliated/Other Party Committees.....	65300.00	252620.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	194000.00	602550.00
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.....	416666.66	1874666.64
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	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))	0.00	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))..	690163.87	2822458.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	690163.87	2822458.78

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)	429996.82	2341327.78
34. Total Contribution Refunds (from Line 28(d))	0.00	3420.83
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	429996.82	2337906.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	14197.21	89201.31
37. Offsets to Operating Expenditures (from Line 15, page 3)	1695.75	24574.07
38. Net Operating Expenditures (subtract Line 37 from Line 36)	12501.46	64627.24

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 244
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) A. KAREN ABBIATICI		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 4031 Executive Park Drive		Transaction ID: SA11A1.90305	
City State Zip Code Harrisburg PA 17111-1599		Amount of Each Receipt this Period 43.68	
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 ▼ 216.02	

Full Name (Last, First, Middle Initial) B. RICHARD ABELSON		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7	
Mailing Address 4315 N. LAKE DRIVE		Transaction ID: SA11A1.89936	
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 Occupation AFSCME WI CN 48 EXECUTIVE DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 337.50	

Full Name (Last, First, Middle Initial) C. RICHARD ABELSON		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 6 / 2 0 0 7	
Mailing Address 4315 N. LAKE DRIVE		Transaction ID: SA11A1.90741	
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 Occupation AFSCME WI CN 48 EXECUTIVE DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00	

SUBTOTAL of Receipts This Page (optional) ▶	118.68
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 7 / 244
	<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. RICHARD ABELSON		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 7	
Mailing Address 4315 N. LAKE DRIVE		Transaction ID: SA11A1.91383	
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 ▼ 412.50		

Full Name (Last, First, Middle Initial) B. TRACEY ABMAN		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 3136 N. SEMINARY AVENUE		Transaction ID: SA11A1.90099	
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 ▼ 383.36		

Full Name (Last, First, Middle Initial) C. AMY ACHILLES		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7	
Mailing Address 4341 Feigby St., W		Transaction ID: SA11A1.91725	
City State Zip Code Pt. Orchard WA 98367	Amount of Each Receipt this Period 10.00		
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 ▼ 206.00		

SUBTOTAL of Receipts This Page (optional) ▶	124.62
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 8 / 244
	<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**

A. Full Name (Last, First, Middle Initial)
 AMY ACHILLES

Mailing Address 4341 Feigby St., W

City Pt. Orchard State WA Zip Code 98367

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 ▼ 218.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 1 8 / 2 0 0 7

Transaction ID: SA11A1.91724

Amount of Each Receipt this Period
 12.00

B. Full Name (Last, First, Middle Initial)
 SHANA ADLERTON

Mailing Address C/O 710 Chippewa Square

City Marquette State MI Zip Code 48955

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 ▼ 267.30

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 1 / 2 0 0 7

Transaction ID: SA11A1.90826

Amount of Each Receipt this Period
 26.73

C. Full Name (Last, First, Middle Initial)
 MUSILIU ADE ALAGBALA

Mailing Address 5701 N. SHERIDAN, #10A

City CHICAGO State IL Zip Code 60660

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 ▼ 305.89

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

Transaction ID: SA11A1.90095

Amount of Each Receipt this Period
 61.98

SUBTOTAL of Receipts This Page (optional)	▶	100.71
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 / 244
	<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)
RONALD ALEXANDER

Mailing Address 390 Worthington Road, Suite A

City State Zip Code
Westerville OH 43082

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

Name of Employer STATE OF OHIO Occupation DELEGATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 1 / 2 0 0 7

Transaction ID: SA11A1.90454

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
RONALD ALEXANDER

Mailing Address 390 Worthington Road, Suite A

City State Zip Code
Westerville OH 43082

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

Name of Employer STATE OF OHIO Occupation DELEGATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

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

Transaction ID: SA11A1.90997

Amount of Each Receipt this Period
13.00

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

Mailing Address 390 Worthington Road, Suite A

City State Zip Code
Westerville OH 43082

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

Name of Employer STATE OF OHIO Occupation DELEGATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

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

Transaction ID: SA11A1.91101

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)	▶	53.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 244
	<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 5 / 0 4 / 2 0 0 7
Mailing Address 7935 SW SANTOLINA PLACE		Transaction ID: SA11A1.90029
City State Zip Code BEAVERTON OR 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 ▼ 487.00	

Full Name (Last, First, Middle Initial) B. KENNETH L. ALLEN		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7
Mailing Address 7935 SW SANTOLINA PLACE		Transaction ID: SA11A1.90998
City State Zip Code BEAVERTON OR 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 ▼ 500.00	

Full Name (Last, First, Middle Initial) C. CAROL A ANDERSON		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 303 Dias Drive		Transaction ID: SA11A1.90480
City State Zip Code Fort Washington MD 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 ▼ 430.38	

SUBTOTAL of Receipts This Page (optional) ▶	147.82
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 11 / 244
	<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. CAROL A ANDERSON		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 303 Dias Drive		Transaction ID: SA11A1.91197	
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 ▼ 478.20		

Full Name (Last, First, Middle Initial) B. MICHAEL ANDREJCO		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address C/O 4031 EXECUTIVE PARK DRIVE		Transaction ID: SA11A1.90261	
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 ▼ 306.60		

Full Name (Last, First, Middle Initial) C. DAVID ANTLE		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address P. O. BOX 1093		Transaction ID: SA11A1.90330	
City MOSCOW	State PA	Zip Code 18444	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 ▼ 513.36		

SUBTOTAL of Receipts This Page (optional) ▶	212.94
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 12 / 244
	<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. LOUISA ARCE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 303 HAWTHORNE BLVD		Transaction ID: SA11A1.90365	
City State Zip Code DELAWARE OH 43015		Amount of Each Receipt this Period 80.40	
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 ▼ 397.32	

Full Name (Last, First, Middle Initial) B. ALVA ARELLANO		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address 890 Sharps Lot Rd.		Transaction ID: SA11A1.91057	
City State Zip Code Swansea MA 02777		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME MA CN 93 DIRECTOR OF ORGANIZING			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 241.52	

Full Name (Last, First, Middle Initial) C. LAURA M ASKELIN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address C/O 300 Hardman Avenue S Suite 2		Transaction ID: SA11A1.90240	
City State Zip Code South St. Paul MN 55075		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME MN CN 5 STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 213.00	

SUBTOTAL of Receipts This Page (optional) ▶	150.40
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 13 / 244
	<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. JAMES D. AUGUST		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>5</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	5		1	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	0		2	0	0	7													
Mailing Address 5204 Andover Road		Transaction ID: SA11A1.90481																				
City Chevy Chase	State MD	Zip Code 20815																				
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, HEALTH & SAFETY																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 430.38																					

Full Name (Last, First, Middle Initial) B. JAMES D. AUGUST		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>5</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	5		2	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		2	5		2	0	0	7													
Mailing Address 5204 Andover Road		Transaction ID: SA11A1.91198																				
City Chevy Chase	State MD	Zip Code 20815																				
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, HEALTH & SAFETY																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 478.20																					

Full Name (Last, First, Middle Initial) C. W. JEAN BACKMAN		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>5</td><td></td><td>1</td><td>8</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	5		1	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	8		2	0	0	7													
Mailing Address 1212 Jefferson Street		Transaction ID: SA11A1.90755																				
City Olympia	State WA	Zip Code 98501																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00																				
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 ▼ 280.00																					

SUBTOTAL of Receipts This Page (optional)	115.64
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 14 / 244
	<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. RICHARD C. BADGER II		Date of Receipt MM / DD / YYYY 05 / 04 / 2007
Mailing Address P.O. Box 2825		Transaction ID: SA11A1.90002
City Appleton	State WI	Zip Code 54912
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer AFSCME WI CN 40	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. RICHARD C. BADGER II		Date of Receipt MM / DD / YYYY 05 / 30 / 2007
Mailing Address P.O. Box 2825		Transaction ID: SA11A1.91265
City Appleton	State WI	Zip Code 54912
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer AFSCME WI CN 40	Occupation STAFF REPRESENTATIVE	
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. PATRICIA A. BAILEY		Date of Receipt MM / DD / YYYY 05 / 01 / 2007
Mailing Address 606 N. VAN BUREN STREET		Transaction ID: SA11A1.89943
City WILMINGTON	State DE	Zip Code 19805
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 ▼ 247.79	

SUBTOTAL of Receipts This Page (optional)	160.36
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 15 / 244
	(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 A. BAILEY		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7	
Mailing Address 606 N. VAN BUREN STREET		Transaction ID: SA11A1.91701	
City State Zip Code WILMINGTON DE 19805	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 ▼ 308.15		

Full Name (Last, First, Middle Initial) B. MARY ANN BARNETT		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 1155 Lakepointe		Transaction ID: SA11A1.90482	
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 AFSCME INT'L	Occupation ASSISTANT DIRECTOR, ORGANIZING DVLPT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 393.83		

Full Name (Last, First, Middle Initial) C. MARY ANN BARNETT		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 1155 Lakepointe		Transaction ID: SA11A1.91199	
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 AFSCME INT'L	Occupation ASSISTANT DIRECTOR, ORGANIZING DVLPT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 437.92		

SUBTOTAL of Receipts This Page (optional) ▶	148.54
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 16 / 244
	<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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
406.60

Date of Receipt
M M / D D / Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90367

Amount of Each Receipt this Period
82.28

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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
637.68

Date of Receipt
M M / D D / Y Y Y Y
05 / 04 / 2007

Transaction ID: SA11A1.90085

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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
663.68

Date of Receipt
M M / D D / Y Y Y Y
05 / 24 / 2007

Transaction ID: SA11A1.90999

Amount of Each Receipt this Period
26.00

SUBTOTAL of Receipts This Page (optional)	▶	215.64
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 17 / 244
	<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 5 / 0 4 / 2 0 0 7 Transaction ID: SA11A1.90086 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) ▼ 365.46		

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 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.90483 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) ▼ 348.48		

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 5 / 2 5 / 2 0 0 7 Transaction ID: SA11A1.91200 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) ▼ 387.20		

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: (check only one)	PAGE 18 / 244
	<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 BEGATTO

Mailing Address **301 HEDGEROW LANE**

City **WILMINGTON** State **DE** Zip Code **19807**

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

Name of Employer **AFSCME DE CN 81** Occupation **EXECUTIVE DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **431.21**

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 02 / 2007

Transaction ID: SA11A1.89942

Amount of Each Receipt this Period
84.52

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

Mailing Address **501 W George Street**

City **Arlington Heights** State **IL** Zip Code **60005**

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

Name of Employer **AFSCME IL CN 31** Occupation **REGIONAL DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **365.46**

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 04 / 2007

Transaction ID: SA11A1.90088

Amount of Each Receipt this Period
73.52

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

Mailing Address **141 Eddington Avenue**

City **Harrisburg** State **PA** Zip Code **17111-3520**

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 ▼ **423.44**

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90262

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 19 / 244
	<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 J. BENNER

Mailing Address **7650 CAHILL AVENUE**

City **INVER GROVE HGTS.** State **MN** Zip Code **55076**

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

Name of Employer **AFSCME MN CN 6/STATE STREET** Occupation **RETIREE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **216.50**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 04 / 2007

Transaction ID: SA11A1.89981

Amount of Each Receipt this Period
43.30

B. Full Name (Last, First, Middle Initial)
STACEY D BENSON-TAYLOR

Mailing Address **241 Brooklyn Avenue**

City **Dayton** State **OH** Zip Code **45417**

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 ▼ **242.79**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90368

Amount of Each Receipt this Period
49.82

C. Full Name (Last, First, Middle Initial)
PAULA BENTLEY

Mailing Address **3701 Oakview Drive**

City **Orlando** State **FL** Zip Code **32812**

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

Name of Employer **AFSCME INT'L** Occupation **AREA ORGANIZING DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **758.34**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 10 / 2007

Transaction ID: SA11A1.90484

Amount of Each Receipt this Period
84.26

SUBTOTAL of Receipts This Page (optional)	177.38
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 20 / 244
	<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. PAULA BENTLEY		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 3701 Oakview Drive		Transaction ID: SA11A1.91201	
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 ▼ 842.60		

Full Name (Last, First, Middle Initial) B. JAMES BESTPITCH		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 1410 Bush Street, Suite A		Transaction ID: SA11A1.89996	
City State Zip Code Baltimore MD 21230	Amount of Each Receipt this Period 52.72		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MD CN 67	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.88		

Full Name (Last, First, Middle Initial) C. DAVID BIELSKI		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 4499 Battleridge Rd.		Transaction ID: SA11A1.90314	
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 ▼ 513.36		

SUBTOTAL of Receipts This Page (optional) ▶	240.78
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 21 / 244
	(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. KAREN BLACK		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address P.O. BOX 304		Transaction ID: SA11A1.90263
City State Zip Code Highspire PA 17034-1409	Amount of Each Receipt this Period 100.18	
FEC ID number of contributing federal political committee. C		
Name of Employer AFCSME 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 ▼ 495.46	

Full Name (Last, First, Middle Initial) B. ARCHER BLACKWELL		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 8706 Jarwood Road		Transaction ID: SA11A1.89990
City State Zip Code Baltimore MD 21237	Amount of Each Receipt this Period 52.96	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME MD CN 67	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.84	

Full Name (Last, First, Middle Initial) C. MICHAEL BLAIR		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 8 Beacon Street		Transaction ID: SA11A1.91058
City State Zip Code Boston MA 02108	Amount of Each Receipt this Period 39.22	
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 ▼ 235.32	

SUBTOTAL of Receipts This Page (optional) ▶	192.36
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 22 / 244
	<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)
 LISA BLANTON

Mailing Address 4031 Executive Park Drive

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 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 216.02

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 09 / 2007

Transaction ID: SA11A1.90264

Amount of Each Receipt this Period
 43.68

B. Full Name (Last, First, Middle Initial)
 JEANETTE BLEEKER

Mailing Address 1076 18th Avenue South

City State Zip Code
 Minneapolis MN 55414

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

Name of Employer Occupation
 UNIVERSITY OF MINNESOTA STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 21 / 2007

Transaction ID: SA11A1.90818

Amount of Each Receipt this Period
 60.00

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

Mailing Address 2119 Robinwood Avenue

City State Zip Code
 Toledo OH 43620

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) ▼ 238.17

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 09 / 2007

Transaction ID: SA11A1.90370

Amount of Each Receipt this Period
 48.28

SUBTOTAL of Receipts This Page (optional)	151.96
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 23 / 244
	<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. PATRICIA BODAY		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 14113 SR 165E P. O. BOX 230		Transaction ID: SA11A1.90756	
City State Zip Code Buckley WA 98321	Amount of Each Receipt this Period 40.00		
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 ▼ 400.00		

Full Name (Last, First, Middle Initial) B. BARRY BOGARDE		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 4303 VERMONT COURT		Transaction ID: SA11A1.90265	
City State Zip Code Harrisburg PA 17112-9512	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 LEGISLATIVE DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 495.46		

Full Name (Last, First, Middle Initial) C. PAUL BOOTH		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 3724 Benton Street NW		Transaction ID: SA11A1.90485	
City State Zip Code Washington DC 20007-1803	Amount of Each Receipt this Period 173.66		
FEC ID number of contributing federal political committee. C			
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 ▼ 1562.94		

SUBTOTAL of Receipts This Page (optional) ▶	313.84
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:	PAGE 24 / 244
	(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. PAUL BOOTH		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 3724 Benton Street NW		Transaction ID: SA11A1.91202
City State Zip Code Washington DC 20007-1803	Amount of Each Receipt this Period 173.66	
FEC ID number of contributing federal political committee. C		
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 ▼ 1736.60	

Full Name (Last, First, Middle Initial) B. NORMA BRAIDIGAN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 300 N Derr Drive		Transaction ID: SA11A1.90325
City State Zip Code Lewisburg PA 17837-1387	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 ▼ 513.36	

Full Name (Last, First, Middle Initial) C. WILLIAM BRENNER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 3901 SCHOOLHOUSE ROAD		Transaction ID: SA11A1.90266
City State Zip Code DOVER PA 17315	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 ▼ 306.60	

SUBTOTAL of Receipts This Page (optional) ▶	338.78
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 25 / 244
	<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. JOE BRITTON		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address C/O 1900 Embarcadero Suite 305		Transaction ID: SA11A1.90205
City Oakland	State CA	Zip Code 94606-5300
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer EAST BAY PARKS	Occupation STAFF REPRESENTATIVE	
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. JEROME BROWN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 6917 RIDGELAND AVENUE		Transaction ID: SA11A1.90091
City HAMMOND	State IN	Zip Code 46324
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 62.98
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 ▼ 313.05	

Full Name (Last, First, Middle Initial) C. SHARON L. BROWN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 1801 CORA MILL ROAD		Transaction ID: SA11A1.91104
City GALLIPOLIS	State OH	Zip Code 45631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer MR. GALLIPOLIS DEV. CENTER	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	▶	202.98
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 / 244
	<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. ALAN BRUBACHER		Date of Receipt MM / DD / YYYY 05 / 09 / 2007
Mailing Address 2502 S. 4 th Street		Transaction ID: SA11A1.90267
City State Zip Code Steelton PA 17113	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 43.68
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 ▼ 210.06	

Full Name (Last, First, Middle Initial) B. BARBARA BRUMFIELD		Date of Receipt MM / DD / YYYY 05 / 04 / 2007
Mailing Address 211 ST CLAIR DRIVE		Transaction ID: SA11A1.90111
City State Zip Code FAIRVIEW HEIGHTS IL 62208	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00
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 ▼ 250.00	

Full Name (Last, First, Middle Initial) C. MICHAEL BUESING		Date of Receipt MM / DD / YYYY 05 / 25 / 2007
Mailing Address 4218 NANCY PLACE		Transaction ID: SA11A1.91086
City State Zip Code SHOREVIEW MN 55126-6412	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 44.00
Name of Employer STATE OF MINNESOTA	Occupation STAFF 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)	137.68
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:	PAGE 27 / 244
	(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. SHANE A. BUMGARNER		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>5</td><td></td><td>0</td><td>4</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	5		0	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	4		2	0	0	7													
Mailing Address 2619 S. Walnut		Transaction ID: SA11A1.90129																				
City Springfield	State IL	Zip Code 62704																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.18																				
Name of Employer AFSCME IL CN 31	Occupation ASST MIS SPECIALIST																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.22																					

Full Name (Last, First, Middle Initial) B. DIANE BURKE		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>5</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	5		1	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		1	0		2	0	0	7													
Mailing Address 6626 Potomac Avenue, A1		Transaction ID: SA11A1.90486																				
City Alexandria	State VA	Zip Code 22307																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.01																				
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 ▼ 466.30																					

Full Name (Last, First, Middle Initial) C. DIANE BURKE		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>5</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	5		2	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		2	5		2	0	0	7													
Mailing Address 6626 Potomac Avenue, A1		Transaction ID: SA11A1.91203																				
City Alexandria	State VA	Zip Code 22307																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.01																				
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 ▼ 523.31																					

SUBTOTAL of Receipts This Page (optional)	159.20
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 28 / 244
	<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. CAROL L BURNETT		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 1921 N. Westmoreland		Transaction ID: SA11A1.90487	
City State Zip Code Arlington VA 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 ▼ 396.81		

Full Name (Last, First, Middle Initial) B. CAROL L BURNETT		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 1921 N. Westmoreland		Transaction ID: SA11A1.91204	
City State Zip Code Arlington VA 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 ▼ 440.90		

Full Name (Last, First, Middle Initial) C. JUDITH BUXTON		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 2401 N 2ND STREET		Transaction ID: SA11A1.90268	
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 ▼ 495.46		

SUBTOTAL of Receipts This Page (optional) ▶	188.36
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 29 / 244
	(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. PAULA J. CAIRA		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 17 Fourteenth Street SE		Transaction ID: SA11A1.90488	
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 ▼ 428.40		

Full Name (Last, First, Middle Initial) B. PAULA J. CAIRA		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 17 Fourteenth Street SE		Transaction ID: SA11A1.91205	
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 ▼ 476.00		

Full Name (Last, First, Middle Initial) C. ANGELA M. CALDWELL		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 3664 STIRLING COURT		Transaction ID: SA11A1.90373	
City State Zip Code CLEVELAND OH 44115-3091	Amount of Each Receipt this Period 60.48		
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 ▼ 298.33		

SUBTOTAL of Receipts This Page (optional) ▶	155.68
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 30 / 244
	<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) ROBERT CALVIN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 45 CHURCH ROAD		Transaction ID: SA11A1.90315
City State Zip Code MERCER PA 16137	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 ▼ 306.60	

B. Full Name (Last, First, Middle Initial) JOHN CAMERON		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 6555 N. MAPLEWOOD		Transaction ID: SA11A1.90121
City State Zip Code CHICAGO IL 60645	Amount of Each Receipt this Period 69.52	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME IL CN 31	Occupation DIRECTOR POL./COM. RELATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.38	

C. Full Name (Last, First, Middle Initial) LINDA CANAN STEPHENS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 1625 L STREET NW		Transaction ID: SA11A1.90489
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 ▼ 860.67	

SUBTOTAL of Receipts This Page (optional) ▶	226.47
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 31 / 244
	<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. LINDA CANAN STEPHENS		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 1625 L STREET NW		Transaction ID: SA11A1.91206	
City WASHINGTON	State DC	Amount of Each Receipt this Period 95.63	
Zip Code 20036			
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 ▼ 956.30		

Full Name (Last, First, Middle Initial) B. RICHARD CAPONI		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 4453 STILLEY ROAD		Transaction ID: SA11A1.90306	
City PITTSBURGH	State PA	Amount of Each Receipt this Period 103.80	
Zip Code 15227			
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 ▼ 513.36		

Full Name (Last, First, Middle Initial) C. JOYCE CARLSON		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 911 ALDINE STREET		Transaction ID: SA11A1.90235	
City ST. PAUL	State MN	Amount of Each Receipt this Period 57.86	
Zip Code 55104			
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 ▼ 287.62		

SUBTOTAL of Receipts This Page (optional) ▶	257.29
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 / 244
	<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. TAMMY D D CARSEY		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 10453 Porter Lane		Transaction ID: SA11A1.90374	
City Athens	State OH	Zip Code 45701	Amount of Each Receipt this Period 60.48
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 ▼ 298.33		

Full Name (Last, First, Middle Initial) B. LEROY CARTER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 2648 TOWNER ROAD		Transaction ID: SA11A1.90828	
City ANN ARBOR,	State MI	Zip Code 48105	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 ▼ 257.80		

Full Name (Last, First, Middle Initial) C. ANTHONY CASO		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 9 GARDEN COURT		Transaction ID: SA11A1.91000	
City BOSTON	State MA	Zip Code 02113	Amount of Each Receipt this Period 13.00
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 ▼ 565.50		

SUBTOTAL of Receipts This Page (optional) ▶	99.26
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 33 / 244
	<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. ANTHONY CASO		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 9 GARDEN COURT		Transaction ID: SA11A1.91060
City BOSTON	State MA	Zip Code 02113
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.10
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 ▼ 665.60	

Full Name (Last, First, Middle Initial) B. JUDY K CHOW		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7
Mailing Address 888 Mililani Street, Suite 601		Transaction ID: SA11A1.90685
City Honolulu	State HI	Zip Code 96813-2991
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 ▼ 500.00	

Full Name (Last, First, Middle Initial) C. ROBERT CHYBOWSKI		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address W34 S4011 VIRGIN FOREST DRIVE		Transaction ID: SA11A1.90005
City DOUSMAN	State WI	Zip Code 53118
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer AFSCME WI CN 40	Occupation ASSOCIATE DIRECTOR	
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)	250.10
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 34 / 244
	<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)
ROBERT CHYBOWSKI

Mailing Address **W34 S4011 VIRGIN FOREST DRIVE**

City **DOUSMAN** State **WI** Zip Code **53118**

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

Name of Employer **AFSCME WI CN 40** Occupation **ASSOCIATE DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 30 / 2007

Transaction ID: SA11A1.91268

Amount of Each Receipt this Period
50.00

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

Mailing Address **4415 Rolling Pine**

City **West Bloomfield** State **MI** Zip Code **48324**

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 ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 21 / 2007

Transaction ID: SA11A1.90829

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
KATIE Y. CLAY

Mailing Address **312 N. FRANCISCO 2ND FL**

City **CHICAGO** State **IL** Zip Code **60612**

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 ▼ **313.10**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 04 / 2007

Transaction ID: SA11A1.90112

Amount of Each Receipt this Period
62.98

SUBTOTAL of Receipts This Page (optional)	137.98
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 / 244
	<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. LINCOLN COHEN		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 4500 E. 6TH STREET		Transaction ID: SA11A1.90097	
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 ▼ 323.92		

Full Name (Last, First, Middle Initial) B. TRACEY CONATY		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 1789 Lanier Place NW, #42		Transaction ID: SA11A1.90491	
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 ▼ 386.28		

Full Name (Last, First, Middle Initial) C. TRACEY CONATY		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 1789 Lanier Place NW, #42		Transaction ID: SA11A1.91208	
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 ▼ 429.20		

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 36 / 244
	<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) BEVERLY S CONTEE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 12061 Beltsville Drive		Transaction ID: SA11A1.90492	
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 ▼ 242.55		

B. Full Name (Last, First, Middle Initial) BEVERLY S CONTEE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 12061 Beltsville Drive		Transaction ID: SA11A1.91209	
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 ▼ 269.50		

C. Full Name (Last, First, Middle Initial) ROBERT COOPER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 931 SOUTH WALNUT STREET		Transaction ID: SA11A1.90337	
City State Zip Code WEST CHESTER PA 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 ▼ 513.36		

SUBTOTAL of Receipts This Page (optional) ▶	157.70
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 / 244
	<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)
SHARON CORKIN

Mailing Address 4106 Terrace Street #5

City State Zip Code
Oak CA 94611

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

Name of Employer EAST BAY PARKS Occupation MAINTENANCE WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 08 / 2007

Transaction ID: SA11A1.90203

Amount of Each Receipt this Period
160.00

B. Full Name (Last, First, Middle Initial)
CHRISTOPHER COWEN

Mailing Address 47 DOUGLAS STREET

City State Zip Code
ST. PAUL MN 55102

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

Name of Employer AFSCME MN CN 14 Occupation BUSINESS REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 308.82

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 08 / 2007

Transaction ID: SA11A1.90236

Amount of Each Receipt this Period
62.60

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

Mailing Address 18945 LITTLEFIELD

City State Zip Code
DETROIT MI 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 ▼ 257.80

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 21 / 2007

Transaction ID: SA11A1.90830

Amount of Each Receipt this Period
25.78

SUBTOTAL of Receipts This Page (optional)	▶	248.38
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:	PAGE 38 / 244
	(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. DICK CROFTER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 238 S. OAK PARK AVENUE #1F		Transaction ID: SA11A1.90106
City OAK PARK	State IL	Zip Code 60302
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 ▼ 299.14	

Full Name (Last, First, Middle Initial) B. JAMES CULLEN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 1111 Morningside Avenue		Transaction ID: SA11A1.90494
City Schenectady	State NY	Zip Code 12308
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.01
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 ▼ 362.49	

Full Name (Last, First, Middle Initial) C. JAMES CULLEN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 1111 Morningside Avenue		Transaction ID: SA11A1.91211
City Schenectady	State NY	Zip Code 12308
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.01
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 ▼ 403.50	

SUBTOTAL of Receipts This Page (optional)	▶	142.20
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 39 / 244
	<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. PATRICIA K. CURRIE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 7088 Scioto Chase Blvd.		Transaction ID: SA11A1.90376
City State Zip Code Powell OH 43065	Amount of Each Receipt this Period 48.28	
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 ▼ 344.97	

Full Name (Last, First, Middle Initial) B. PATRICIA K. CURRIE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7
Mailing Address 7088 Scioto Chase Blvd.		Transaction ID: SA11A1.91702
City State Zip Code Powell OH 43065	Amount of Each Receipt this Period 4.20	
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 ▼ 349.17	

Full Name (Last, First, Middle Initial) C. JENNIFER C DAEHN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 1602 E Street, SE		Transaction ID: SA11A1.90495
City State Zip Code Washington DC 20003	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 I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 388.53	

SUBTOTAL of Receipts This Page (optional) ▶	95.65
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:	PAGE 40 / 244
	(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 0 5 / 2 5 / 2 0 0 7	
Mailing Address 1602 E Street, SE		Transaction ID: SA11A1.91212	
City Washington	State DC	Zip Code 20003	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 I		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 431.70		

Full Name (Last, First, Middle Initial) B. JEFFREY DAINS		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 1743 CARL STREET		Transaction ID: SA11A1.90233	
City ROSEVILLE	State MN	Zip Code 55113	Amount of Each Receipt this Period 54.00
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 ▼ 270.00		

Full Name (Last, First, Middle Initial) C. WILLIAM DANDO		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 6630 HUNTINGDON STREET		Transaction ID: SA11A1.90269	
City HARRISBURG	State PA	Zip Code 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 ▼ 366.08		

SUBTOTAL of Receipts This Page (optional)	171.19
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 41 / 244
	<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)
 ROBERT DAVIS

Mailing Address 822 BOVEE LANE

City State Zip Code
 POWELL OH 43065

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

Name of Employer Occupation
 AFSCME OH CN 8 ASSOCIATE DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 392.08

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.90377

Amount of Each Receipt this Period
 82.28

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) ▼ 411.49

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.90496

Amount of Each Receipt this Period
 43.29

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) ▼ 454.78

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

Transaction ID: SA11A1.91213

Amount of Each Receipt this Period
 43.29

SUBTOTAL of Receipts This Page (optional)	168.86
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:	PAGE 42 / 244
	(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. CHERYL DELL'AGLIO		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 4031 EXECUTIVE PARK DRIVE PA COUNCIL 13		Transaction ID: SA11A1.90331	
City HARRISBURG	State PA	Zip Code 17111-1599	Amount of Each Receipt this Period 43.68
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 ▼ 216.02		

Full Name (Last, First, Middle Initial) B. MICHAEL DELUKE		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 325 S. DEPEYSTER STREET		Transaction ID: SA11A1.90378	
City KENT	State OH	Zip Code 44240	Amount of Each Receipt this Period 48.28
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH CN 8 CITY OF KENT	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.17		

Full Name (Last, First, Middle Initial) C. JOHN C DEMPSEY		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 20235 Watermark Place		Transaction ID: SA11A1.90497	
City Sterling	State VA	Zip Code 20165	Amount of Each Receipt this Period 86.83
FEC ID number of contributing federal political committee. C			
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 ▼ 781.47		

SUBTOTAL of Receipts This Page (optional) ▶	178.79
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 43 / 244
	<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. JOHN C DEMPSEY		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 20235 Watermark Place		Transaction ID: SA11A1.91214
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 ▼ 868.30	

Full Name (Last, First, Middle Initial) B. CONSTANCE DERR		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address P.O. Box 116		Transaction ID: SA11A1.90498
City Maspeth	State NY	Zip Code 11378
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 52.57
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 ▼ 473.13	

Full Name (Last, First, Middle Initial) C. CONSTANCE DERR		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address P.O. Box 116		Transaction ID: SA11A1.91215
City Maspeth	State NY	Zip Code 11378
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 52.57
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 ▼ 525.70	

SUBTOTAL of Receipts This Page (optional)	▶	191.97
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 44 / 244
	<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. GREG DEVEREUX		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 3561 S.E. Kamilehe Point Road		Transaction ID: SA11A1.90757	
City State Zip Code Shelton WA 98584	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME WA CN 28	Occupation EXECUTIVE DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1398.00		

Full Name (Last, First, Middle Initial) B. GREG DEVEREUX		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 3561 S.E. Kamilehe Point Road		Transaction ID: SA11A1.91001	
City State Zip Code Shelton WA 98584	Amount of Each Receipt this Period 13.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME WA CN 28	Occupation EXECUTIVE DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1411.00		

Full Name (Last, First, Middle Initial) C. JUDY DEVOE		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 3256 Ocean Beach Hwy		Transaction ID: SA11A1.90758	
City State Zip Code Longview WA 98632	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C			
Name of Employer STATE EMP VANCOUVER	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) ▶	153.00
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 45 / 244
	(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. WILLIAM A DEVORE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 4499 Stover Road		Transaction ID: SA11A1.90379
City State Zip Code Ostrander OH 43061	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 51.44
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 ▼ 253.72	

Full Name (Last, First, Middle Initial) B. JEAN M DIEDERICH		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7
Mailing Address 4741 Grand Ave. S No. 3		Transaction ID: SA11A1.90720
City State Zip Code Minneapolis MN 55419-5443	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 53.00
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 ▼ 774.00	

Full Name (Last, First, Middle Initial) C. RACHEL DIETZ		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 1332 Fulton St.		Transaction ID: SA11A1.90270
City State Zip Code Harrisburg PA 17102	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 43.68
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 ▼ 216.02	

SUBTOTAL of Receipts This Page (optional)	▶	148.12
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 46 / 244
	<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 DIFLORIO

Mailing Address **1034 N Washington**

City **Lansing** State **MI** Zip Code **48906**

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 ▼ **269.24**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 21 / 2007

Transaction ID: SA11A1.90831

Amount of Each Receipt this Period
27.05

B. Full Name (Last, First, Middle Initial)
JOHN A DINICOLA

Mailing Address **320 2nd Street**

City **Bergenline** State **NJ** Zip Code **07087**

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 ▼ **299.14**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 04 / 2007

Transaction ID: SA11A1.90138

Amount of Each Receipt this Period
60.18

C. Full Name (Last, First, Middle Initial)
LINDA DITTES

Mailing Address **1409 Saltair Avenue
 Apt #103**

City **Los Angeles** State **CA** Zip Code **90025**

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

Name of Employer **AFSCME CA CN 57** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 04 / 2007

Transaction ID: SA11A1.89988

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional)	127.23
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 / 244
	<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)
KEVIN DOEING

Mailing Address 316 Quittie Park Dr.

City State Zip Code
Annville PA 17003

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

Name of Employer Occupation
AFSCME PA CN 13 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 316.18

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.90271

Amount of Each Receipt this Period
65.84

B. Full Name (Last, First, Middle Initial)
LORI DONALDSON

Mailing Address 419 1/2 Grant Street

City State Zip Code
Franklin PA 16323

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

Name of Employer Occupation
AFSCME PA CN 13 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.02

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.90317

Amount of Each Receipt this Period
43.68

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

Mailing Address 3617 AUTUMNWOOD COURT, S.E.

City State Zip Code
BOSTON HARBOR WA 98501

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

Name of Employer Occupation
AFSCME WA CN 28 ADMINISTRATIVE ASSISTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: SA11A1.90759

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)	139.52
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 48 / 244
	<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)
THOMAS DRABICK, JR.

Mailing Address 982 Fortkort Dr.

City Reynoldsburg State OH Zip Code 43068-6803

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

Name of Employer AFSCME OH LOC 4 Occupation STAFF ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.00

Date of Receipt
05 / 08 / 2007

Transaction ID: SA11A1.90194

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
LAURA E. DRAKE

Mailing Address 238 S. OAK PARK AVENUE

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 SENIOR ORGANIZER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 299.14

Date of Receipt
05 / 04 / 2007

Transaction ID: SA11A1.90123

Amount of Each Receipt this Period
60.18

C. Full Name (Last, First, Middle Initial)
ALBERT DRANTZ

Mailing Address 6140 N. LAKEWOOD

City CHICAGO State IL Zip Code 60660

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 ▼ 221.00

Date of Receipt
05 / 04 / 2007

Transaction ID: SA11A1.90113

Amount of Each Receipt this Period
44.20

SUBTOTAL of Receipts This Page (optional)	134.38
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:	PAGE 49 / 244
	(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. JAMES W DURKIN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 8 Beacon Street		Transaction ID: SA11A1.91061
City Boston	State MA	Zip Code 02108
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer AFSCME MA CN 93	Occupation COMMUNICATIONS SPECIALIST	
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) B. EINAR O DYBLIE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7
Mailing Address 3443 Vista Del Oro		Transaction ID: SA11A1.90801
City Oceanside	State CA	Zip Code 92056
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer METRO WATER DISTRICT	Occupation STAFF REPRESENTATIVE	
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. DENNIS EAGLE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address 5007 26th Ave., SE		Transaction ID: SA11A1.90760
City Lacey	State WA	Zip Code 98503
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
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 ▼ 1120.00	

SUBTOTAL of Receipts This Page (optional)	▶	150.00
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 50 / 244
	<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)
 THOMAS EDSTROM

Mailing Address 4106 N. SACRAMENTO

City State Zip Code
 CHICAGO IL 60618

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

Name of Employer Occupation
 AFSCME IL CN 31 LEGAL COUNSEL

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 349.96

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

Transaction ID: SA11A1.90072

Amount of Each Receipt this Period
 70.40

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

Mailing Address 4328 N. HERMITAGE AVENUE #1-W

City State Zip Code
 CHICAGO IL 60613

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) ▼ 299.14

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

Transaction ID: SA11A1.90125

Amount of Each Receipt this Period
 60.18

C. Full Name (Last, First, Middle Initial)
 MICHELLE EVANS

Mailing Address 10201 Galana Pointe Drive

City State Zip Code
 Galana Pointe OH 43021

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

Name of Employer Occupation
 AFSCME OH CN 8 STAFF ATTORNEY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 312.12

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.90380

Amount of Each Receipt this Period
 63.16

SUBTOTAL of Receipts This Page (optional)	▶	193.74
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 51 / 244
	(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. MARY FALK		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 11236 Georgia Avenue		Transaction ID: SA11A1.90206	
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 ▼ 353.00	

Full Name (Last, First, Middle Initial) B. STEPHAN FANTAUZZO		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 3840 N. Delaware Street		Transaction ID: SA11A1.90499	
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 ▼ 513.09	

Full Name (Last, First, Middle Initial) C. STEPHAN FANTAUZZO		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 3840 N. Delaware Street		Transaction ID: SA11A1.91216	
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 ▼ 570.10	

SUBTOTAL of Receipts This Page (optional) ▶	168.02
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 52 / 244
	(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. JAY FARRELL		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7	
Mailing Address 3800 Spruce Street		Transaction ID: SA11A1.90171	
City Philadelphia	State PA	Amount of Each Receipt this Period 50.00	
Zip Code 19104		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer UNIVERSITY OF PENNSYLVANIA	Occupation PROFESSOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. RICHARD FELLER		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 4705 Butterworth Place, NW		Transaction ID: SA11A1.90500	
City Washington	State DC	Amount of Each Receipt this Period 51.86	
Zip Code 20016		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, POLITICAL ACTION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 466.74		

Full Name (Last, First, Middle Initial) C. RICHARD FELLER		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 4705 Butterworth Place, NW		Transaction ID: SA11A1.91217	
City Washington	State DC	Amount of Each Receipt this Period 51.86	
Zip Code 20016		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, POLITICAL ACTION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 518.60		

SUBTOTAL of Receipts This Page (optional) ▶	153.72
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 / 244
	<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)
 RICHARD C FERLAUTO

Mailing Address 2806 North Somerset Street

City State Zip Code
 Arlington VA 22213

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

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

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 404.16

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.90501

Amount of Each Receipt this Period
 46.54

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

Mailing Address 2806 North Somerset Street

City State Zip Code
 Arlington VA 22213

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

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

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.70

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

Transaction ID: SA11A1.91218

Amount of Each Receipt this Period
 46.54

C. Full Name (Last, First, Middle Initial)
 JASPER FERRARO

Mailing Address 710 JOHN STREET

City State Zip Code
 ROCKFORD IL 61103

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

Name of Employer Occupation
 AFSCME ILCN 31 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 308.10

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

Transaction ID: SA11A1.90075

Amount of Each Receipt this Period
 61.98

SUBTOTAL of Receipts This Page (optional)	155.06
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 54 / 244
	(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. JOHN J FILAK JR		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 6160 Galena Point Drive		Transaction ID: SA11A1.90381	
City State Zip Code Poland OH 44514	Amount of Each Receipt this Period 82.28		
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 ▼ 406.60		

Full Name (Last, First, Middle Initial) B. DAVID FILLMAN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 2520 HELEN STREET		Transaction ID: SA11A1.90272	
City State Zip Code HATBORO PA 19040	Amount of Each Receipt this Period 128.86		
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 ▼ 689.30		

Full Name (Last, First, Middle Initial) C. DAVID FILLMAN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 2520 HELEN STREET		Transaction ID: SA11A1.91003	
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 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 ▼ 702.30		

SUBTOTAL of Receipts This Page (optional) ▶	224.14
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 55 / 244
	<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. DENNIS P. FLEMING		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2007	
Mailing Address 449 ST. MARY DRIVE		Transaction ID: SA11A1.90087	
City EDWARDSVILLE	State IL	Zip Code 62025	Amount of Each Receipt this Period 51.54
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IL CN 31	Occupation MEMBERSHIP COORDINATOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 256.20		

Full Name (Last, First, Middle Initial) B. WILLIAM F. FOGLE		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2007	
Mailing Address 1777 BUCKLEW DRIVE		Transaction ID: SA11A1.90382	
City TOLEDO	State OH	Zip Code 43613	Amount of Each Receipt this Period 60.48
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 ▼ 298.33		

Full Name (Last, First, Middle Initial) C. MICHAEL FOX		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2007	
Mailing Address 3818 SHEFFIELD LANE		Transaction ID: SA11A1.90347	
City HARRISBURG	State PA	Zip Code 17110-3044	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 ▼ 773.36		

SUBTOTAL of Receipts This Page (optional) ▶	215.82
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 56 / 244
	<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 FOX		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 3818 SHEFFIELD LANE		Transaction ID: SA11A1.91004	
City State Zip Code HARRISBURG PA 17110-3044	Amount of Each Receipt this Period 65.00		
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 ▼ 838.36		

B. Full Name (Last, First, Middle Initial) GARETH J FRANK		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 2309 Parkway		Transaction ID: SA11A1.90502	
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 ▼ 466.74		

C. Full Name (Last, First, Middle Initial) GARETH J FRANK		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 2309 Parkway		Transaction ID: SA11A1.91219	
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 ▼ 518.60		

SUBTOTAL of Receipts This Page (optional) ▶	168.72
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 57 / 244
	(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) BRIAN FUTEN Mailing Address 445 MAYFAIR DRIVE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7 Transaction ID: SA11A1.90090
City State Zip Code LINCOLN IL 62656	Amount of Each Receipt this Period 64.56	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 64.56
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 ▼ 320.92	

B. Full Name (Last, First, Middle Initial) AMY GALATIAN Mailing Address 10925 Southern Highlands Parkway		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7 Transaction ID: SA11A1.90503
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		Amount of Each Receipt this Period 32.05
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 ▼ 286.73	

C. Full Name (Last, First, Middle Initial) AMY GALATIAN Mailing Address 10925 Southern Highlands Parkway		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 Transaction ID: SA11A1.91220
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		Amount of Each Receipt this Period 32.05
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 ▼ 318.78	

SUBTOTAL of Receipts This Page (optional) ▶	128.66
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 58 / 244
	<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. DEBRA L. GARCIA		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 449 College Avenue		Transaction ID: SA11A1.90383	
City State Zip Code Richmond IN 47374	Amount of Each Receipt this Period 48.28		
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 ▼ 238.17		

Full Name (Last, First, Middle Initial) B. ALBERT GARRETT		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 18491 LAUDER		Transaction ID: SA11A1.90833	
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 AFSCME MI CN 25	Occupation PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 603.00		

Full Name (Last, First, Middle Initial) C. ALBERT GARRETT		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 18491 LAUDER		Transaction ID: SA11A1.91005	
City State Zip Code DETROIT MI 48235	Amount of Each Receipt this Period 13.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MI CN 25	Occupation PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 616.00		

SUBTOTAL of Receipts This Page (optional) ▶	116.38
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 59 / 244
	<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) IRASEMA T. GARZA		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 6804 Granby Street		Transaction ID: SA11A1.90504	
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 ▼ 513.09	

B. Full Name (Last, First, Middle Initial) IRASEMA T. GARZA		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 6804 Granby Street		Transaction ID: SA11A1.91221	
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 ▼ 570.10	

C. Full Name (Last, First, Middle Initial) DAVID GASH		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 226 HARTLEY ROAD		Transaction ID: SA11A1.90355	
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 ▼ 306.60	

SUBTOTAL of Receipts This Page (optional) ▶	175.34
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 60 / 244
	<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. RAGLAN GEORGE		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7
Mailing Address 75 Varick Street Suite #1404		Transaction ID: SA11A1.91006
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 AFSCME NY CN 1707	Occupation EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 322.52	

Full Name (Last, First, Middle Initial) B. JANET L GIBBONS		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address 4320 NW 2nd Avenue		Transaction ID: SA11A1.90176
City State Zip Code Des Moines IA 50313	Amount of Each Receipt this Period 42.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME IA CN 61	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. THOMAS GIBBS		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 152 Upper Claar Rd.		Transaction ID: SA11A1.90297
City State Zip Code Claysburg PA 16625	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 ▼ 306.60	

SUBTOTAL of Receipts This Page (optional) ▶	116.32
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 61 / 244
	<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. KEVIN J. GILBRIDE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 4523 WESTERPOOL CIR		Transaction ID: SA11A1.91115	
City State Zip Code COLUMBUS OH 43228		Amount of Each Receipt this Period 19.76	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation ORIENT CORRECTIONS FAC STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 217.36	

Full Name (Last, First, Middle Initial) B. KAREN GILGOFF		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 3003 Van Ness Street NW, #W1023		Transaction ID: SA11A1.90505	
City State Zip Code Washington DC 20008		Amount of Each Receipt this Period 42.47	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L ASST. DIRECTOR, RETIREES PROGRAM			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 382.23	

Full Name (Last, First, Middle Initial) C. KAREN GILGOFF		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 3003 Van Ness Street NW, #W1023		Transaction ID: SA11A1.91222	
City State Zip Code Washington DC 20008		Amount of Each Receipt this Period 42.47	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME INT'L ASST. DIRECTOR, RETIREES PROGRAM			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 424.70	

SUBTOTAL of Receipts This Page (optional) ▶	104.70
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 / 244
	<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)
HERMAN GILMAN

Mailing Address 4202 45th S

City State Zip Code
Seattle WA 98118-1403

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

Name of Employer Occupation
AFSCME WA CN 28 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 8 / 2 0 0 7

Transaction ID: SA11A1.90762

Amount of Each Receipt this Period
20.00

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

Mailing Address 1410 Bush Street Suite A

City State Zip Code
Baltimore MD 21230

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

Name of Employer Occupation
AFSCME MD CN 67 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.76

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

Transaction ID: SA11A1.89994

Amount of Each Receipt this Period
50.44

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

Mailing Address 55 Aberdeen Avenue

City State Zip Code
Cambridge MA 02138-4646

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 379.17

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.90506

Amount of Each Receipt this Period
42.13

SUBTOTAL of Receipts This Page (optional)	▶	112.57
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: (check only one)	PAGE 63 / 244
	<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 GLYNN

Mailing Address 55 Aberdeen Avenue

City State Zip Code
 Cambridge MA 02138-4646

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

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

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 421.30

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

Transaction ID: SA11A1.91223

Amount of Each Receipt this Period
 42.13

B. Full Name (Last, First, Middle Initial)
 ALICE GOFF

Mailing Address 8124 Alix Ave.

City State Zip Code
 Los Angeles CA 90001-3517

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) ▼ 362.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 3 / 2 0 0 7

Transaction ID: SA11A1.89960

Amount of Each Receipt this Period
 40.00

C. Full Name (Last, First, Middle Initial)
 ALICE GOFF

Mailing Address 8124 Alix Ave.

City State Zip Code
 Los Angeles CA 90001-3517

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) ▼ 382.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 1 1 / 2 0 0 7

Transaction ID: SA11A1.90430

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)	102.13
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 64 / 244
	<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. ALICE GOFF		Date of Receipt MM / DD / YYYY 05 / 24 / 2007
Mailing Address 8124 Alix Ave.		Transaction ID: SA11A1.91007
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 ▼ 395.00	

Full Name (Last, First, Middle Initial) B. MARK GOLDEN		Date of Receipt MM / DD / YYYY 05 / 09 / 2007
Mailing Address 74 ICE POND ROAD		Transaction ID: SA11A1.90339
City LEVITTOWN	State PA	Zip Code 19057
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 REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.60	

Full Name (Last, First, Middle Initial) C. RICHARD GOLLINS		Date of Receipt MM / DD / YYYY 05 / 10 / 2007
Mailing Address 900 Randolph Place		Transaction ID: SA11A1.90426
City Union	State NJ	Zip Code 07083
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer AFSCME NJ CN 52	Occupation EXECUTIVE DIRECTOR	
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)	124.32
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 65 / 244
	<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 GOULDING		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 2183 King James Dr.		Transaction ID: SA11A1.90025	
City State Zip Code Green Bay WI 54304	Amount of Each Receipt this Period 50.00		
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 ▼ 380.00		

Full Name (Last, First, Middle Initial) B. MARY GOULDING		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 2183 King James Dr.		Transaction ID: SA11A1.91304	
City State Zip Code Green Bay WI 54304	Amount of Each Receipt this Period 50.00		
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 ▼ 430.00		

Full Name (Last, First, Middle Initial) C. STEPHEN M. GRAHAM		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 10105 Baltimore Avenue, Apt 3407		Transaction ID: SA11A1.90507	
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 ▼ 348.48		

SUBTOTAL of Receipts This Page (optional) ▶	138.72
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 / 244
	<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 M. GRAHAM

Mailing Address **10105 Baltimore Avenue,
 Apt 3407**

City **College Park** State **MD** Zip Code **20740**

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 ▼ **387.20**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 25 / 2007

Transaction ID: SA11A1.91224

Amount of Each Receipt this Period
38.72

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

Mailing Address **17420 Aquasco Farm Road**

City **Aquasco** State **MD** Zip Code **20608**

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 ▼ **286.11**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 10 / 2007

Transaction ID: SA11A1.90508

Amount of Each Receipt this Period
31.79

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

Mailing Address **17420 Aquasco Farm Road**

City **Aquasco** State **MD** Zip Code **20608**

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 ▼ **317.90**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 25 / 2007

Transaction ID: SA11A1.91225

Amount of Each Receipt this Period
31.79

SUBTOTAL of Receipts This Page (optional)	102.30
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 67 / 244
	<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)
BEN GRANTHAM

Mailing Address **1110 Chestnut Street S.E.
 #202**

City **Olympia** State **WA** Zip Code **98501**

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 ▼ **332.87**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 18 / 2007

Transaction ID: SA11A1.90763

Amount of Each Receipt this Period
27.60

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

Mailing Address **10201 GALENA POINTE DRIVE**

City **GALENA** State **OH** Zip Code **43021**

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

Name of Employer **AFSCME OH CN 8** Occupation **GENERAL COUNSEL**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **495.02**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90384

Amount of Each Receipt this Period
100.16

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

Mailing Address **840 Randolph Ave.**

City **St. Paul** State **MN** Zip Code **55102**

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

Name of Employer **AFSCME MN CN 14** Occupation **STAFF REPRESENTATIVE**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **274.80**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 08 / 2007

Transaction ID: SA11A1.90229

Amount of Each Receipt this Period
52.36

SUBTOTAL of Receipts This Page (optional)	180.12
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 / 244
	<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. STEVE GRETSUK		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 7803 Desiree Street		Transaction ID: SA11A1.90509
City Alexandria	State VA	Zip Code 22315
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 74.62
Name of Employer AFSCME INT'L	Occupation DIRECTOR, INFORMATION SYSTEMS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 671.58	

Full Name (Last, First, Middle Initial) B. STEVE GRETSUK		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 7803 Desiree Street		Transaction ID: SA11A1.91226
City Alexandria	State VA	Zip Code 22315
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 74.62
Name of Employer AFSCME INT'L	Occupation DIRECTOR, INFORMATION SYSTEMS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 746.20	

Full Name (Last, First, Middle Initial) C. KIMBERLY GRIFFIN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 4109 Silver Park Terrace		Transaction ID: SA11A1.90510
City Suitland	State MD	Zip Code 20746
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.50
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 ▼ 211.50	

SUBTOTAL of Receipts This Page (optional)	▶	172.74
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 69 / 244
	(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. KIMBERLY GRIFFIN		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 4109 Silver Park Terrace		Transaction ID: SA11A1.91227	
City State Zip Code Suitland MD 20746		Amount of Each Receipt this Period 23.50	
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 ▼ 235.00	

Full Name (Last, First, Middle Initial) B. DANIEL GROVE		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 131 Scanlon Dirve		Transaction ID: SA11A1.90318	
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 ▼ 278.40	

Full Name (Last, First, Middle Initial) C. JON A. GWYNNE		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 2052 Sherwood Lake Drive		Transaction ID: SA11A1.90128	
City State Zip Code Schereville IN 46375		Amount of Each Receipt this Period 45.18	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME IL CN 31 STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 224.60	

SUBTOTAL of Receipts This Page (optional) ▶	124.36
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 70 / 244
	<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. A. JENNIFER HALL		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 1205 SWEENEY DRIVE, APT. 6		Transaction ID: SA11A1.90511
City MIDDLETON State WI Zip Code 53562	Amount of Each Receipt this Period 27.50	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME WI CN 40 Occupation ORGANIZER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	247.50

Full Name (Last, First, Middle Initial) B. A. JENNIFER HALL		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 1205 SWEENEY DRIVE, APT. 6		Transaction ID: SA11A1.91228
City MIDDLETON State WI Zip Code 53562	Amount of Each Receipt this Period 27.50	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME WI CN 40 Occupation ORGANIZER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	275.00

Full Name (Last, First, Middle Initial) C. YVONNE J HARGROVE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 12832 Evansport PI		Transaction ID: SA11A1.90512
City Woodbridge State VA Zip Code 22192	Amount of Each Receipt this Period 28.29	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L Occupation ADMINISTRATIVE ASSISTANT I		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	254.61

SUBTOTAL of Receipts This Page (optional)	▶	83.29
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 / 244
	<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. YVONNE J HARGROVE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 12832 Evansport PI		Transaction ID: SA11A1.91229
City Woodbridge	State VA	Zip Code 22192
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.29
Name of Employer AFSCME INT'L	Occupation ADMINISTRATIVE ASSISTANT I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 282.90	

Full Name (Last, First, Middle Initial) B. WILLIAM HARPER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7
Mailing Address 5073 ROHNS		Transaction ID: SA11A1.90837
City DETROIT	State MI	Zip Code 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 ▼ 296.00	

Full Name (Last, First, Middle Initial) C. LORA HARRIS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 265 Forest Blvd		Transaction ID: SA11A1.90104
City Park Forest	State IL	Zip Code 60466-1750
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 ▼ 297.80	

SUBTOTAL of Receipts This Page (optional)	118.07
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 72 / 244
	<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)
 LOUIS HARRIS

Mailing Address 1516 172nd Street East

City State Zip Code
 Spanaway WA 98387

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

Name of Employer Occupation
 AFSCME CA CN 36 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 261.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 3 / 2 0 0 7

Transaction ID: SA11A1.89959

Amount of Each Receipt this Period
 30.00

B. Full Name (Last, First, Middle Initial)
 RAYMOND HARRIS

Mailing Address 3 INDIGO COURT

City State Zip Code
 BOLINGBROOK IL 60440

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

Name of Employer Occupation
 AFSCME IL CN 31 DIRECTOR INT GOVERNMENT RELATIONS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 339.24

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

Transaction ID: SA11A1.90089

Amount of Each Receipt this Period
 68.24

C. Full Name (Last, First, Middle Initial)
 STEPHANIE HARRISON

Mailing Address 7824 Main Falls Creek

City State Zip Code
 Catonsville MD 21228

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

Name of Employer Occupation
 AFSCME INT'L DIRECTOR, HUMAN RESOURCES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 643.89

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.90513

Amount of Each Receipt this Period
 78.81

SUBTOTAL of Receipts This Page (optional)	177.05
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 73 / 244
	<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 0 5 / 2 5 / 2 0 0 7	
Mailing Address 7824 Main Falls Creek		Transaction ID: SA11A1.91230	
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 ▼ 722.70		

Full Name (Last, First, Middle Initial) B. FRED L. HARTSEL		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 518 23RD STREET NW		Transaction ID: SA11A1.90385	
City State Zip Code CANTON OH 44709	Amount of Each Receipt this Period 60.48		
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 ▼ 298.33		

Full Name (Last, First, Middle Initial) C. MICHAEL D HATCHER		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address P. O. Box 231		Transaction ID: SA11A1.90514	
City State Zip Code Monticello KY 42633	Amount of Each Receipt this Period 27.81		
FEC ID number of contributing federal political committee. C			
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 ▼ 248.07		

SUBTOTAL of Receipts This Page (optional) ▶	167.10
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 74 / 244
	<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 State Zip Code
 Monticello KY 42633

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

Name of Employer Occupation
 AFSCME INT'L LEAD ORGANIZER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 275.88

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

Transaction ID: SA11A1.91231

Amount of Each Receipt this Period
 27.81

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

Mailing Address 29 Jenny Lind Street

City State Zip Code
 Taunton MA 02780

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

Name of Employer Occupation
 AFSCME MA CN 93 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 242.76

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 9 / 2 0 0 7

Transaction ID: SA11A1.91062

Amount of Each Receipt this Period
 40.46

C. 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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.50

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 1 / 2 0 0 7

Transaction ID: SA11A1.90839

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 75 / 244
	<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)
 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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 513.36

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.90356

Amount of Each Receipt this Period
 103.80

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) ▼ 505.10

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 1 / 2 0 0 7

Transaction ID: SA11A1.90840

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) ▼ 321.18

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 8 / 2 0 0 7

Transaction ID: SA11A1.90228

Amount of Each Receipt this Period
 65.10

SUBTOTAL of Receipts This Page (optional)	▶	219.41
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 76 / 244
	<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)
 J DAVID HENDERSON

Mailing Address 20405 SPRING VALLEY ROAD

City State Zip Code
PITTSBURGH PA 15243

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) ▼ **306.60**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 09 2007

Transaction ID: SA11A1.90309

Amount of Each Receipt this Period
61.32

B. Full Name (Last, First, Middle Initial)
 DIANE HEWITT

Mailing Address 4 Twin Wells Court

City State Zip Code
Middleton NY 10940

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

Name of Employer Occupation
 AFSCME NY LOC 1000 MENTAL HYGIENE THERAPIST

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **220.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 24 2007

Transaction ID: SA11A1.90995

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
 KEVIN E HILL

Mailing Address 541 Coconut Street

City State Zip Code
Satellite Beach FL 32937

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

Name of Employer Occupation
 AFSCME INT'L ORGANIZER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **219.50**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 25 2007

Transaction ID: SA11A1.91232

Amount of Each Receipt this Period
21.95

SUBTOTAL of Receipts This Page (optional)	103.27
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 77 / 244
	<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. ELIZABETH C HO		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 1511 Kalaniewai Street		Transaction ID: SA11A1.90516	
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 ▼ 379.17		

Full Name (Last, First, Middle Initial) B. ELIZABETH C HO		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 1511 Kalaniewai Street		Transaction ID: SA11A1.91233	
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 ▼ 421.30		

Full Name (Last, First, Middle Initial) C. MARGARET HOAK		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 605 LINCOLN AVENUE		Transaction ID: SA11A1.90274	
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 ▼ 306.60		

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:	PAGE 78 / 244
	(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) KARLA HODGE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 1212 N. 14th Street		Transaction ID: SA11A1.90357
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 ▼ 285.84	

B. Full Name (Last, First, Middle Initial) DANNY HOMAN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address 3000 ISABELLA		Transaction ID: SA11A1.90175
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 ▼ 300.00	

C. Full Name (Last, First, Middle Initial) JESSIE F R HOOMALU		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7
Mailing Address P. O. BOX 908		Transaction ID: SA11A1.90691
City State Zip Code Haleiwa HI 96712	Amount of Each Receipt this Period 50.00	
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 ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	171.32
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:	PAGE 79 / 244
	(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)
CARLA INSINGA-MINSER

Mailing Address 4287 SOUTH CAROLINA DRIVE

City State Zip Code
BLUE RIDGE PA 17112

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) ▼ 378.82

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.90276

Amount of Each Receipt this Period
76.60

B. Full Name (Last, First, Middle Initial)
ANNE IRVING

Mailing Address 5243 N. LIND AVENUE

City State Zip Code
CHICAGO IL 60630

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

Name of Employer Occupation
AFSCME IL CN 31 DIRECTOR OF PUBLIC POLICY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 323.90

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

Transaction ID: SA11A1.90108

Amount of Each Receipt this Period
65.16

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

Mailing Address 7708 Quest Lane

City State Zip Code
Bowie MD 20720

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

Name of Employer Occupation
AFSCME INT'L ASST DIRECTOR, GENERAL SERVICES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 312.75

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.90517

Amount of Each Receipt this Period
34.75

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 80 / 244
	<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 ISLER		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 7708 Quest Lane		Transaction ID: SA11A1.91234	
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 ▼ 347.50		

Full Name (Last, First, Middle Initial) B. EDWIN JAYNE		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 3304 Alabama Avenue		Transaction ID: SA11A1.90518	
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 ▼ 466.74		

Full Name (Last, First, Middle Initial) C. EDWIN JAYNE		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 3304 Alabama Avenue		Transaction ID: SA11A1.91235	
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 ▼ 518.60		

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:	PAGE 81 / 244
	(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. PAMELA L JENKINS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 47604 Sandbank Square		Transaction ID: SA11A1.90519
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 ▼ 286.11	

Full Name (Last, First, Middle Initial) B. PAMELA L JENKINS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 47604 Sandbank Square		Transaction ID: SA11A1.91236
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 ▼ 317.90	

Full Name (Last, First, Middle Initial) C. RUTH JERELS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 1170 Winton Avenue		Transaction ID: SA11A1.90420
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 ▼ 500.00	

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 82 / 244

(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)
RUTH JERELS

Mailing Address 1170 Winton Avenue

City Akron State OH Zip Code 44320

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

Name of Employer COUNTY OF SUMMIT Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

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

Transaction ID: SA11A1.90975

Amount of Each Receipt this Period
50.00

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**

Name of Employer AFSCME INT'L Occupation LEAD ORGANIZER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 274.72

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.90520

Amount of Each Receipt this Period
30.98

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**

Name of Employer AFSCME INT'L Occupation LEAD ORGANIZER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 305.70

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

Transaction ID: SA11A1.91237

Amount of Each Receipt this Period
30.98

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 83 / 244
	<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)
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 ▼ **314.41**

Date of Receipt
M M / D D / Y Y Y Y
05 / 04 / 2007

Transaction ID: SA11A1.90114

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 ▼ **261.96**

Date of Receipt
M M / D D / Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90386

Amount of Each Receipt this Period
53.10

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 ▼ **379.17**

Date of Receipt
M M / D D / Y Y Y Y
05 / 10 / 2007

Transaction ID: SA11A1.90522

Amount of Each Receipt this Period
42.13

SUBTOTAL of Receipts This Page (optional)	158.47
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 84 / 244
	<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. GEORGE T JOHNSON		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 3853 Fairfax Square		Transaction ID: SA11A1.91239	
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 ▼ 421.30		

Full Name (Last, First, Middle Initial) B. WINSTON JOHNSON		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 14574 Longacre		Transaction ID: SA11A1.90842	
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 ▼ 241.83		

Full Name (Last, First, Middle Initial) C. JUDY A JONES		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 115 S Oak Street		Transaction ID: SA11A1.90523	
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 ▼ 466.74		

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: (check only one)	PAGE 85 / 244
	<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. JUDY A JONES		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 115 S Oak Street		Transaction ID: SA11A1.91240	
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 ▼ 518.60		

Full Name (Last, First, Middle Initial) B. BLONDIE JORDAN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 7811 Bay Cedar Drive		Transaction ID: SA11A1.89977	
City Orlando	State FL	Zip Code 32835	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME FL CN 79	Occupation REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. CHARLES JURGONIS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 11704 Bobs Ford Road		Transaction ID: SA11A1.90524	
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 ▼ 660.30		

SUBTOTAL of Receipts This Page (optional) ▶	176.48
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: (check only one)	PAGE 86 / 244
	<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) CHARLES JURGONIS		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 11704 Bobs Ford Road		Transaction ID: SA11A1.91241	
City State Zip Code Fairfax VA 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 ▼ 734.92		

B. Full Name (Last, First, Middle Initial) JASON KAY		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 2000 Cleveland		Transaction ID: SA11A1.90130	
City State Zip Code Evanston IL 60202	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 POLITICAL ACTION DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 323.90		

C. Full Name (Last, First, Middle Initial) DONALD KEELING		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address P.O. BOX 9014		Transaction ID: SA11A1.90073	
City State Zip Code SPRINGFIELD IL 62791	Amount of Each Receipt this Period 69.96		
FEC ID number of contributing federal political committee. C			
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 ▼ 347.40		

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 87 / 244
	<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)
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) ▼ 418.86

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.90525

Amount of Each Receipt this Period
46.54

B. 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) ▼ 465.40

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

Transaction ID: SA11A1.91242

Amount of Each Receipt this Period
46.54

C. Full Name (Last, First, Middle Initial)
DEBORAH L. KERBEN

Mailing Address 852 66TH AVE

City State Zip Code
BROOKLYN CENTER MN 55430-1612

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

Name of Employer Occupation
UNIVERSITY OF MINNESOTA STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 0 7

Transaction ID: SA11A1.90817

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional)	▶	153.08
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: (check only one)	PAGE 88 / 244
	<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)
PEGGY KERMEEN

Mailing Address **609 3RD AVENUE**

City **STERLING** State **IL** Zip Code **61081**

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 ▼ **299.14**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 04 / 2007

Transaction ID: SA11A1.90103

Amount of Each Receipt this Period
60.18

B. Full Name (Last, First, Middle Initial)
DEBRA KIDNEY

Mailing Address **6420 N. WILLAMETTE BLVD.**

City **PORTLAND** State **OR** Zip Code **97203**

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

Name of Employer **AFSCME OR CN 75** Occupation **ORGANIZER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 04 / 2007

Transaction ID: SA11A1.90038

Amount of Each Receipt this Period
50.00

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

Mailing Address **581 GOTZIAN STREET**

City **ST. PAUL** State **MN** Zip Code **55106**

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

Name of Employer **AFSCME MN CN 14** Occupation **BUSINESS REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **338.60**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 08 / 2007

Transaction ID: SA11A1.90226

Amount of Each Receipt this Period
65.10

SUBTOTAL of Receipts This Page (optional)	175.28
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 89 / 244
	<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) CAROLYN E. KING		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 7	
Mailing Address 41 Ellis Road		Transaction ID: SA11A1.91364	
City State Zip Code Stoneboro PA 16153		Amount of Each Receipt this Period 42.00	
FEC ID number of contributing federal political committee. C			
Name of Employer STATE OF PENNSYLVANIA		Occupation CORRECTIONS OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	

B. Full Name (Last, First, Middle Initial) GREGORY J. KING		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 147 W Linvale Street		Transaction ID: SA11A1.91243	
City State Zip Code Baltimore MD 21217		Amount of Each Receipt this Period 51.86	
FEC ID number of contributing federal political committee. C			
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 ▼ 207.44	

C. Full Name (Last, First, Middle Initial) LYNNE C KIRK		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 17 Londonderry Ct.		Transaction ID: SA11A1.90277	
City State Zip Code Cochransville PA 19330		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 STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 378.82	

SUBTOTAL of Receipts This Page (optional) ▶	170.46
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:	PAGE 90 / 244
	(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)
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) ▼ 438.04

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90278

Amount of Each Receipt this Period
88.10

B. 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) ▼ 306.60

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90279

Amount of Each Receipt this Period
61.32

C. 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) ▼ 378.82

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90280

Amount of Each Receipt this Period
76.60

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: (check only one)	PAGE 91 / 244
	<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)
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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 363.59

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.90527

Amount of Each Receipt this Period
41.01

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: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 404.60

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

Transaction ID: SA11A1.91244

Amount of Each Receipt this Period
41.01

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

Mailing Address 150 South 43rd Street, Suite #2

City State Zip Code
Harrisburg PA 17111-5708

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

Name of Employer Occupation
AFSCME PA CN 13 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 306.60

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.90348

Amount of Each Receipt this Period
61.32

SUBTOTAL of Receipts This Page (optional)	▶	143.34
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 92 / 244
	<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. MARCIA R. KNOX		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 1660 NEWTON AVENUE		Transaction ID: SA11A1.90387	
City DAYTON	State OH	Zip Code 45406-4110	Amount of Each Receipt this Period 82.28
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 ▼ 426.60		

Full Name (Last, First, Middle Initial) B. MARCIA R. KNOX		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7	
Mailing Address 1660 NEWTON AVENUE		Transaction ID: SA11A1.91703	
City DAYTON	State OH	Zip Code 45406-4110	Amount of Each Receipt this Period 5.00
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 ▼ 431.60		

Full Name (Last, First, Middle Initial) C. JOHN KOHLHEPP		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 615 S. 2nd Street		Transaction ID: SA11A1.90140	
City Springfield	State IL	Zip Code 62705	Amount of Each Receipt this Period 54.02
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 ▼ 243.10		

SUBTOTAL of Receipts This Page (optional) ▶	141.30
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 93 / 244
	<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 Mailing Address 8913 First Avenue City Silver Spring State MD Zip Code 20910 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>5</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: SA11A1.90528 Amount of Each Receipt this Period <table border="1"> <tr> <td>66.44</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	0		2	0	0	7	66.44
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	0		2	0	0	7														
66.44																							
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 ▼ <table border="1"> <tr> <td>597.96</td> </tr> </table>		597.96																					
597.96																							

B. Full Name (Last, First, Middle Initial) KERRY KORPI Mailing Address 8913 First Avenue City Silver Spring State MD Zip Code 20910 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>5</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: SA11A1.91245 Amount of Each Receipt this Period <table border="1"> <tr> <td>66.44</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	5		2	0	0	7	66.44
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		2	5		2	0	0	7														
66.44																							
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 ▼ <table border="1"> <tr> <td>664.40</td> </tr> </table>		664.40																					
664.40																							

C. Full Name (Last, First, Middle Initial) STEVEN KREISBERG Mailing Address 9954 Whitewater Drive City Burke State VA Zip Code 22015 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>5</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: SA11A1.90529 Amount of Each Receipt this Period <table border="1"> <tr> <td>51.86</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	0		2	0	0	7	51.86
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	0		2	0	0	7														
51.86																							
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 ▼ <table border="1"> <tr> <td>466.74</td> </tr> </table>		466.74																					
466.74																							

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: (check only one)	PAGE 94 / 244
	<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**

A. Full Name (Last, First, Middle Initial)
STEVEN KREISBERG

Mailing Address **9954 Whitewater Drive**

City **Burke** State **VA** Zip Code **22015**

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

Name of Employer **AFSCME INT'L** Occupation **ASSOCIATE DIRECTOR, RESEARCH**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **518.60**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 25 / 2007

Transaction ID: SA11A1.91246

Amount of Each Receipt this Period
51.86

B. Full Name (Last, First, Middle Initial)
BARBARA KREMP

Mailing Address **302 DONNELLY AVENUE**

City **ASTON** State **PA** Zip Code **19014**

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 ▼ **306.60**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90341

Amount of Each Receipt this Period
61.32

C. Full Name (Last, First, Middle Initial)
THOMAS E KULIKOSKY

Mailing Address **400 Old Dominion Avenue**

City **Herndon** State **VA** Zip Code **20170**

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

Name of Employer **AFSCME INT'L** Occupation **AUDITING MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **396.81**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 10 / 2007

Transaction ID: SA11A1.90530

Amount of Each Receipt this Period
44.09

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 95 / 244
	<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 5 / 2 5 / 2 0 0 7	
Mailing Address 400 Old Dominion Avenue		Transaction ID: SA11A1.91247	
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 ▼ 440.90		

Full Name (Last, First, Middle Initial) B. FRANCIS M. LALLY III		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 7	
Mailing Address 5 Vansant Rd., Deacon's Walk		Transaction ID: SA11A1.89941	
City State Zip Code Newark DE 19711	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 ▼ 306.38		

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 5 / 1 0 / 2 0 0 7	
Mailing Address 16 E 98 Street Apt 6F		Transaction ID: SA11A1.90531	
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 ▼ 493.29		

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 96 / 244
	<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. JOSE A JR. LA LUZ		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 16 E 98 Street Apt 6F		Transaction ID: SA11A1.91248
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 ▼ 548.10	

Full Name (Last, First, Middle Initial) B. SUSAN LANDER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 385 First Avenue Apt #7-D		Transaction ID: SA11A1.90532
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 ▼ 296.28	

Full Name (Last, First, Middle Initial) C. SUSAN LANDER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 385 First Avenue Apt #7-D		Transaction ID: SA11A1.91249
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 ▼ 329.20	

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:	PAGE 97 / 244
	(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. ELIZABETH LARSEN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address 900 Grant Street SW		Transaction ID: SA11A1.90768
City State Zip Code Tumwater WA 98512-6335	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 40.00
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 ▼ 297.50	

Full Name (Last, First, Middle Initial) B. SUE LEE-ALLEN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 7935 SW SANTOLINA PLACE		Transaction ID: SA11A1.90039
City State Zip Code BEAVERTON OR 97008-6272	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 70.00
Name of Employer AFSCME OR CN 75	Occupation ORGANIZING DIRECTOR	
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. ERIC N LEHTO		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address 2122 West 2nd Street #2		Transaction ID: SA11A1.90225
City State Zip Code Duluth MN 55086	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 103.22
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 ▼ 513.20	

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 98 / 244
	<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

Mailing Address 9115 TURKEY HOLLOW ROAD

City State Zip Code
TAYLOR RIDGE IL 61284-9646

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) ▼ 308.10

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 04 / 2007

Transaction ID: SA11A1.90094

Amount of Each Receipt this Period
61.98

B. Full Name (Last, First, Middle Initial)
AMBER LEWIS

Mailing Address P. O. BOX 1563

City State Zip Code
Olympia WA 98507

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) ▼ 840.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 18 / 2007

Transaction ID: SA11A1.90769

Amount of Each Receipt this Period
60.00

C. Full Name (Last, First, Middle Initial)
VALERY LIGHT

Mailing Address 32 Barley Lane

City State Zip Code
Palmyra PA 17078

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) ▼ 281.80

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90281

Amount of Each Receipt this Period
56.98

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 99 / 244
	<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)
ANDERS LINDALL

Mailing Address **2524 West Hutchinson**

City **Chicago** State **IL** Zip Code **60618**

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 ▼ **247.99**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 04 / 2007

Transaction ID: SA11A1.90132

Amount of Each Receipt this Period
28.46

B. Full Name (Last, First, Middle Initial)
DEBORAH LIPPINCOTT

Mailing Address **535 BIRDWELL CHURCH LANE**

City **CREAL SPRINGS** State **IL** Zip Code **62922**

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 ▼ **299.14**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 04 / 2007

Transaction ID: SA11A1.90101

Amount of Each Receipt this Period
60.18

C. Full Name (Last, First, Middle Initial)
COREY LOCKARD

Mailing Address **P. O. Box 22**

City **Benton** State **PA** Zip Code **17814**

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 ▼ **260.16**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90326

Amount of Each Receipt this Period
55.04

SUBTOTAL of Receipts This Page (optional)	143.68
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:	PAGE 100 / 244
	(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) KIP LOCKHART		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address 139 Simpkins Drive		Transaction ID: SA11A1.90187
City State Zip Code Bristol CT 06010	Amount of Each Receipt this Period 58.50	
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 ▼ 319.78	

B. Full Name (Last, First, Middle Initial) PAMELA LOFQUIST		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address RR 1 BOX 47		Transaction ID: SA11A1.90223
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 ▼ 265.00	

C. Full Name (Last, First, Middle Initial) LISABETH LONG		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address P.O. BOX 82		Transaction ID: SA11A1.90282
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 ▼ 423.44	

SUBTOTAL of Receipts This Page (optional) ▶	194.12
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 101 / 244
	<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. CHARLES M LOVELESS		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 1112 Euclid Street NW		Transaction ID: SA11A1.90533	
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 Occupation AFSCME INT'L DIRECTOR, LEGISLATION			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 597.96	

Full Name (Last, First, Middle Initial) B. CHARLES M LOVELESS		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 1112 Euclid Street NW		Transaction ID: SA11A1.91250	
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 Occupation AFSCME INT'L DIRECTOR, LEGISLATION			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 664.40	

Full Name (Last, First, Middle Initial) C. GEORGE LOVELL		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address RR 3 BOX 3403		Transaction ID: SA11A1.91066	
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 Occupation AFSCME MA CN 93 STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 364.56	

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 102 / 244
	<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. SARA LOWE		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address 3630 E J STREET		Transaction ID: SA11A1.90771
City TACOMA	State WA	Zip Code 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 ▼ 357.00	

Full Name (Last, First, Middle Initial) B. SALVATORE LUCIANO		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address 947 BUNKER HILL RD		Transaction ID: SA11A1.90186
City WATERTOWN	State CT	Zip Code 06795-3231
Amount of Each Receipt this Period 100.00		
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 ▼ 602.00	

Full Name (Last, First, Middle Initial) C. SALVATORE LUCIANO		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7
Mailing Address 947 BUNKER HILL RD		Transaction ID: SA11A1.91010
City WATERTOWN	State CT	Zip Code 06795-3231
Amount of Each Receipt this Period 13.00		
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 ▼ 615.00	

SUBTOTAL of Receipts This Page (optional) ▶	165.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 / 244
	<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 LUCY		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 1831 Sudbury Lane NW		Transaction ID: SA11A1.90534
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 AFSCME INT'L	Occupation SECRETARY TREASURER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1123.36	

Full Name (Last, First, Middle Initial) B. WILLIAM LUCY		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 1831 Sudbury Lane NW		Transaction ID: SA11A1.91251
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 AFSCME INT'L	Occupation SECRETARY TREASURER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1248.18	

Full Name (Last, First, Middle Initial) C. CHARLES LUNEY		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 425 Chaparral Creek #2724		Transaction ID: SA11A1.90535
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 ▼ 359.19	

SUBTOTAL of Receipts This Page (optional) ▶	289.55
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 / 244
	<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) CHARLES LUNEY		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 425 Chaparral Creek #2724		Transaction ID: SA11A1.91252
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 ▼ 399.10	

B. Full Name (Last, First, Middle Initial) JOHN A. LYALL		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 383 ASHMOORE CIRCLE EAST		Transaction ID: SA11A1.90389
City State Zip Code POWELL OH 43065	Amount of Each Receipt this Period 108.48	
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 ▼ 536.08	

C. Full Name (Last, First, Middle Initial) RANDELL LYNCH		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address P O Box 3311		Transaction ID: SA11A1.90134
City State Zip Code Peoria IL 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 ▼ 299.14	

SUBTOTAL of Receipts This Page (optional) ▶	208.57
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: (check only one)	PAGE 105 / 244
	<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) ROBERTA LYNCH		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 4650 N. HERMITAGE STREET		Transaction ID: SA11A1.90084	
City State Zip Code CHICAGO IL 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 ▼ 532.30		

B. Full Name (Last, First, Middle Initial) ROBERTA LYNCH		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 4650 N. HERMITAGE STREET		Transaction ID: SA11A1.91011	
City State Zip Code CHICAGO IL 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 ▼ 545.30		

C. Full Name (Last, First, Middle Initial) LONIE MACCONNELL		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 618 Frances Drive		Transaction ID: SA11A1.90283	
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 ▼ 317.24		

SUBTOTAL of Receipts This Page (optional) ▶	175.46
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 106 / 244
	<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 S MAGNUSON

Mailing Address **16055 SW Audubon Street #104**

City **Beaverton** State **OR** Zip Code **97006**

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

Name of Employer **TPIEA** Occupation **MENTAL HEALTH CONSULTANT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 04 / 2007

Transaction ID: SA11A1.90059

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
LOUIS J MAHOLIC

Mailing Address **2726 Juno Place Apt 2**

City **Fairlawn** State **OH** Zip Code **44333**

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 ▼ **245.75**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90390

Amount of Each Receipt this Period
49.82

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

Mailing Address **15103 Hunter Mountain Lane**

City **Silver Spring** State **MD** Zip Code **20906**

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

Name of Employer **AFSCME INT'L** Occupation **ADMINISTRATIVE ASSISTANT II**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.41**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 10 / 2007

Transaction ID: SA11A1.90536

Amount of Each Receipt this Period
31.49

SUBTOTAL of Receipts This Page (optional)	131.31
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: (check only one)	PAGE 107 / 244
	<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)
 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) ▼ 311.90

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

Transaction ID: SA11A1.91253

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) ▼ 466.74

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.90537

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) ▼ 518.60

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

Transaction ID: SA11A1.91254

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 108 / 244
	<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 Y 05 / 09 / 2007	
Mailing Address 101 BRISTOL LANE		Transaction ID: SA11A1.90298	
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 ▼ 306.60		

Full Name (Last, First, Middle Initial) B. MICHAEL MARETTE		Date of Receipt M M / D D / Y Y Y Y Y 05 / 10 / 2007	
Mailing Address P.O. Box 314		Transaction ID: SA11A1.90538	
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 ▼ 425.26		

Full Name (Last, First, Middle Initial) C. MICHAEL MARETTE		Date of Receipt M M / D D / Y Y Y Y Y 05 / 25 / 2007	
Mailing Address P.O. Box 314		Transaction ID: SA11A1.91255	
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 ▼ 473.08		

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 109 / 244
	<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 MARINCEL

Mailing Address **247 KENNARD STREET**

City **ST. PAUL** State **MN** Zip Code **55106**

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

Name of Employer **AFSCME MN CN 14** Occupation **BUSINESS REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **323.60**

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 08 / 2007

Transaction ID: SA11A1.90219

Amount of Each Receipt this Period
65.10

B. Full Name (Last, First, Middle Initial)
TIM MARSHALL

Mailing Address **323 Division Street**

City **Lacrosse** State **WI** Zip Code **54601**

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

Name of Employer **WI DEPT OF CORRECTIONS** Occupation **CORRECTIONS OFFICER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 24 / 2007

Transaction ID: SA11A1.90988

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
KIMBERLY A MASSENGILL-BERNARDIN

Mailing Address **8000 BROOKPOINT PLACE**

City **WESTERVILLE** State **OH** Zip Code **43081**

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 ▼ **333.32**

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90391

Amount of Each Receipt this Period
67.46

SUBTOTAL of Receipts This Page (optional)	152.56
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 110 / 244
	<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 MAUPIN, JR.

Mailing Address **535 BIRDWELL CHURCH LANE**

City **CREAL SPRINGS** State **IL** Zip Code **62922**

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

Name of Employer **AFSCME IL CN 31** Occupation **REGIONAL DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **365.46**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 04 / 2007

Transaction ID: SA11A1.90100

Amount of Each Receipt this Period
73.52

B. Full Name (Last, First, Middle Initial)
ELISSA MCBRIDE

Mailing Address **9 Sherman Avenue**

City **Takoma Park** State **MD** Zip Code **20912**

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

Name of Employer **AFSCME INT'L** Occupation **DIRECTOR, EDUCATION**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **854.49**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 10 / 2007

Transaction ID: SA11A1.90539

Amount of Each Receipt this Period
99.66

C. Full Name (Last, First, Middle Initial)
ELISSA MCBRIDE

Mailing Address **9 Sherman Avenue**

City **Takoma Park** State **MD** Zip Code **20912**

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

Name of Employer **AFSCME INT'L** Occupation **DIRECTOR, EDUCATION**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **954.15**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 25 / 2007

Transaction ID: SA11A1.91256

Amount of Each Receipt this Period
99.66

SUBTOTAL of Receipts This Page (optional)	272.84
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 111 / 244
	<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)
MARGARET MCCANN

Mailing Address **103 Lynnmore Drive**

City **Silver Spring** State **MD** Zip Code **20901**

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

Name of Employer **AFSCME INT'L** Occupation **ASSOCIATE GENERAL COUNSEL II**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 10 / 2007

Transaction ID: SA11A1.90540

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MARGARET MCCANN

Mailing Address **103 Lynnmore Drive**

City **Silver Spring** State **MD** Zip Code **20901**

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

Name of Employer **AFSCME INT'L** Occupation **ASSOCIATE GENERAL COUNSEL II**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 25 / 2007

Transaction ID: SA11A1.91257

Amount of Each Receipt this Period
50.00

C. 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 ▼ **378.82**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90284

Amount of Each Receipt this Period
76.60

SUBTOTAL of Receipts This Page (optional)	176.60
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 / 244
	<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. TONY MCCUBBIN		Date of Receipt MM / DD / YYYY 05 / 04 / 2007
Mailing Address 7740 Cordova Road		Transaction ID: SA11A1.90126
City Erie	State IL	Zip Code 61250
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 ▼ 280.36	

Full Name (Last, First, Middle Initial) B. JANE MCDONALD		Date of Receipt MM / DD / YYYY 05 / 21 / 2007
Mailing Address 2201 Broadway Suite 715		Transaction ID: SA11A1.90822
City Oakland	State CA	Zip Code 94612
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer AFSCME CA LOC 3299	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. BRIAN P MCDONNELL		Date of Receipt MM / DD / YYYY 05 / 10 / 2007
Mailing Address 1322 Myron Street		Transaction ID: SA11A1.90541
City Niskayuna	State NY	Zip Code 12309
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 39.57
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 ▼ 356.13	

SUBTOTAL of Receipts This Page (optional)	▶	145.97
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 113 / 244
	<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) BRIAN P MCDONNELL		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 1322 Myron Street		Transaction ID: SA11A1.91258
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 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 ▼ 395.70	

B. Full Name (Last, First, Middle Initial) GERALD MCENTEE		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 800 25th Street NW Apt. #406		Transaction ID: SA11A1.90542
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 AFSCME INT'L	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1323.96	

C. Full Name (Last, First, Middle Initial) GERALD MCENTEE		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 800 25th Street NW Apt. #406		Transaction ID: SA11A1.91259
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 AFSCME INT'L	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1471.07	

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 114 / 244
	<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. JERI MCEWEN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 4031 Executive Park Drive		Transaction ID: SA11A1.90286
City State Zip Code Harrisburg PA 17111-1599	Amount of Each Receipt this Period 43.68	
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 ▼ 216.02	

Full Name (Last, First, Middle Initial) B. STUART E MCKINLEY		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7
Mailing Address 1255 Nuuanu Avene E615		Transaction ID: SA11A1.90663
City State Zip Code Honolulu HI 96817	Amount of Each Receipt this Period 50.00	
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 ▼ 250.00	

Full Name (Last, First, Middle Initial) C. THOMAS MCLAUGHLIN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 2056 CAMBRIDGE ROAD		Transaction ID: SA11A1.90093
City State Zip Code SPRINGFIELD IL 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 ▼ 365.46	

SUBTOTAL of Receipts This Page (optional) ▶	167.20
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 115 / 244
	<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 ▼ **406.60**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90392

Amount of Each Receipt this Period
82.28

B. Full Name (Last, First, Middle Initial)
MARILYN MCMAHON

Mailing Address **7717 28th NW**

City **Seattle** State **WA** Zip Code **98117**

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

Name of Employer **WA State Dept of Labor & Indus** Occupation **Occupational Nurse Consultant**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 17 / 2007

Transaction ID: SA11A1.91705

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
MARILYN MCMAHON

Mailing Address **7717 28th NW**

City **Seattle** State **WA** Zip Code **98117**

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

Name of Employer **WA State Dept of Labor & Indus** Occupation **Occupational Nurse Consultant**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 29 / 2007

Transaction ID: SA11A1.91286

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)	127.28
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 / 244
	<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. ORAN MCMICHEAL		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 2777 Northtowne Lane, Apt. 2088S		Transaction ID: SA11A1.90543
City State Zip Code Reno NV 89512	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 ▼ 379.17	

Full Name (Last, First, Middle Initial) B. ORAN MCMICHEAL		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 2777 Northtowne Lane, Apt. 2088S		Transaction ID: SA11A1.91260
City State Zip Code Reno NV 89512	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 ▼ 421.30	

Full Name (Last, First, Middle Initial) C. LEILA MCMULLEN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 3014 Laurel Avenue		Transaction ID: SA11A1.90544
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 ▼ 427.20	

SUBTOTAL of Receipts This Page (optional) ▶	122.98
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 / 244
	<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) LEILA MCMULLEN Mailing Address 3014 Laurel Avenue City State Zip Code Cheverly MD 20785 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7 Transaction ID: SA11A1.91261 Amount of Each Receipt this Period 38.72
Name of Employer Occupation AFSCME INT'L ASST. TO SECRETARY TREASURER Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 465.92		

B. Full Name (Last, First, Middle Initial) EDWARD MCNEIL Mailing Address 2546 Edison City State Zip Code Detroit MI 48206 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7 Transaction ID: SA11A1.90844 Amount of Each Receipt this Period 38.10
Name of Employer Occupation AFSCME MI CN 25 STAFF REPRESENTATIVE Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 381.00		

C. Full Name (Last, First, Middle Initial) MICHAEL A MCNEW Mailing Address 1321 Colwick Drive City State Zip Code Dayton OH 45420 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7 Transaction ID: SA11A1.90393 Amount of Each Receipt this Period 48.28
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) ▼ 238.17		

SUBTOTAL of Receipts This Page (optional)	125.10
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 118 / 244
	<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)
MITCH G MENTER

Mailing Address **2377 Walton Blvd. Apt.#42**

City **Rochester** State **MI** Zip Code **48309**

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 ▼ **220.00**

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90242

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
LAURIE MERTA

Mailing Address **9829 59th Street, Court W**

City **Tacoma** State **WA** Zip Code **98467-1007**

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

Name of Employer **AFSCME WA CN 28** Occupation **CONVENTION FUNDRAISER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1080.00**

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 18 / 2007

Transaction ID: SA11A1.90772

Amount of Each Receipt this Period
80.00

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

Mailing Address **331 Central Parkway**

City **Warren** State **OH** Zip Code **44483**

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 ▼ **250.60**

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90394

Amount of Each Receipt this Period
51.44

SUBTOTAL of Receipts This Page (optional)	231.44
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 119 / 244
	(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. LANCE D. MICHALSKI		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7	
Mailing Address 300 Hardman Avenue S. #2		Transaction ID: SA11A1.90633	
City State Zip Code South St. Paul MN 55075		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME MN CN 5 STAFF REPRESENTATIVE			
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) B. GLEN MIDDLETON		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 5108 Yellowwood Ave		Transaction ID: SA11A1.89995	
City State Zip Code Baltimore MD 21209-4611		Amount of Each Receipt this Period 84.68	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME MD CN 67 EXECUTIVE DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.72	

Full Name (Last, First, Middle Initial) C. GLEN MIDDLETON		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 5108 Yellowwood Ave		Transaction ID: SA11A1.91012	
City State Zip Code Baltimore MD 21209-4611		Amount of Each Receipt this Period 13.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME MD CN 67 EXECUTIVE DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 403.72	

SUBTOTAL of Receipts This Page (optional) ▶	137.68
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 120 / 244
	<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. DOROTHY MILLER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 2424 Locust Lane		Transaction ID: SA11A1.90358	
City State Zip Code Harrisburg PA 17109	Amount of Each Receipt this Period 43.68		
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 ▼ 216.02		

Full Name (Last, First, Middle Initial) B. SCOTT D. MILLER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 2056 W HUTCHINSON, 2ND FL		Transaction ID: SA11A1.90127	
City State Zip Code CHICAGO IL 60618	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 ▼ 332.84		

Full Name (Last, First, Middle Initial) C. TIMOTHY MILLER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 2724 PINE AVENUE		Transaction ID: SA11A1.90299	
City State Zip Code ALTOONA PA 16601	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 ▼ 306.60		

SUBTOTAL of Receipts This Page (optional) ▶	171.96
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 / 244
	<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 F. MITCHELL		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 3999 KENSINGWOOD DRIVE		Transaction ID: SA11A1.90395
City State Zip Code COLUMBUS OH 43230	Amount of Each Receipt this Period 93.60	
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 ▼ 462.57	

B. Full Name (Last, First, Middle Initial) YOLANDA M MITCHELL		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 1227 Oberlin Boulevard		Transaction ID: SA11A1.90396
City State Zip Code Cincinnati OH 45237	Amount of Each Receipt this Period 49.82	
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 ▼ 245.75	

C. Full Name (Last, First, Middle Initial) WILLARD P MIYAKE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7
Mailing Address 227 Namokueha Street		Transaction ID: SA11A1.90664
City State Zip Code Honolulu HI 96813	Amount of Each Receipt this Period 50.00	
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 ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	193.42
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 122 / 244
	<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)
HARRY MOBLEY

Mailing Address **2635 Cranberry Circle**

City **Harrisburg** State **PA** Zip Code **17110**

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 ▼ **306.60**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90342

Amount of Each Receipt this Period
61.32

B. Full Name (Last, First, Middle Initial)
ERIC MOMBERGER

Mailing Address **1021 MANOR ROAD**

City **NEW KENSINGTON** State **PA** Zip Code **15068**

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 ▼ **306.60**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90310

Amount of Each Receipt this Period
61.32

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

Mailing Address **1021 MANOR ROAD**

City **NEW KENSINGTON** State **PA** Zip Code **15068**

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 ▼ **306.60**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90311

Amount of Each Receipt this Period
61.32

SUBTOTAL of Receipts This Page (optional)	183.96
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 123 / 244
	<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 Cprt City Waterford State MI Zip Code 48327 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>5</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: SA11A1.90845 Amount of Each Receipt this Period <table border="1"> <tr> <td>33.84</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	1		2	0	0	7	33.84
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		2	1		2	0	0	7														
33.84																							
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 ▼ <table border="1"> <tr> <td>338.40</td> </tr> </table>		338.40																					
338.40																							

B. Full Name (Last, First, Middle Initial) RHONDA M. MONTGOMERY Mailing Address 1602 Temperance City Indianapolis State IN Zip Code 46203 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>5</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: SA11A1.90545 Amount of Each Receipt this Period <table border="1"> <tr> <td>32.92</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	0		2	0	0	7	32.92
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	0		2	0	0	7														
32.92																							
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 ▼ <table border="1"> <tr> <td>296.28</td> </tr> </table>		296.28																					
296.28																							

C. Full Name (Last, First, Middle Initial) RHONDA M. MONTGOMERY Mailing Address 1602 Temperance City Indianapolis State IN Zip Code 46203 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>5</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: SA11A1.91262 Amount of Each Receipt this Period <table border="1"> <tr> <td>32.92</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	5		2	0	0	7	32.92
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		2	5		2	0	0	7														
32.92																							
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 ▼ <table border="1"> <tr> <td>329.20</td> </tr> </table>		329.20																					
329.20																							

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 124 / 244
	<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 5 / 2 1 / 2 0 0 7
Mailing Address 6170 BAY COURT		Transaction ID: SA11A1.90846
City State Zip Code WATERFORD MI 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 ▼ 338.40	

Full Name (Last, First, Middle Initial) B. DOUGLAS MOORE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 79 Putnam Street		Transaction ID: SA11A1.90546
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 ▼ 410.80	

Full Name (Last, First, Middle Initial) C. DOUGLAS MOORE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 79 Putnam Street		Transaction ID: SA11A1.91148
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 ▼ 457.34	

SUBTOTAL of Receipts This Page (optional) ▶	126.92
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 / 244
	<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

Mailing Address 415 U Street, NW

City State Zip Code
 Washington DC 20001

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) ▼ 378.90

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.90548

Amount of Each Receipt this Period
 41.01

B. Full Name (Last, First, Middle Initial)
 PATRICK G MORAN

Mailing Address 415 U Street, NW

City State Zip Code
 Washington DC 20001

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) ▼ 419.91

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

Transaction ID: SA11A1.91149

Amount of Each Receipt this Period
 41.01

C. Full Name (Last, First, Middle Initial)
 FRANCIS MORONEY

Mailing Address 14 Jamaica Road

City State Zip Code
 Brookline MA 02146

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

Name of Employer Occupation
 AFSCME MA CN 93 STAFF REPRESENTATIVE

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 5 / 2 9 / 2 0 0 7

Transaction ID: SA11A1.91069

Amount of Each Receipt this Period
 40.00

SUBTOTAL of Receipts This Page (optional)	122.02
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: (check only one)	PAGE 126 / 244
	<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 B MORRELL		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 8446 Grafton Ave S		Transaction ID: SA11A1.90220	
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 ▼ 390.00		

Full Name (Last, First, Middle Initial) B. JEANNE MORRIS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 2315 Reddings Run Road		Transaction ID: SA11A1.90288	
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 ▼ 306.60		

Full Name (Last, First, Middle Initial) C. PATRICIA MOSS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 9583 DUCAN PLAINS ROAD		Transaction ID: SA11A1.90397	
City State Zip Code JOHNSTOWN OH 43031-9305	Amount of Each Receipt this Period 122.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH CN 8	Occupation PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 669.94		

SUBTOTAL of Receipts This Page (optional) ▶	258.32
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 127 / 244
	<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 ▼ **682.94**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 24 / 2007

Transaction ID: SA11A1.91013

Amount of Each Receipt this Period
13.00

B. 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 ▼ **306.60**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90343

Amount of Each Receipt this Period
61.32

C. Full Name (Last, First, Middle Initial)
STEVEN C. MULLEN

Mailing Address **544 CLERMONT DRIVE**

City **HARRISBURG** State **PA** Zip Code **17112**

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

Name of Employer **AFSCME PA CN 13** Occupation **TRADES LABORER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.18**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.91707

Amount of Each Receipt this Period
52.14

SUBTOTAL of Receipts This Page (optional)	126.46
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 128 / 244
	<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. LAWRENCE MURIN		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2007	
Mailing Address 500 N. 26TH STREET		Transaction ID: SA11A1.90344	
City READING	State PA	Zip Code 19606	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 ASSISTANT DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 366.08		

Full Name (Last, First, Middle Initial) B. MICHAEL D. MURPHY		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2007	
Mailing Address 4221 Wanetah Trail		Transaction ID: SA11A1.89819	
City Madison	State WI	Zip Code 53711	Amount of Each Receipt this Period 5.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME WI CN 40	Occupation FIELD ORGANIZER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 229.00		

Full Name (Last, First, Middle Initial) C. MICHAEL D. MURPHY		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2007	
Mailing Address 4221 Wanetah Trail		Transaction ID: SA11A1.89975	
City Madison	State WI	Zip Code 53711	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME WI CN 40	Occupation FIELD ORGANIZER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 254.00		

SUBTOTAL of Receipts This Page (optional) ▶	104.02
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: (check only one)	PAGE 129 / 244
	<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 D. MURPHY		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 4221 Wanetah Trail		Transaction ID: SA11A1.90027	
City State Zip Code Madison WI 53711	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME WI CN 40	Occupation FIELD ORGANIZER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 274.00		

B. Full Name (Last, First, Middle Initial) MICHAEL D. MURPHY		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 4221 Wanetah Trail		Transaction ID: SA11A1.90731	
City State Zip Code Madison WI 53711	Amount of Each Receipt this Period 5.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME WI CN 40	Occupation FIELD ORGANIZER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 279.00		

C. Full Name (Last, First, Middle Initial) MICHAEL D. MURPHY		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 4221 Wanetah Trail		Transaction ID: SA11A1.91014	
City State Zip Code Madison WI 53711	Amount of Each Receipt this Period 26.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME WI CN 40	Occupation FIELD ORGANIZER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00		

SUBTOTAL of Receipts This Page (optional) ▶	51.00
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 130 / 244
	(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. MICHAEL D. MURPHY		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 4221 Wanetah Trail		Transaction ID: SA11A1.91306	
City State Zip Code Madison WI 53711	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME WI CN 40	Occupation FIELD ORGANIZER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) B. MICHAEL D. MURPHY		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7	
Mailing Address 4221 Wanetah Trail		Transaction ID: SA11A1.91380	
City State Zip Code Madison WI 53711	Amount of Each Receipt this Period 5.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME WI CN 40	Occupation FIELD ORGANIZER		
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) C. PHYLLIS NAIAD		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 13304 58th Drive NE		Transaction ID: SA11A1.90773	
City State Zip Code Marysville WA 98271	Amount of Each Receipt this Period 52.26		
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 ▼ 731.64		

SUBTOTAL of Receipts This Page (optional) ▶	77.26
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 131 / 244
	<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. JAMES NEBLETT		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7
Mailing Address 17635 GREENVIEW		Transaction ID: SA11A1.90847
City State Zip Code DETROIT MI 48219-3588	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 33.55
Name of Employer Occupation AFSCME MI CN 25 ADMINISTRATIVE DIRECTOR	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.50

Full Name (Last, First, Middle Initial) B. CYNTHIA NELSON		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address 2648 GARFIELD STREET NE		Transaction ID: SA11A1.90218
City State Zip Code MINNEAPOLIS MN 55418	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 62.60
Name of Employer Occupation AFSCME MN CN 14 BUSINESS REPRESENTATIVE	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 311.18

Full Name (Last, First, Middle Initial) C. MATTHEW NELSON		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address 909 Carmen Lane		Transaction ID: SA11A1.90216
City State Zip Code Mendota Heights MN 55406	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 65.10
Name of Employer Occupation AFSCME MN CN 14 BUSINESS REPRESENTATIVE	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.60

SUBTOTAL of Receipts This Page (optional)	▶	161.25
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 132 / 244
	<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. ALAN NETLAND		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7
Mailing Address 1414 Boulevard Place		Transaction ID: SA11A1.90634
City State Zip Code Duluth MN 55811	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 8.00
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 ▼ 258.00	

Full Name (Last, First, Middle Initial) B. JESSE NEWCOMER IV		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 2109 Circle Road		Transaction ID: SA11A1.90289
City State Zip Code Carlisle PA 17013	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 68.88
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 ▼ 340.66	

Full Name (Last, First, Middle Initial) C. MICHAEL NEWMAN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 4031 N. HERMITAGE AVENUE		Transaction ID: SA11A1.90083
City State Zip Code CHICAGO IL 60613	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 84.22
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 ▼ 418.66	

SUBTOTAL of Receipts This Page (optional)	▶	161.10
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 133 / 244
	<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. JAMES B NILAND		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address 2728 Pleasant Ave		Transaction ID: SA11A1.90217
City State Zip Code Minneapolis MN 55408	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 102.54
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 ▼ 520.84	

Full Name (Last, First, Middle Initial) B. JOSEPH NILSSON		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 3215 Eastland CIR SE		Transaction ID: SA11A1.90442
City State Zip Code Olympia WA 98501	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 15.00
Name of Employer AFSCME WA CN 28	Occupation CLERICAL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.00	

Full Name (Last, First, Middle Initial) C. JOSEPH NILSSON		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 3215 Eastland CIR SE		Transaction ID: SA11A1.91285
City State Zip Code Olympia WA 98501	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 15.00
Name of Employer AFSCME WA CN 28	Occupation CLERICAL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 366.00	

SUBTOTAL of Receipts This Page (optional)	▶	132.54
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 134 / 244
	<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. LORRAINE M O'HARA		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 5308 Wehawken Road		Transaction ID: SA11A1.90550
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 ▼ 513.09	

Full Name (Last, First, Middle Initial) B. LORRAINE M O'HARA		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 5308 Wehawken Road		Transaction ID: SA11A1.91151
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 ▼ 570.10	

Full Name (Last, First, Middle Initial) C. TRAVIS OHM		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 8 HIGHLAND ROAD		Transaction ID: SA11A1.90290
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 ▼ 366.08	

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 135 / 244
	<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 5 / 1 4 / 2 0 0 7	
Mailing Address 1015 Wilder Avenue #203		Transaction ID: SA11A1.90666	
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 ▼ 552.00		

Full Name (Last, First, Middle Initial) B. RUSSELL K. OKATA		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 1015 Wilder Avenue #203		Transaction ID: SA11A1.91016	
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 ▼ 565.00		

Full Name (Last, First, Middle Initial) C. LETTIE OLIVER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 1424 North Pennsylvania Street		Transaction ID: SA11A1.91028	
City State Zip Code Indianapolis IN 46202	Amount of Each Receipt this Period 112.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IN CN 62	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00		

SUBTOTAL of Receipts This Page (optional) ▶	225.00
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 136 / 244
	<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. SUSAN M. OSTHUS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 5200 DEERWOOD LAKE DRIVE		Transaction ID: SA11A1.90122	
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 ▼ 332.84		

Full Name (Last, First, Middle Initial) B. VICTOR OSUNA		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 615 S. Second Street		Transaction ID: SA11A1.90133	
City State Zip Code Springfield IL 62705-2328	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 ▼ 299.14		

Full Name (Last, First, Middle Initial) C. GERALD OTTEN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 2905 Evergreen Way		Transaction ID: SA11A1.90551	
City State Zip Code Ellicott City MD 21042	Amount of Each Receipt this Period 37.69		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation BENEFITS MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.17		

SUBTOTAL of Receipts This Page (optional) ▶	164.83
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 137 / 244
	<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) GERALD OTTEN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 2905 Evergreen Way		Transaction ID: SA11A1.91152
City State Zip Code Ellicott City MD 21042	Amount of Each Receipt this Period 37.69	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation BENEFITS MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 372.86	

B. Full Name (Last, First, Middle Initial) GINA R L PACHECO		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7
Mailing Address P. O. BOX 5488		Transaction ID: SA11A1.90700
City State Zip Code Hilo HI 96720	Amount of Each Receipt this Period 50.00	
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 ▼ 208.40	

C. Full Name (Last, First, Middle Initial) RACHEL S S PANCIERA		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 5210 Biddison Lane		Transaction ID: SA11A1.91153
City State Zip Code Baltimore MD 21206	Amount of Each Receipt this Period 29.55	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation ORGANIZING RECRUITER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.28	

SUBTOTAL of Receipts This Page (optional) ▶	117.24
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:	PAGE 138 / 244
	(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. CHERYL PARISI		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7	
Mailing Address 1932 WALCOTT WAY		Transaction ID: SA11A1.89954	
City State Zip Code LOS ANGELES CA 90039	Amount of Each Receipt this Period 30.00		
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 ▼ 290.00		

Full Name (Last, First, Middle Initial) B. DEBORAH JO PATTON		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 29 N Wacker		Transaction ID: SA11A1.90131	
City State Zip Code Chicago IL 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 ▼ 323.90		

Full Name (Last, First, Middle Initial) C. BARRY PEARCE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 130 N. WILSON STREET		Transaction ID: SA11A1.90300	
City State Zip Code BELLEFONTE PA 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 ▼ 306.60		

SUBTOTAL of Receipts This Page (optional) ▶	156.48
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 139 / 244
	(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 5 / 1 0 / 2 0 0 7
Mailing Address 351 Ross Way		Transaction ID: SA11A1.90553
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 ▼ 520.38	

Full Name (Last, First, Middle Initial) B. WILLIE L PELOTE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 351 Ross Way		Transaction ID: SA11A1.91154
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 ▼ 568.20	

Full Name (Last, First, Middle Initial) C. JOANNE M PELS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address 6987 County 38 NW		Transaction ID: SA11A1.90214
City State Zip Code Walker MN 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 ▼ 357.60	

SUBTOTAL of Receipts This Page (optional)	164.16
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 140 / 244
	<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. RANDOLPH P. PERREIRA		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7	
Mailing Address 1044 MOKUHANO STREET		Transaction ID: SA11A1.90667	
City HONOLULU	State HI	Zip Code 96825	Amount of Each Receipt this Period 50.00
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 ▼ 250.00		

Full Name (Last, First, Middle Initial) B. ELIZABETH PERROW		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 958 N. Harrison Street		Transaction ID: SA11A1.90555	
City Arlington	State VA	Zip Code 22205	Amount of Each Receipt this Period 38.72
FEC ID number of contributing federal political committee. C			
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 ▼ 348.48		

Full Name (Last, First, Middle Initial) C. ELIZABETH PERROW		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 958 N. Harrison Street		Transaction ID: SA11A1.91156	
City Arlington	State VA	Zip Code 22205	Amount of Each Receipt this Period 38.72
FEC ID number of contributing federal political committee. C			
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 ▼ 387.20		

SUBTOTAL of Receipts This Page (optional) ▶	127.44
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 141 / 244
	<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 S. PERRY		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 313 SHERIDAN ROAD		Transaction ID: SA11A1.90117	
City State Zip Code WILMETTE IL 60091	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 DIRECTOR EMP. INV. DEV. & TRAINING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 323.92		

B. Full Name (Last, First, Middle Initial) LESLIE PETERSON		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 2179 SHOREHAM ROAD		Transaction ID: SA11A1.90399	
City State Zip Code COLUMBUS OH 43220	Amount of Each Receipt this Period 48.66		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH CN 8	Occupation ACCOUNTING SUPERVISOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.03		

C. Full Name (Last, First, Middle Initial) STEVAN P. PICKARD		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 3325 CAPRICIO STREET NE		Transaction ID: SA11A1.90400	
City State Zip Code CANTON OH 44721-2702	Amount of Each Receipt this Period 60.48		
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 ▼ 290.68		

SUBTOTAL of Receipts This Page (optional) ▶	174.30
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 142 / 244
	<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)
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 ▼ 312.47

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

Transaction ID: SA11A1.90081

Amount of Each Receipt this Period
62.66

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

Mailing Address 605 South Jackson

City Gardner State IL Zip Code 60424

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 ▼ 280.36

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

Transaction ID: SA11A1.90139

Amount of Each Receipt this Period
56.40

C. Full Name (Last, First, Middle Initial)
KEVAN L. PLUMLEE

Mailing Address 14039 ALLEN ROAD

City CARTERVILLE State IL Zip Code 62918

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 ▼ 299.14

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

Transaction ID: SA11A1.90115

Amount of Each Receipt this Period
60.18

SUBTOTAL of Receipts This Page (optional)	▶	179.24
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 143 / 244
	<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. NICOLE R POLLARD		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 9404 Nicklaus Lane		Transaction ID: SA11A1.90556	
City Laurel	State MD	Zip Code 20708	Amount of Each Receipt this Period 45.33
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 ▼ 407.97		

Full Name (Last, First, Middle Initial) B. NICOLE R POLLARD		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 9404 Nicklaus Lane		Transaction ID: SA11A1.91157	
City Laurel	State MD	Zip Code 20708	Amount of Each Receipt this Period 45.33
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 ▼ 453.30		

Full Name (Last, First, Middle Initial) C. STEPHEN POOR		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 102 Lynnmoor Avenue		Transaction ID: SA11A1.90000	
City Silver Spring	State MD	Zip Code 20901	Amount of Each Receipt this Period 76.92
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MD CN 67	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68		

SUBTOTAL of Receipts This Page (optional)	167.58
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 144 / 244
	<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)
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) ▼ 356.12

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

Transaction ID: SA11A1.90080

Amount of Each Receipt this Period
73.52

B. 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) ▼ 420.00

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

Transaction ID: SA11A1.90167

Amount of Each Receipt this Period
20.00

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) ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 4 / 2 0 0 7

Transaction ID: SA11A1.90637

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)	▶	113.52
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 145 / 244		
	<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**

A. Full Name (Last, First, Middle Initial) GREGORY POWELL		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 11505 Circle Drive		Transaction ID: SA11A1.91018	
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 ▼ 505.00		

B. Full Name (Last, First, Middle Initial) GREGORY POWELL		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address 11505 Circle Drive		Transaction ID: SA11A1.91324	
City State Zip Code Austin TX 78748	Amount of Each Receipt this Period 20.00		
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 ▼ 525.00		

C. Full Name (Last, First, Middle Initial) SALLY A POWLESS		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 2410 WESTBROOK DRIVE		Transaction ID: SA11A1.90401	
City State Zip Code TOLEDO OH 43613-3921	Amount of Each Receipt this Period 82.28		
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 ▼ 406.60		

SUBTOTAL of Receipts This Page (optional) ▶	167.28
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 146 / 244
	<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)
MARCIA PROVOST

Mailing Address **555 THIRD STREET SE**

City **MILACA** State **MN** Zip Code **56353**

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 ▼ **235.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 25 / 2007

Transaction ID: SA11A1.91092

Amount of Each Receipt this Period
44.00

B. Full Name (Last, First, Middle Initial)
ZOLLIE RAYNER

Mailing Address **P. O. BOX 51**

City **Albion** State **PA** Zip Code **16401**

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 ▼ **306.60**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90320

Amount of Each Receipt this Period
61.32

C. Full Name (Last, First, Middle Initial)
STEVEN E. REAMS

Mailing Address **3642 Shortridge Circle**

City **Cincinnati** State **OH** Zip Code **45247**

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 ▼ **238.17**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90402

Amount of Each Receipt this Period
48.28

SUBTOTAL of Receipts This Page (optional)	153.60
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 / 244
	<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. TERRY REED		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 2737 Yellowrock Place		Transaction ID: SA11A1.90557
City Hilliard State OH Zip Code 43026	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 ▼	379.17

Full Name (Last, First, Middle Initial) B. TERRY REED		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 2737 Yellowrock Place		Transaction ID: SA11A1.91158
City Hilliard State OH Zip Code 43026	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 ▼	421.30

Full Name (Last, First, Middle Initial) C. STEPHEN REGENSTREIF		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 3214 38th Street NW		Transaction ID: SA11A1.90558
City WASHINGTON State DC Zip Code 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 ▼	513.09

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 148 / 244
	<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

Mailing Address **3214 38th Street NW**

City **WASHINGTON** State **DC** Zip Code **20016**

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

Name of Employer **AFSCME INT'L** Occupation **DIRECTOR, RETIREE PROGRAMS**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **570.10**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 25 / 2007

Transaction ID: SA11A1.91159

Amount of Each Receipt this Period
57.01

B. Full Name (Last, First, Middle Initial)
LAURA REISDORPH

Mailing Address **1212 Jefferson St. 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 **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 18 / 2007

Transaction ID: SA11A1.90775

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
DEAN REYNOLDS, III

Mailing Address **R. R. 1 , BOX 512**

City **JERSEY SHORE** State **PA** Zip Code **17740**

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 ▼ **306.60**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90327

Amount of Each Receipt this Period
61.32

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 149 / 244
	<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 Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 1456 Greenmont Court		Transaction ID: SA11A1.90559
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 AFSCME INT'L	Occupation PROJECT COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.90	

B. Full Name (Last, First, Middle Initial) LISA RICE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 1456 Greenmont Court		Transaction ID: SA11A1.91160
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 AFSCME INT'L	Occupation PROJECT COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 366.60	

C. Full Name (Last, First, Middle Initial) SHAWN E RICHARDSON		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 6688 Markwood St.		Transaction ID: SA11A1.90616
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 ▼ 400.00	

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 150 / 244
	<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 5 / 2 5 / 2 0 0 7	
Mailing Address 6688 Markwood St.		Transaction ID: SA11A1.91134	
City Worthington	State OH	Zip Code 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 ▼ 440.00		

Full Name (Last, First, Middle Initial) B. ALAN RICHTER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 6807 Greenspring Avenue		Transaction ID: SA11A1.91161	
City Baltimore	State MD	Zip Code 21209	Amount of Each Receipt this Period 20.43
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ORGANIZER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.30		

Full Name (Last, First, Middle Initial) C. PETER RICKERT		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 722 E. FRONT STREET		Transaction ID: SA11A1.90328	
City DANVILLE	State PA	Zip Code 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 ▼ 306.60		

SUBTOTAL of Receipts This Page (optional) ▶	121.75
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 / 244
	<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)
 GREGORY A RIEMER

Mailing Address 3478 Scotswood Circle

City State Zip Code
 Richfeild OH 44286

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) ▼ 242.79

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.90403

Amount of Each Receipt this Period
 49.82

B. Full Name (Last, First, Middle Initial)
 DIANE RIGOTTI

Mailing Address 10261 FENNER ROAD

City State Zip Code
 PERRY MI 48878

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

Name of Employer Occupation
 AFSCME MI CN 25 SPECIAL ASSISTANT TO THE PRESIDENT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 381.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 1 / 2 0 0 7

Transaction ID: SA11A1.90848

Amount of Each Receipt this Period
 38.10

C. Full Name (Last, First, Middle Initial)
 THOMAS J. RITCHIE, JR.

Mailing Address 1644 SPAULDING ROAD

City State Zip Code
 DAYTON OH 45432

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 ▼
 Primary General
 Other (specify) ▼ 458.71

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.90404

Amount of Each Receipt this Period
 92.82

SUBTOTAL of Receipts This Page (optional)	180.74
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 152 / 244
	<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)
GLADYS RIVERA

Mailing Address **P.O. Box 1414**

City **Lancaster** State **PA** Zip Code **17608-1414**

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

Name of Employer **STATE OF PENNSYLVANIA** Occupation **INSPECTION SAFETY PROFESSOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 31 / 2007

Transaction ID: SA11A1.91371

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
CLAUDIA ROBERSON

Mailing Address **7340 S. YATES 2ND FLOOR**

City **CHICAGO** State **IL** Zip Code **60649**

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 ▼ **418.66**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 04 / 2007

Transaction ID: SA11A1.90079

Amount of Each Receipt this Period
84.22

C. Full Name (Last, First, Middle Initial)
STEPHEN M. ROBERTS

Mailing Address **1115 Wisconsin Blvd
 APT# B**

City **Dayton** State **OH** Zip Code **45408**

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 ▼ **288.74**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90405

Amount of Each Receipt this Period
58.54

SUBTOTAL of Receipts This Page (optional)	192.76
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 153 / 244
	<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. JESSICA R ROBINSON		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 7901 Chicago Avenue		Transaction ID: SA11A1.90561
City State Zip Code SilverSpring MD 20910	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	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 379.21	

Full Name (Last, First, Middle Initial) B. JESSICA R ROBINSON		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 7901 Chicago Avenue		Transaction ID: SA11A1.91162
City State Zip Code SilverSpring MD 20910	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	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 422.38	

Full Name (Last, First, Middle Initial) C. YVONNE ROBINSON		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 112444 S Carpenter Street		Transaction ID: SA11A1.90107
City State Zip Code Calumet Park IL 60827	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 ▼ 299.14	

SUBTOTAL of Receipts This Page (optional)	▶	146.52
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 154 / 244
	<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. LYNN ANN RODENHUIS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 9135 Cowenton Avenue		Transaction ID: SA11A1.90562	
City State Zip Code Perry Hall MD 21128	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 ▼ 353.89		

Full Name (Last, First, Middle Initial) B. LYNN ANN RODENHUIS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 9135 Cowenton Avenue		Transaction ID: SA11A1.91163	
City State Zip Code Perry Hall MD 21128	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 ▼ 393.80		

Full Name (Last, First, Middle Initial) C. LAWRENCE ROEHRIG		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 13084 LIA COURT		Transaction ID: SA11A1.90850	
City State Zip Code LINDON MI 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 ▼ 499.80		

SUBTOTAL of Receipts This Page (optional) ▶	129.80
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 155 / 244
	<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 5 / 1 0 / 2 0 0 7
Mailing Address 1414 17th Street NW, Apt. 603		Transaction ID: SA11A1.90563
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 ▼ 597.96	

B. Full Name (Last, First, Middle Initial) ETHAN ROME		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 1414 17th Street NW, Apt. 603		Transaction ID: SA11A1.91164
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 ▼ 664.40	

C. Full Name (Last, First, Middle Initial) JOYCE L ROONEY		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 13080 Dronfield Avenue #73		Transaction ID: SA11A1.90434
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 ▼ 450.00	

SUBTOTAL of Receipts This Page (optional) ▶	157.88
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 156 / 244
	<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. JOYCE L ROONEY		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7
Mailing Address 13080 Dronfield Avenue #73		Transaction ID: SA11A1.90971
City Sylmar State CA Zip Code 91342	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00
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 ▼ 475.00

Full Name (Last, First, Middle Initial) B. MICHAEL ROSS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 9432 S. HARDING		Transaction ID: SA11A1.90118
City EVERGREEN PARK State IL Zip Code 60805	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 ▼ 299.14

Full Name (Last, First, Middle Initial) C. JOSEPH K. ROWE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 34 LAKESIDE DRIVE		Transaction ID: SA11A1.90291
City HONESDALE State PA Zip Code 18431	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 76.60
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 ▼ 378.82

SUBTOTAL of Receipts This Page (optional)	▶	161.78
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 157 / 244
	<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. GARY F. ROWELL		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 2523 NE Everett Street		Transaction ID: SA11A1.90063	
City State Zip Code Portland OR 97232		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation OR HEALTH SCIENCES UNIV. ADMINISTRATIVE ASSISTANT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) B. JOSEPH RUGOLA		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 4771 POWDERHORN LANE		Transaction ID: SA11A1.91021	
City State Zip Code WESTERVILLE OH 43081		Amount of Each Receipt this Period 13.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AFSCME OH LOC 4 EXECUTIVE DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 585.00	

Full Name (Last, First, Middle Initial) C. LISABETH L. RYDER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 1514 Peralta Street		Transaction ID: SA11A1.90564	
City State Zip Code Oakland CA 94607		Amount of Each Receipt this Period 32.92	
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 ▼ 296.28	

SUBTOTAL of Receipts This Page (optional) ▶	95.92
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 / 244
	<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 **Oakland** State **CA** Zip Code **94607**

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

Name of Employer **AFSCME INT'L** Occupation **REGIONAL FIELD ADMINISTRATOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **329.20**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 25 / 2007

Transaction ID: SA11A1.91165

Amount of Each Receipt this Period
32.92

B. Full Name (Last, First, Middle Initial)
VERA SAADE

Mailing Address **1309 VINE STREET**

City **LANSING** State **MI** Zip Code **48912**

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

Name of Employer **AFSCME MI CN 25** Occupation **ASSISTANT DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **216.90**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 21 / 2007

Transaction ID: SA11A1.90851

Amount of Each Receipt this Period
21.69

C. Full Name (Last, First, Middle Initial)
JEFFREY C SABIN

Mailing Address **300 Hardman Drive**

City **South St. Paul** State **MN** Zip Code **55075**

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 ▼ **249.70**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 08 / 2007

Transaction ID: SA11A1.90211

Amount of Each Receipt this Period
49.94

SUBTOTAL of Receipts This Page (optional)	104.55
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 / 244
	<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 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) ▼ 306.60

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.90345

Amount of Each Receipt this Period
 61.32

B. Full Name (Last, First, Middle Initial)
 WILLIAM SAMS

Mailing Address 6200 GARBER ROAD

City State Zip Code
 DAYTON OH 45415

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) ▼ 406.60

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.90406

Amount of Each Receipt this Period
 82.28

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

Mailing Address 1804 S. COUNTRY CLUB ROAD

City State Zip Code
 DECATUR IL 62521-4462

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

Name of Employer Occupation
 AFSCME IL CN 31 BUSINESS MANAGER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 373.50

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

Transaction ID: SA11A1.90092

Amount of Each Receipt this Period
 75.14

SUBTOTAL of Receipts This Page (optional)	218.74
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 160 / 244
	<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. LEE ALAN SAUNDERS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 7510 Alaska Avenue NW		Transaction ID: SA11A1.90566	
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 ▼ 781.47		

Full Name (Last, First, Middle Initial) B. LEE ALAN SAUNDERS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 7510 Alaska Avenue NW		Transaction ID: SA11A1.91167	
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 ▼ 868.30		

Full Name (Last, First, Middle Initial) C. MARIANNE SAUNDERS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 116 Boulevard of the Allies		Transaction ID: SA11A1.90313	
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 ▼ 256.40		

SUBTOTAL of Receipts This Page (optional) ▶	224.94
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 161 / 244
	<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) BELINDA C SAVERINO		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 11007 Pompey Drive		Transaction ID: SA11A1.90567
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 ▼ 382.23	

B. Full Name (Last, First, Middle Initial) BELINDA C SAVERINO		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 11007 Pompey Drive		Transaction ID: SA11A1.91168
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 ▼ 424.70	

C. Full Name (Last, First, Middle Initial) MARY ANN SAYTAR		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 609 Penn Street		Transaction ID: SA11A1.90293
City State Zip Code Steelton PA 17113	Amount of Each Receipt this Period 43.68	
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 ▼ 216.02	

SUBTOTAL of Receipts This Page (optional) ▶	128.62
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 162 / 244
	<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. LORELEI SCAFARO		Date of Receipt M M / D D / Y Y Y Y Y 05 / 04 / 2007	
Mailing Address 945 N Lombard Avenue		Transaction ID: SA11A1.90076	
City State Zip Code Oak Park IL 60302-1432	Amount of Each Receipt this Period 48.70		
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 ▼ 242.08		

Full Name (Last, First, Middle Initial) B. LAWRENCE SCANLON		Date of Receipt M M / D D / Y Y Y Y Y 05 / 10 / 2007	
Mailing Address 1108 Duke Street		Transaction ID: SA11A1.90568	
City State Zip Code Alexandria VA 22314-3514	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, POLITICAL ACTION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 624.48		

Full Name (Last, First, Middle Initial) C. LAWRENCE SCANLON		Date of Receipt M M / D D / Y Y Y Y Y 05 / 25 / 2007	
Mailing Address 1108 Duke Street		Transaction ID: SA11A1.91169	
City State Zip Code Alexandria VA 22314-3514	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, POLITICAL ACTION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 695.34		

SUBTOTAL of Receipts This Page (optional) ▶	190.42
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 163 / 244
	<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 SCHLITZ		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7
Mailing Address 2201 Broadway Street Suite #715		Transaction ID: SA11A1.90821
City State Zip Code Oakland CA 94612	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME CA LOC 3299	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. PETER SCHMALZ		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 1227 N. RIDGELAND AVENUE		Transaction ID: SA11A1.90096
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 ▼ 365.46	

Full Name (Last, First, Middle Initial) C. JAMES SCHMITZ		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 15237 Dufief Drive		Transaction ID: SA11A1.90569
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 ▼ 624.48	

SUBTOTAL of Receipts This Page (optional) ▶	194.38
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 164 / 244
	<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. JAMES SCHMITZ		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 15237 Dufief Drive		Transaction ID: SA11A1.91170	
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 ▼ 695.34		

Full Name (Last, First, Middle Initial) B. ALBERT SCHNAUFER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 3 / 2 0 0 7	
Mailing Address 400 SOUTH FLOWER #65		Transaction ID: SA11A1.89953	
City State Zip Code ORANGE CA 92868	Amount of Each Receipt this Period 30.00		
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 ▼ 244.80		

Full Name (Last, First, Middle Initial) C. MARY SCHWANGER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 419 VALLEY STREET		Transaction ID: SA11A1.90360	
City State Zip Code MARYSVILLE PA 17053	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 ▼ 513.36		

SUBTOTAL of Receipts This Page (optional) ▶	204.66
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 165 / 244
	<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)
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 ▼ **355.29**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 10 / 2007

Transaction ID: SA11A1.90570

Amount of Each Receipt this Period
37.81

B. 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 ▼ **393.10**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 25 / 2007

Transaction ID: SA11A1.91171

Amount of Each Receipt this Period
37.81

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

Mailing Address **1425 Foxhall Road NW**

City **WASHINGTON** State **DC** Zip Code **20007**

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

Name of Employer **AFSCME INT'L** Occupation **CHAIRPERSON, JUDICIAL PANEL**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **709.29**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 10 / 2007

Transaction ID: SA11A1.90571

Amount of Each Receipt this Period
78.81

SUBTOTAL of Receipts This Page (optional)	154.43
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:	PAGE 166 / 244
	(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. JOHN SEFERIAN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 1425 Foxhall Road NW		Transaction ID: SA11A1.91172
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 ▼ 788.10	

Full Name (Last, First, Middle Initial) B. ELIOT A SEIDE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address 300 Hardman Avenue		Transaction ID: SA11A1.90213
City	State	Zip Code
South St. Paul	MN	55075
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 87.72
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 ▼ 436.04	

Full Name (Last, First, Middle Initial) C. JERRY SERFLING		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address 2388 HIDDEN VALLEY LANE		Transaction ID: SA11A1.90212
City	State	Zip Code
STILLWATER	MN	55082
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 72.46
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 ▼ 375.18	

SUBTOTAL of Receipts This Page (optional)	▶	238.99
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 167 / 244
	(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. MICHELLE A SFORZA		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 415 U Street, NW		Transaction ID: SA11A1.90572
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 41.77	
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 ▼ 367.05	

Full Name (Last, First, Middle Initial) B. MICHELLE A SFORZA		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 415 U Street, NW		Transaction ID: SA11A1.91173
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 41.77	
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 ▼ 408.82	

Full Name (Last, First, Middle Initial) C. DOMINIC SGRO		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 144 STORMER ROAD		Transaction ID: SA11A1.90301
City State Zip Code INDIANA PA 15701-0144	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 ▼ 513.36	

SUBTOTAL of Receipts This Page (optional) ▶	187.34
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:	PAGE 168 / 244
	(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. DONALD G. SHAFFER		Date of Receipt M M / D D / Y Y Y Y Y 05 / 09 / 2007	
Mailing Address R. D. #5, BOX 82		Transaction ID: SA11A1.90321	
City State Zip Code BROOKEVILLE PA 15825-9501		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 ▼ 306.60	

Full Name (Last, First, Middle Initial) B. STEVEN SHAFFER		Date of Receipt M M / D D / Y Y Y Y Y 05 / 09 / 2007	
Mailing Address R. D. 1, BOX 37		Transaction ID: SA11A1.90322	
City State Zip Code SIGEL PA 15860		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 ▼ 304.58	

Full Name (Last, First, Middle Initial) C. MELISSA SIMONETTA		Date of Receipt M M / D D / Y Y Y Y Y 05 / 10 / 2007	
Mailing Address 43845 Thornberry Square, Bldg 7, Apt. 212		Transaction ID: SA11A1.90573	
City State Zip Code Leesburg VA 20176		Amount of Each Receipt this Period 27.45	
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 ▼ 245.05	

SUBTOTAL of Receipts This Page (optional) ▶	150.09
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 / 244
	<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)
MELISSA SIMONETTA

Mailing Address **43845 Thornberry Square, Bldg 7,
 Apt. 212**

City **Leesburg** State **VA** Zip Code **20176**

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

Name of Employer **AFSCME INT'L** Occupation **ADMINISTRATIVE ASSISTANT II**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **273.61**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 25 / 2007

Transaction ID: SA11A1.91174

Amount of Each Receipt this Period
28.56

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

Mailing Address **6284 Shackelford Terrace**

City **Alexandria** State **VA** Zip Code **22312**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **324.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 10 / 2007

Transaction ID: SA11A1.90574

Amount of Each Receipt this Period
36.00

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

Mailing Address **6284 Shackelford Terrace**

City **Alexandria** State **VA** Zip Code **22312**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 25 / 2007

Transaction ID: SA11A1.91175

Amount of Each Receipt this Period
36.00

SUBTOTAL of Receipts This Page (optional)	100.56
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 170 / 244
	<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)
 CAROL ANN SIMS

Mailing Address 7337 S. SHORE DRIVE #724

City State Zip Code
 CHICAGO IL 60649

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) ▼ 308.04

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

Transaction ID: SA11A1.90077

Amount of Each Receipt this Period
 61.98

B. Full Name (Last, First, Middle Initial)
 ROBERTA J. SKOK

Mailing Address 775 TOWNSHIP ROAD #2204

City State Zip Code
 PERRYSVILLE OH 44864

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) ▼ 406.60

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.90408

Amount of Each Receipt this Period
 82.28

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) ▼ 309.20

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 1 / 2 0 0 7

Transaction ID: SA11A1.90853

Amount of Each Receipt this Period
 30.92

SUBTOTAL of Receipts This Page (optional)	175.18
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 171 / 244
	<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 SMITH

Mailing Address 621 CYPRESS

City State Zip Code
CHATHAM IL 62629

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) ▼ **308.04**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 04 / 2007

Transaction ID: SA11A1.90078

Amount of Each Receipt this Period
61.98

B. Full Name (Last, First, Middle Initial)
 NEFERTITI SMITH

Mailing Address 2013 S. 16TH AVENUE

City State Zip Code
BROADVIEW IL 60155

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) ▼ **299.14**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 04 / 2007

Transaction ID: SA11A1.90098

Amount of Each Receipt this Period
60.18

C. Full Name (Last, First, Middle Initial)
 ZACH SMITH

Mailing Address 3505 26th Avenue NE

City State Zip Code
Olympia WA 98506

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

Name of Employer Occupation
 AFSCME WA CN 28 PRINTER

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

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 18 / 2007

Transaction ID: SA11A1.90776

Amount of Each Receipt this Period
20.00

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 172 / 244
	<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 Springfield State IL Zip Code 62704

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

Name of Employer AFSCME IL CN 31 Occupation MIS SPECIALIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 319.01

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

Transaction ID: SA11A1.90124

Amount of Each Receipt this Period
 65.16

B. Full Name (Last, First, Middle Initial)
 SHARON SOBER

Mailing Address 212 5TH STREET

City CATAWISSA State PA Zip Code 17820

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 ▼ 306.60

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.90329

Amount of Each Receipt this Period
 61.32

C. Full Name (Last, First, Middle Initial)
 DARRIN SPANN

Mailing Address 6130 Springford Drive, #C6

City Harrisburg State PA Zip Code 17111

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 ▼ 378.82

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.90294

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 173 / 244
	(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)
LARRY SPIVACK

Mailing Address 733 S. LOMBARD AVENUE

City State Zip Code
OAK PARK IL 60304-1607

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

Name of Employer Occupation
AFSCME IL CN 31 COLLECTIVE BARGAINING SUPERVISOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.46

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

Transaction ID: SA11A1.90082

Amount of Each Receipt this Period
73.52

B. Full Name (Last, First, Middle Initial)
KAMALA B SRIKAR

Mailing Address 9908 Colebrook Avenue

City State Zip Code
Potomac MD 20854

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

Name of Employer Occupation
AFSCME INT'L MANAGER, MEETING & TRAVEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 336.89

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.90575

Amount of Each Receipt this Period
37.69

C. Full Name (Last, First, Middle Initial)
KAMALA B SRIKAR

Mailing Address 9908 Colebrook Avenue

City State Zip Code
Potomac MD 20854

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

Name of Employer Occupation
AFSCME INT'L MANAGER, MEETING & TRAVEL

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 374.58

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

Transaction ID: SA11A1.91176

Amount of Each Receipt this Period
37.69

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 174 / 244
	<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 ▼ 415.67

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.90410

Amount of Each Receipt this Period
84.12

B. Full Name (Last, First, Middle Initial)
KATHY A. STEICHEN

Mailing Address 830 W. 18TH STREET 3RD FL

City Chicago State IL Zip Code 60608

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

Name of Employer AFSCME IL CN 31 Occupation PROJECT STAFF ORGANIZER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 243.16

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

Transaction ID: SA11A1.90116

Amount of Each Receipt this Period
48.92

C. Full Name (Last, First, Middle Initial)
STEVEN STOKES

Mailing Address 1249 W. Chase

City Chicago State IL Zip Code 60626

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

Name of Employer AFSCME IL CN 31 Occupation ORGANIZER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 243.16

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

Transaction ID: SA11A1.90119

Amount of Each Receipt this Period
48.92

SUBTOTAL of Receipts This Page (optional)	▶	181.96
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 175 / 244
	<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 STOUFFER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 29B - 2ND STREET		Transaction ID: SA11A1.90303	
City NORTH IRWIN	State PA	Zip Code 15642	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 ▼ 306.60		

Full Name (Last, First, Middle Initial) B. TIMOTHY J STRECKER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 1603 E STREET SE		Transaction ID: SA11A1.90577	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Receipt this Period 42.92
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 ▼ 386.28		

Full Name (Last, First, Middle Initial) C. TIMOTHY J STRECKER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 1603 E STREET SE		Transaction ID: SA11A1.91178	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Receipt this Period 42.92
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 ▼ 429.20		

SUBTOTAL of Receipts This Page (optional) ▶	147.16
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 176 / 244
	<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) MICHELE-SUZANNE STREET Mailing Address 16808 Westbourne Terrace		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
City State Zip Code Gaithersburg MD 20878		Transaction ID: SA11A1.90578
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.56
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 ▼ 252.96	

B. Full Name (Last, First, Middle Initial) MICHELE-SUZANNE STREET Mailing Address 16808 Westbourne Terrace		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
City State Zip Code Gaithersburg MD 20878		Transaction ID: SA11A1.91179
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.56
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 ▼ 281.52	

C. Full Name (Last, First, Middle Initial) MICHAEL E SUKAL Mailing Address 852 Darlington Drive		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
City State Zip Code Avon IN 46123		Transaction ID: SA11A1.90580
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.30
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 ▼ 402.86	

SUBTOTAL of Receipts This Page (optional) ▶	102.42
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 177 / 244
	<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 E SUKAL		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 852 Darlington Drive		Transaction ID: SA11A1.91181	
City Avon	State IN	Zip Code 46123	Amount of Each Receipt this Period 45.30
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 ▼ 448.16		

Full Name (Last, First, Middle Initial) B. MARY SULLIVAN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 61 WOODSIDE DRIVE		Transaction ID: SA11A1.90477	
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 ▼ 550.00		

Full Name (Last, First, Middle Initial) C. MARY SULLIVAN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 61 WOODSIDE DRIVE		Transaction ID: SA11A1.91023	
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 ▼ 650.00		

SUBTOTAL of Receipts This Page (optional) ▶	160.30
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 178 / 244
	<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 SULLIVAN		Date of Receipt M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7	
Mailing Address 61 WOODSIDE DRIVE		Transaction ID: SA11A1.91263	
City State Zip Code ALBANY NY 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 ▼ 665.00		

Full Name (Last, First, Middle Initial) B. JEFFREY TAGGART		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 12001 Market Street, Unit 450		Transaction ID: SA11A1.90581	
City State Zip Code Reston VA 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 ▼ 442.17		

Full Name (Last, First, Middle Initial) C. JEFFREY TAGGART		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 12001 Market Street, Unit 450		Transaction ID: SA11A1.91182	
City State Zip Code Reston VA 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 ▼ 491.30		

SUBTOTAL of Receipts This Page (optional) ▶	113.26
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 179 / 244
	<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. JAMES TAIT		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 119 HELLS KITCHEN COURT		Transaction ID: SA11A1.90336	
City State Zip Code DRUMS PA 18222		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 ▼ 306.60	

Full Name (Last, First, Middle Initial) B. MIGUEL TAMAYO		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 2201 Broadway Suite 715		Transaction ID: SA11A1.90820	
City State Zip Code Oakland CA 94612		Amount of Each Receipt this Period 65.00	
FEC ID number of contributing federal political committee. C			
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 ▼ 325.00	

Full Name (Last, First, Middle Initial) C. NANCY P TAYLOR		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 55 Northwest Drive		Transaction ID: SA11A1.90582	
City State Zip Code Huntingtown MD 20639		Amount of Each Receipt this Period 36.68	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L		Occupation AFFILIATE RELATIONS, MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 330.12	

SUBTOTAL of Receipts This Page (optional) ▶	163.00
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 180 / 244
	<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 **Huntingtown** State **MD** Zip Code **20639**

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

Name of Employer **AFSCME INT'L** Occupation **AFFILIATE RELATIONS, MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **366.80**

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 25 / 2007

Transaction ID: SA11A1.91183

Amount of Each Receipt this Period
36.68

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

Mailing Address **1328 E. 9th Street**

City **Duluth** State **MN** Zip Code **55805-1609**

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 ▼ **300.00**

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 08 / 2007

Transaction ID: SA11A1.90208

Amount of Each Receipt this Period
60.00

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

Mailing Address **2006 FAYCREST DRIVE**

City **CINCINNATI** State **OH** Zip Code **45238**

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 ▼ **210.42**

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90411

Amount of Each Receipt this Period
42.66

SUBTOTAL of Receipts This Page (optional)	139.34
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 181 / 244
	<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 **TROTWOOD** State **OH** Zip Code **45427**

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

Name of Employer **AFSCME OH CN 8** Occupation **LEAD STAFF ORGANIZER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **298.33**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90412

Amount of Each Receipt this Period
60.48

B. Full Name (Last, First, Middle Initial)
 LYNN G. THOMASSON, SR.

Mailing Address **5079 ALTRIM ROAD**

City **DAYTON** State **OH** Zip Code **45418-2015**

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 ▼ **298.33**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90413

Amount of Each Receipt this Period
60.48

C. Full Name (Last, First, Middle Initial)
 ROBERT L. THOMPSON

Mailing Address **927 GIBBS AVENUE NE**

City **CANTON** State **OH** Zip Code **44705-1074**

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

Name of Employer **AFSCME OH CN 8** Occupation **REGIONAL DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **406.60**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 09 / 2007

Transaction ID: SA11A1.90414

Amount of Each Receipt this Period
82.28

SUBTOTAL of Receipts This Page (optional)	203.24
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 182 / 244
	<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 THOR Mailing Address 4 Betts Place City East Norwalk State CT Zip Code 06855 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 05 / 07 / 2007 Transaction ID: SA11A1.90178 Amount of Each Receipt this Period 38.14
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 ▼ 208.81		

B. Full Name (Last, First, Middle Initial) HELEN THORNTON Mailing Address 500 N. Elmwood City Oak Park State IL Zip Code 60302 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2007 Transaction ID: SA11A1.90137 Amount of Each Receipt this Period 66.96
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 ▼ 332.84		

C. Full Name (Last, First, Middle Initial) JOHN THORSON Mailing Address 555 SELBY AVENUE City ST. PAUL State MN Zip Code 55102 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2007 Transaction ID: SA11A1.90209 Amount of Each Receipt this Period 62.60
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 ▼ 308.82		

SUBTOTAL of Receipts This Page (optional)	167.70
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 / 244
	<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 5 / 1 0 / 2 0 0 7	
Mailing Address 321 E. 19th Street		Transaction ID: SA11A1.90583	
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		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 331.20		

Full Name (Last, First, Middle Initial) B. TAMARA L TOCHER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 321 E. 19th Street		Transaction ID: SA11A1.91184	
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		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 368.00		

Full Name (Last, First, Middle Initial) C. VANESSA TOLLIVER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 1121 WELLINGTON BLVD.		Transaction ID: SA11A1.91143	
City COLUMBUS	State OH	Zip Code 43219	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer DIVISION OF MINERAL RESC MGMT.	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

SUBTOTAL of Receipts This Page (optional) ▶	93.60
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 184 / 244
	<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 5 / 2 1 / 2 0 0 7
Mailing Address 930 STAG THICKET LANE		Transaction ID: SA11A1.90857
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 ▼ 343.30	

Full Name (Last, First, Middle Initial) B. KATHLEEN TOPACIO-FLORES		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 7402 Edmondston Road		Transaction ID: SA11A1.90584
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 ▼ 423.98	

Full Name (Last, First, Middle Initial) C. KATHLEEN TOPACIO-FLORES		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 7402 Edmondston Road		Transaction ID: SA11A1.91185
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 ▼ 471.80	

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 185 / 244
	<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. DOROTHY TOWNSEND		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 6837 SW 39th Drive		Transaction ID: SA11A1.90585
City State Zip Code Miramar FL 33023	Amount of Each Receipt this Period 71.65	
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 ▼ 644.85	

Full Name (Last, First, Middle Initial) B. DOROTHY TOWNSEND		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 6837 SW 39th Drive		Transaction ID: SA11A1.91186
City State Zip Code Miramar FL 33023	Amount of Each Receipt this Period 71.65	
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 ▼ 716.50	

Full Name (Last, First, Middle Initial) C. ELIZABETH TURNBOW		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address 4443 Libby N.E.		Transaction ID: SA11A1.90778
City State Zip Code Olympia WA 98506	Amount of Each Receipt this Period 40.00	
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 ▼ 380.00	

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 186 / 244
	<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

A. Full Name (Last, First, Middle Initial)
NSEABASIE UFOT

Mailing Address 130 East Dorothy Lane
Apt. #2

City State Zip Code
Dayton OH 43217

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) ▼ 248.71

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.90415

Amount of Each Receipt this Period
48.82

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

Mailing Address 154 STONEY DRIVE

City State Zip Code
DOVER DE 19904

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

Name of Employer Occupation
AFSCME DE CN 81 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 306.93

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

Transaction ID: SA11A1.89940

Amount of Each Receipt this Period
60.36

C. Full Name (Last, First, Middle Initial)
OSVALDO VALENZUELA

Mailing Address 6962 N. Hamilton Avenue
#E

City State Zip Code
Chicago IL 60645

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) ▼ 280.36

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

Transaction ID: SA11A1.90136

Amount of Each Receipt this Period
56.40

SUBTOTAL of Receipts This Page (optional)	▶	165.58
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 187 / 244
	<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		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 2492 Ram Crossingway		Transaction ID: SA11A1.90586
City State Zip Code Henderson NV 89074	Amount of Each Receipt this Period 57.01	
FEC ID number of contributing federal political committee. C		
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 ▼ 713.09	

B. Full Name (Last, First, Middle Initial) FLORA M WALKER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 2492 Ram Crossingway		Transaction ID: SA11A1.91187
City State Zip Code Henderson NV 89074	Amount of Each Receipt this Period 57.01	
FEC ID number of contributing federal political committee. C		
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 ▼ 770.10	

C. Full Name (Last, First, Middle Initial) CRYSTAL M WALLACE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 38426 Village Lane		Transaction ID: SA11A1.90587
City State Zip Code Mechanicsville MD 20659	Amount of Each Receipt this Period 25.13	
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 ▼ 226.17	

SUBTOTAL of Receipts This Page (optional) ▶	139.15
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 188 / 244
	<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) CRYSTAL M WALLACE		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 38426 Village Lane		Transaction ID: SA11A1.91188	
City State Zip Code Mechanicsville MD 20659	Amount of Each Receipt this Period 25.13		
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 ▼ 251.30		

B. Full Name (Last, First, Middle Initial) DAVID WARRICK		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 2638 JAY COURT		Transaction ID: SA11A1.91024	
City State Zip Code Indianapolis IN 46229	Amount of Each Receipt this Period 65.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IN CN 62	Occupation UNION DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 505.00		

C. Full Name (Last, First, Middle Initial) DAVID WARRICK		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 2638 JAY COURT		Transaction ID: SA11A1.91027	
City State Zip Code Indianapolis IN 46229	Amount of Each Receipt this Period 120.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME IN CN 62	Occupation UNION DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00		

SUBTOTAL of Receipts This Page (optional) ▶	210.13
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 189 / 244
	<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. VERNON WATKINS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 5736 Showalter Court		Transaction ID: SA11A1.90589	
City State Zip Code Rancho Cucamongo CA 91701	Amount of Each Receipt this Period 70.03		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation EXECUTIVE ASST. TO SECRETARY TREASUER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.27		

Full Name (Last, First, Middle Initial) B. VERNON WATKINS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 5736 Showalter Court		Transaction ID: SA11A1.91190	
City State Zip Code Rancho Cucamongo CA 91701	Amount of Each Receipt this Period 70.03		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation EXECUTIVE ASST. TO SECRETARY TREASUER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.30		

Full Name (Last, First, Middle Initial) C. LONITAM WAYBRIGHT		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 3008 Athens Circle		Transaction ID: SA11A1.90590	
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 ▼ 418.86		

SUBTOTAL of Receipts This Page (optional) ▶	186.60
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 190 / 244
	<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. LONITAM WAYBRIGHT		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 3008 Athens Circle		Transaction ID: SA11A1.91191	
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 ▼ 465.40		

Full Name (Last, First, Middle Initial) B. KENNETH WEAVER		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7	
Mailing Address 2140 DELAFIELD STREET		Transaction ID: SA11A1.90640	
City State Zip Code WAUKESHA WI 53589-2123	Amount of Each Receipt this Period 20.43		
FEC ID number of contributing federal political committee. C			
Name of Employer DEPT OF TRANSPORTATION	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.30		

Full Name (Last, First, Middle Initial) C. KENNETH WEAVER		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7	
Mailing Address 2140 DELAFIELD STREET		Transaction ID: SA11A1.90983	
City State Zip Code WAUKESHA WI 53589-2123	Amount of Each Receipt this Period 20.43		
FEC ID number of contributing federal political committee. C			
Name of Employer DEPT OF TRANSPORTATION	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.73		

SUBTOTAL of Receipts This Page (optional) ▶	87.40
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 191 / 244
	<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 L. WEBB-GAUVIN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 1200 W. LAWRENCE #12		Transaction ID: SA11A1.90120	
City SPRINGFIELD	State IL	Zip Code 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 ▼ 312.58		

Full Name (Last, First, Middle Initial) B. BRIAN V. WEEKS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7	
Mailing Address 8033 Exceisior Drive Apt. A		Transaction ID: SA11A1.90591	
City Madison	State WI	Zip Code 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 ▼ 329.96		

Full Name (Last, First, Middle Initial) C. BRIAN V. WEEKS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 8033 Exceisior Drive Apt. A		Transaction ID: SA11A1.91192	
City Madison	State WI	Zip Code 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 ▼ 370.62		

SUBTOTAL of Receipts This Page (optional) ▶	144.00
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 192 / 244
	<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. JOSEPH WEIDNER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 255 BINNS BOULEVARD		Transaction ID: SA11A1.90416
City COLUMBUS State OH Zip Code 43204-2515	Amount of Each Receipt this Period 61.66	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME OH CN 8 Occupation EDITOR	Aggregate Year-to-Date ▼ 304.70	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. LARRY P WEINBERG		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 1730 Chesterford Way		Transaction ID: SA11A1.90592
City McLean State VA Zip Code 22101	Amount of Each Receipt this Period 86.83	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L Occupation GENERAL COUNSEL	Aggregate Year-to-Date ▼ 781.47	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. LARRY P WEINBERG		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 1730 Chesterford Way		Transaction ID: SA11A1.91193
City McLean State VA Zip Code 22101	Amount of Each Receipt this Period 86.83	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L Occupation GENERAL COUNSEL	Aggregate Year-to-Date ▼ 868.30	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	235.32
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 193 / 244
	<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. SUSAN WELDON		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 16 Fairfield Street		Transaction ID: SA11A1.92421
City State Zip Code Harrisburg PA 17109-4405	Amount of Each Receipt this Period 60.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CITY OF HARRISBURG	Occupation CONTROL ROOM OPERATOR II	
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. JOHN P. WESTMORELAND		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address 4678 West Rd.		Transaction ID: SA11A1.90207
City State Zip Code Moose Lake MN 55767	Amount of Each Receipt this Period 57.86	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME MN CN 5	Occupation BUSINESS AGENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 287.62	

Full Name (Last, First, Middle Initial) C. JAMES RANDY WESTON		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address 1495 IRVIN - SHOOT ROAD		Transaction ID: SA11A1.90197
City State Zip Code MORRAL OH 43337	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 ASSOCIATE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

SUBTOTAL of Receipts This Page (optional) ▶	147.86
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 194 / 244
	<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) CHARLES B. WESTOVER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 1428 Monroe Street #D		Transaction ID: SA11A1.90593
City State Zip Code Washington DC 20010	Amount of Each Receipt this Period 29.29	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation ONLINE MOBILIZATION COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 263.61	

B. Full Name (Last, First, Middle Initial) CHARLES B. WESTOVER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 1428 Monroe Street #D		Transaction ID: SA11A1.91194
City State Zip Code Washington DC 20010	Amount of Each Receipt this Period 29.29	
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation ONLINE MOBILIZATION COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 292.90	

C. Full Name (Last, First, Middle Initial) DIANE WHITE-HARRIS		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7
Mailing Address 1142 WOLF RUN		Transaction ID: SA11A1.90860
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 AFSCME MI CN 25	Occupation EXECUTIVE SECRETARY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.00	

SUBTOTAL of Receipts This Page (optional) ▶	84.68
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 195 / 244
	<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. BRYGE WICKSTROM		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 1267 MATILDA STREET		Transaction ID: SA11A1.91090
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 AFSCME MN CN 5	Occupation RECORDING SECRETARY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

Full Name (Last, First, Middle Initial) B. GUY WIEDERHOLD		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 906 LAUREL BOULEVARD		Transaction ID: SA11A1.90352
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 ▼ 306.60	

Full Name (Last, First, Middle Initial) C. WILLIAM WILKINSON		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 5272 Bradgen Court		Transaction ID: SA11A1.90594
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 ▼ 396.81	

SUBTOTAL of Receipts This Page (optional) ▶	197.41
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 196 / 244
	<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**

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

Mailing Address **5272 Bradgen Court**

City **Springfield** State **VA** Zip Code **22151**

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

Name of Employer **AFSCME INT'L** Occupation **ASSISTANT DIRECTOR, RESEARCH**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.90**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 25 / 2007

Transaction ID: SA11A1.91195

Amount of Each Receipt this Period
44.09

B. Full Name (Last, First, Middle Initial)
BRENDA WILLIAMS

Mailing Address **444 NE Ravenna Blvd.
 STE. 108**

City **Seattle** State **WA** Zip Code **98115**

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 ▼ **321.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 18 / 2007

Transaction ID: SA11A1.90779

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
ELIZABETH U WILLIAMS

Mailing Address **P.O. BOX 933**

City **Wailuku** State **HI** Zip Code **96793**

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

Name of Employer **AFSCME HI LOC 152** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
05 / 14 / 2007

Transaction ID: SA11A1.90704

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)	174.09
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 197 / 244
	<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 WILLIAMS

Mailing Address 6800 Fleetwood Rd.
 Apt. 1118

City State Zip Code
 McLean VA 22101

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

Name of Employer Occupation
 AFSCME INT'L SPECIAL ASST. TO SECRY-TREASURER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 374.67

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 1 0 / 2 0 0 7

Transaction ID: SA11A1.90595

Amount of Each Receipt this Period
 41.63

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

Mailing Address 6800 Fleetwood Rd.
 Apt. 1118

City State Zip Code
 McLean VA 22101

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

Name of Employer Occupation
 AFSCME INT'L SPECIAL ASST. TO SECRY-TREASURER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 416.30

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

Transaction ID: SA11A1.91196

Amount of Each Receipt this Period
 41.63

C. Full Name (Last, First, Middle Initial)
 PHILLIP WILLIAMS

Mailing Address 296 Churchmans Road

City State Zip Code
 New Castle DE 19720-9930

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

Name of Employer Occupation
 AFSCME DE CN 81 STAFF REPRESENTATIVE

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 306.93

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

Transaction ID: SA11A1.89939

Amount of Each Receipt this Period
 60.36

SUBTOTAL of Receipts This Page (optional)	143.62
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 198 / 244
	<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. SAUNDRA WILLIAMS		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 16218 BRAILE		Transaction ID: SA11A1.90861	
City DETROIT	State MI	Zip Code 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 ▼ 391.20		

Full Name (Last, First, Middle Initial) B. ALLAN WINEY		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address 765 MOUNT AIRY ROAD		Transaction ID: SA11A1.90296	
City LEWISBERRY	State PA	Zip Code 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 ▼ 423.44		

Full Name (Last, First, Middle Initial) C. KRISTIE WOLF		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7	
Mailing Address c/o 4031 EXECUTIVE PARK DRIVE PA CN 13		Transaction ID: SA11A1.90353	
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 ▼ 306.60		

SUBTOTAL of Receipts This Page (optional) ▶	186.06
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 199 / 244
	<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. ARTHUR WOOD		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
Mailing Address 780 FAIRWOOD		Transaction ID: SA11A1.90862	
City INKSTER	State MI	Amount of Each Receipt this Period 25.78	
Zip Code 48141			
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 ▼ 257.80		

Full Name (Last, First, Middle Initial) B. DOUGLAS WOODSON		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 108 ELGIN, APT. 1		Transaction ID: SA11A1.90110	
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 ▼ 337.16		

Full Name (Last, First, Middle Initial) C. JERRY WRIGHT		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 20235 E. 1280 N ROAD		Transaction ID: SA11A1.90105	
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 ▼ 313.10		

SUBTOTAL of Receipts This Page (optional) ▶	157.40
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 200 / 244
	<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) PETER WRIGHT		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address 28 WASHINGTON STREET		Transaction ID: SA11A1.91074	
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 ▼ 444.84		

B. Full Name (Last, First, Middle Initial) WAYNE J. YAMASAKI		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 4 / 2 0 0 7	
Mailing Address 1185 KAELEKU STREET		Transaction ID: SA11A1.90673	
City State Zip Code HONOLULU HI 96825-3007	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME HI LOCAL 152	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) PEGGY LEE ZIMMERMAN		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
Mailing Address 197 BLAIR AVENUE		Transaction ID: SA11A1.90074	
City State Zip Code COTTAGE HILLS IL 62018	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 ▼ 313.08		

SUBTOTAL of Receipts This Page (optional) ▶	187.12
TOTAL This Period (last page this line number only) ▶	31448.87

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 201 / 244	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13
<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)
 DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY

Mailing Address **PO BOX 2882
 CHURCH STREET STATION**

City **NEW YORK** State **NY** Zip Code **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 ▼
261139.15

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	4	/	2	0	0	7

Transaction ID: SA12.90468

Amount of Each Receipt this Period

47426.00

SUBTOTAL of Receipts This Page (optional)	47426.00
TOTAL This Period (last page this line number only)	47426.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 202 / 244	
	(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"/> 14	<input checked="" 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)
 THE CAMPAIGN GROUP

Mailing Address 1600 Locust Street

City	State	Zip Code
Philadelphia	PA	19103

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 18735.25

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 1 6 / 2 0 0 7

Transaction ID: SA15.90479

Amount of Each Receipt this Period
 1695.75

Refund - Media Buy TV Ads

SUBTOTAL of Receipts This Page (optional)	▶	1695.75
TOTAL This Period (last page this line number only)	▶	1695.75

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 203 / 244	
	(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 ▼
1530.93

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	1	/	2	0	0	7

Transaction ID: SA17.91376

Amount of Each Receipt this Period
271.49

Interest Income 5/31/07

SUBTOTAL of Receipts This Page (optional)	▶	271.49
TOTAL This Period (last page this line number only)	▶	271.49

**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 204 / 244

<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

Mailing Address 15 Union Square

City New York State NY Zip Code 10003

Purpose of Disbursement Interest Payment 5/31/07

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B.91377

Date of Disbursement

05 / 31 / 2007

Amount of Each Disbursement this Period

6781.88

B. AMERICAN EXPRESS

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement Service Charge 5/10/07

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B.90471

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

2.28

C. AMERICAN EXPRESS

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement Service Charge 5/19/07

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B.90781

Date of Disbursement

05 / 19 / 2007

Amount of Each Disbursement this Period

5.25

SUBTOTAL of Disbursements This Page (optional) ►

6789.41

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 205 / 244

<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. B & H ADVERTISING, INC.

Mailing Address 2241 S. Halsted Street

City Chicago State IL Zip Code 60608

Purpose of Disbursement
Merchandise Production Costs

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.89944

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

1533.79

Full Name (Last, First, Middle Initial)

B. B & H ADVERTISING, INC.

Mailing Address 2241 S. Halsted Street

City Chicago State IL Zip Code 60608

Purpose of Disbursement
Merchandise Production Costs

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.89945

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

1222.06

Full Name (Last, First, Middle Initial)

C. B & H ADVERTISING, INC.

Mailing Address 2241 S. Halsted Street

City Chicago State IL Zip Code 60608

Purpose of Disbursement
Merchandise Production Costs

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.90746

Date of Disbursement

05 / 18 / 2007

Amount of Each Disbursement this Period

1046.49

SUBTOTAL of Disbursements This Page (optional) ▶

3802.34

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 206 / 244

<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. B & H ADVERTISING, INC.

Mailing Address 2241 S. Halsted Street

City Chicago State IL Zip Code 60608

Purpose of Disbursement
Merchandise Production Costs

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.90747

Date of Disbursement

05 / 18 / 2007

Amount of Each Disbursement this Period

2493.90

Full Name (Last, First, Middle Initial)

B. BART GROUP

Mailing Address 171 Main Street

City Port Washington State NY Zip Code 11050

Purpose of Disbursement
Service Charge 5/4/07

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.89971

Date of Disbursement

05 / 04 / 2007

Amount of Each Disbursement this Period

70.46

Full Name (Last, First, Middle Initial)

C. DISCOVER NETWORK

Mailing Address P. O. BOX 3016

City New Albany State OH Zip Code 43054

Purpose of Disbursement
Service Charge 5/7/07

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.89974

Date of Disbursement

05 / 07 / 2007

Amount of Each Disbursement this Period

2.43

SUBTOTAL of Disbursements This Page (optional) ►

2566.79

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 207 / 244

<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. DISCOVER NETWORK

Mailing Address P. O. BOX 3016

City New Albany State OH Zip Code 43054

Purpose of Disbursement
Service Charge 5/14/07

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.90469

Date of Disbursement

/

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. VESHELL'S

Mailing Address 605 NW 177 Street
#129

City Miami State FL Zip Code 33169

Purpose of Disbursement
Merchandise Production Costs

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.90748

Date of Disbursement

/

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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 208 / 244

<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: SB22.89817

Date of Disbursement

05 / 01 / 2007

Amount of Each Disbursement this Period

2000.00

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: SB22.89970

Date of Disbursement

05 / 04 / 2007

Amount of Each Disbursement this Period

16500.00

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: SB22.90428

Date of Disbursement

05 / 11 / 2007

Amount of Each Disbursement this Period

11000.00

SUBTOTAL of Disbursements This Page (optional) ▶

29500.00

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: SB22.90467

Date of Disbursement

05 / 14 / 2007

Amount of Each Disbursement this Period

1000.00

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: SB22.90780

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

27800.00

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: SB22.90991

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ▶

30800.00

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 210 / 244

<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: SB22.90992

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

2000.00

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: SB22.91075

Date of Disbursement

05 / 30 / 2007

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

65300.00

**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. AL GREEN FOR CONGRESS		Transaction ID: SB23.90868 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7
Mailing Address P. O. BOX 20174		Amount of Each Disbursement this Period 2000.00
City Houston State TX Zip Code 77225	Purpose of Disbursement Contribution Candidate Name 011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 09		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. ASIAN AMERICAN ACTION FUND		Transaction ID: SB23.90869 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7
Mailing Address 625 3rd Street, NE Suite #2		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20002	Purpose of Disbursement Contribution-PAC Candidate Name 011 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. BARBARA LEE FOR CONGRESS		Transaction ID: SB23.90959 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7
Mailing Address 1736 Franklin St. Suite 400		Amount of Each Disbursement this Period 2500.00
City Oakland State CA Zip Code 94612	Purpose of Disbursement Contribution Candidate Name 011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 09		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	5500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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. BARNEY FRANK FOR CONGRESS COMMITTEE

Mailing Address P. O. BOX 260

City Newton State MA Zip Code 02460

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MA District: 04

Transaction ID: SB23.90870

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. BERKLEY FOR CONGRESS

Mailing Address 7500 W. Lake Mead Blvd.,
Box 9-306

City Las Vegas State NV Zip Code 89128

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NV District: 01

Transaction ID: SB23.90950

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. BISHOP FOR CONGRESS

Mailing Address P. O. BOX 437

City Farmingville State NY Zip Code 11738

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NY District: 01

Transaction ID: SB23.90951

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

5500.00

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 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. BOSWELL FOR CONGRESS

Mailing Address P. O. BOX 6220

City State Zip Code
Des Moines IA 50309

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: IA District: 03

Transaction ID: SB23.90871

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. BRAD MILLER CONGRESSIONAL CAMPAIGN

Mailing Address P. O. BOX 10322

City State Zip Code
Raleigh NC 27605

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NC District: 13

Transaction ID: SB23.90872

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. BRALEY FOR CONGRESS

Mailing Address P. O. Box 390

City State Zip Code
Waterloo IA 50704

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: IA District: 01

Transaction ID: SB23.90873

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ►

5500.00

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 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. BUTTERFIELD FOR CONGRESS

Mailing Address P. O. BOX 2571

City Wilson State NC Zip Code 27894

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NC District: 1

Transaction ID: SB23.90874

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. CASTOR FOR CONGRESS

Mailing Address P. O. BOX 5419

City Tampa State FL Zip Code 33675

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: FL District: 11

Transaction ID: SB23.90875

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. CHANDLER FOR CONGRESS

Mailing Address P. O. BOX 12678

City Lexington State KY Zip Code 40583-2678

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: KY District: 06

Transaction ID: SB23.90876

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

4000.00

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 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. CHARLES A GONZALEZ CONGRESSIONAL CAMPAIGN

Mailing Address P. O. BOX 12612

City San Antonio State TX Zip Code 78212

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TX District: 20

Transaction ID: SB23.90877

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. CHARLIE MELANCON CAMPAIGN COMMITTEE

Mailing Address P. O. BOX 549

City Napoleonville State LA Zip Code 70390

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: LA District: 03

Transaction ID: SB23.90878

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. CHARLIE WILSON FOR US CONGRESS

Mailing Address 800 Main Street

City Bridgeport State OH Zip Code 43912

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: OH District: 06

Transaction ID: SB23.90879

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ►

5500.00

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 216 / 244

<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. CIRO D. RODRIGUEZ FOR CONGRESS

Mailing Address 246 W. Harding Blvd.

City San Antonio State TX Zip Code 78214

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TX District: 23

Transaction ID: SB23.90880

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. CITIZENS FOR ACTION

Mailing Address P. O. BOX 1535

City Wilkes Barre State PA Zip Code 18703

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: SB23.90881

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. CITIZENS TO ELECT RICK LARSEN

Mailing Address P. O. BOX 326

City Everett State WA Zip Code 98206

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: WA District: 2

Transaction ID: SB23.90883

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

3000.00

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 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. COHEN FOR CONGRESS

Mailing Address 707 Adams Ave.

City Memphis State TN Zip Code 38105

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TN District: 09

Transaction ID: SB23.90884

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. COMMITTEE TO ELECT LINCOLN DAVIS

Mailing Address PO BOX 87

City Mc Minnville State TN Zip Code 37111

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TN District: 04

Transaction ID: SB23.90886

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. COMMITTEE TO RE-ELECT NYDIA M VELAZQUEZ

Mailing Address 315 INSPIRATION LANE

City GAITHERSBURG State MD Zip Code 20878

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NY District: 12

Transaction ID: SB23.90952

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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 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. CONGRESSIONAL BLACK CAUCUS- PAC

Mailing Address 1720 Massachusetts Ave., NW,

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: SB23.90887

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2500.00

B. COSTELLO FOR CONGRESS COMMITTEE

Mailing Address PO BOX 8250

City BELLEVILLE State IL Zip Code 62222

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: IL District: 12

Transaction ID: SB23.90888

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2500.00

C. CROWLEY FOR CONGRESS

Mailing Address 426 C St., NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NY District: 07

Transaction ID: SB23.90953

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ►

7000.00

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 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. DARLENE HOOLEY FOR CONGRESS

Mailing Address P. O. BOX 2050

City SALEM State OR Zip Code 97308

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: OR District: 5

Transaction ID: SB23.90890

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

B. DAVE WU FOR CONGRESS

Mailing Address 818 SW 3rd Ave.
#1182

City Portland State OR Zip Code 97204

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: OR District: 01

Transaction ID: SB23.90891

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

C. DAVIS FOR CONGRESS

Mailing Address 3333 West Arthington

City Chicago State IL Zip Code 60624

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: IL District: 07

Transaction ID: SB23.90892

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

5000.00

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 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. DIANA DEGETTE FOR US CONGRESS

Mailing Address P.O. BOX 61337

City State Zip Code
Denver CO 80206-8337

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CO District: 01

Transaction ID: SB23.90893

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. DOGGETT FOR U.S. CONGRESS

Mailing Address P.O. BOX 5843

City State Zip Code
Austin TX 78763

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TX District: 25

Transaction ID: SB23.90894

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. DON PAYNE FOR CONGRESS

Mailing Address P. O. BOX 2406

City State Zip Code
NEWARK NJ 07114

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NJ District: 10

Transaction ID: SB23.90955

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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 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, QUALIFIED

Full Name (Last, First, Middle Initial)

A. ELLISON FOR CONGRESS COMMITTEE

Mailing Address P. O. BOX 11818

City Minneapolis State MN Zip Code 55411

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MN District: 05

Transaction ID: SB23.90960

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF BENNIE THOMPSON

Mailing Address 236 Massachusetts Ave., NE
Suite 508

City Washington State DC Zip Code 20002

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MS District: 02

Transaction ID: SB23.90478

Date of Disbursement

05 / 15 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF FARR

Mailing Address P. O. BOX 122

City MONTEREY State CA Zip Code 93942

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CA District: 17

Transaction ID: SB23.90895

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ►

9500.00

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 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 JAY ROCKEFELLER

Mailing Address P. O. BOX 1909

City Charleston State WV Zip Code 25327

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

State: WV District: 00

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.90896

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF JIM MARSHALL

Mailing Address P.O. BOX 125

City Macon State GA Zip Code 31201

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

State: GA District: 08

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.90897

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF JOHN TANNER

Mailing Address P. O. BOX 1994

City Union City State TN Zip Code 38281

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

State: TN District: 08

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.90898

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ►

8000.00

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 223 / 244

<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, QUALIFIED

Full Name (Last, First, Middle Initial)

A. FRIENDS OF LOIS CAPP

Mailing Address P.O. Box 23940

City Santa Barbara State CA Zip Code 93121

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CA District: 23

Transaction ID: SB23.90899

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF MARY LANDRIEU INC.

Mailing Address 607 14th Street NW Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: LA District: 00

Transaction ID: SB23.90961

Date of Disbursement

05 / 24 / 2007

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF MAURICE HINCHEY

Mailing Address PO BOX 4497

City KINGSTON State NY Zip Code 12402

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NY District: 22

Transaction ID: SB23.90900

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

5000.00

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 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, QUALIFIED

Full Name (Last, First, Middle Initial)

A. FRIENDS OF MAZIE HIRONO

Mailing Address P. O. BOX 677

City Honolulu State HI Zip Code 96809

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: HI District: 02

Transaction ID: SB23.90901

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. GAY & LESBIAN VICTORY FUND

Mailing Address P. O. BOX 96308

City Washington State DC Zip Code 20077-7529

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: SB23.90902

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. GLACIER PAC

Mailing Address 818 Connecticut Avenue NW
Suite 1009

City Washington State DC Zip Code 20006

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: SB23.90904

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ►

8000.00

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 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. INSLEE FOR CONGRESS

Mailing Address PO BOX 33027

City SEATTLE State WA Zip Code 98133

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: WA District: 01

Transaction ID: SB23.90906

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. ISRAEL FOR CONGRESS

Mailing Address P. O. BOX 777

City Deer Park State NY Zip Code 11729

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NY District: 02

Transaction ID: SB23.90956

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. JESSE L. JACKSON, JR. FOR CONGRESS COMMITTEE

Mailing Address P. O. BOX 49286

City Chicago State IL Zip Code 60649

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: IL District: 02

Transaction ID: SB23.90907

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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 type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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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. JIM COSTA FOR CONGRESS		Transaction ID: SB23.90908 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 7
Mailing Address 2037 West Bullard, Suite 355		Amount of Each Disbursement this Period 1000.00
City Fresno State CA Zip Code 93711-1200	Purpose of Disbursement Contribution Candidate Name Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 20	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. JOAN FITZ-GERALD FOR CONGRESS		Transaction ID: SB23.90962 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7
Mailing Address 9975 Wadsworth Pkwy. Unit K2		Amount of Each Disbursement this Period 5000.00
City Westminister State CO Zip Code 80021-6814	Purpose of Disbursement Contribution Candidate Name Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 02	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. JOAN FITZ-GERALD FOR CONGRESS		Transaction ID: SB23.90964 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 7
Mailing Address 9975 Wadsworth Pkwy. Unit K2		Amount of Each Disbursement this Period 5000.00
City Westminister State CO Zip Code 80021-6814	Purpose of Disbursement Contribution Candidate Name Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	11000.00
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 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, QUALIFIED

Full Name (Last, First, Middle Initial)

A. JOHN SALAZAR FOR CONGRESS

Mailing Address 307 N. Santa Fe

City Pueblo State CO Zip Code 81003

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CO District: 03

Transaction ID: SB23.90909

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. JOHN SARBANES FOR CONGRESS

Mailing Address P. O. BOX 6854

City Baltimore State MD Zip Code 21285

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MD District: 03

Transaction ID: SB23.90910

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. LANGEVIN FOR CONGRESS

Mailing Address 181-A Knight Street

City Warwick State RI Zip Code 02886

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: RI District: 02

Transaction ID: SB23.90911

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

4000.00

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 type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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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. LARSON FOR CONGRESS

Mailing Address P. O. BOX 261172

City Hartford State CT Zip Code 06126

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CT District: 01

Transaction ID: SB23.90912

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. LAUTENBERG FOR SENATE

Mailing Address Gateway One
23rd FLOOR

City Newark State NJ Zip Code 07102

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NJ District: 00

Transaction ID: SB23.90957

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. LEVIN FOR CONGRESS

Mailing Address 230 North Ave

City Mount Clemens State MI Zip Code 48043

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MI District: 12

Transaction ID: SB23.90913

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ▶

10500.00

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 229 / 244

<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. LIPINSKI FOR CONGRESS COMMITTEE

Mailing Address 4501 GRAND

City Western Springs State IL Zip Code 60558

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: IL District: 03

Transaction ID: SB23.90915

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. LOBIONDO FOR CONGRESS

Mailing Address P. O. BOX 550

City Vineland State NJ Zip Code 08362

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NJ District: 02

Transaction ID: SB23.90954

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. MALONEY FOR CONGRESS

Mailing Address 24 E. 93RD STREET, SUITE 1B

City NEW YORK State NY Zip Code 10128

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NY District: 14

Transaction ID: SB23.90916

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ►

4000.00

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 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. MARION BERRY FOR CONGRESS

Mailing Address P. O. BOX 8084

City Jonesboro State AR Zip Code 72403

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: AR District: 1

Transaction ID: SB23.90917

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

B. MARK PRYOR FOR US SENATE

Mailing Address P. O. BOX 2720

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: AR District: 00

Transaction ID: SB23.90918

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

C. MARK UDALL FOR CONGRESS

Mailing Address 8690 WOLFF COURT
SUITE 200

City Westminister State CO Zip Code 80031

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CO District: 02

Transaction ID: SB23.90919

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ►

5500.00

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 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. MATHESON FOR CONGRESS

Mailing Address P. O. BOX 521048

City State Zip Code
SALT LAKE CITY UT 84152

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: UT District: 02

Transaction ID: SB23.90920

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. MCCOLLUM FOR CONGRESS

Mailing Address P O BOX 14131

City State Zip Code
SAINT PAUL MN 55114

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MN District: 04

Transaction ID: SB23.90921

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. MEEK FOR CONGRESS

Mailing Address 111 NW 183rd St.,
Suite 325

City State Zip Code
Miami FL 33169

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: FL District: 17

Transaction ID: SB23.90922

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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 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. MELISSA BEAN FOR CONGRESS COMMITTEE

Mailing Address P.O. BOX 3068

City Barrington State IL Zip Code 60011

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: IL District: 08

Transaction ID: SB23.90923

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. MIKE HONDA FOR CONGRESS

Mailing Address P. O. BOX 110188

City Campbell State CA Zip Code 95011

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: CA District: 15

Transaction ID: SB23.90924

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. MIKE ROSS FOR CONGRESS COMMITTEE

Mailing Address PO BOX 360

City PRESCOTT State AR Zip Code 71857-0360

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: AR District: 04

Transaction ID: SB23.90925

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

5000.00

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 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, QUALIFIED

Full Name (Last, First, Middle Initial)

A. MIKE THOMPSON FOR CONGRESS

Mailing Address 5429 Madison Ave.

City Sacramento State CA Zip Code 95841

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CA District: 01

Transaction ID: SB23.90926

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. MOORE FOR CONGRESS

Mailing Address P. O. BOX 16646

City Milwaukee State WI Zip Code 53216

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: WI District: 04

Transaction ID: SB23.90927

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. NEIL ABERCROMBIE FOR CONGRESS

Mailing Address 1050 Ala Moana Boulevard,
Suite D28

City Honolulu State HI Zip Code 96814

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: HI District: 01

Transaction ID: SB23.90928

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ▶

9500.00

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 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

<p>A. NITA LOWEY FOR CONGRESS</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address P. O. BOX 271</p> <p>City White Plains State NY Zip Code 10605</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 18</p>		<p>Transaction ID: SB23.90929</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p> <p><input type="text" value="011"/> Category/Type</p> <p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>
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<p>B. PASTOR'S PAC</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address P. O. BOX 6554</p> <p>City Phoenix State AZ Zip Code 85005</p> <p>Purpose of Disbursement Contribution-PAC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: SB23.90930</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p><input type="text" value="011"/> Category/Type</p> <p>Disbursement For: 2007</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input checked="" type="checkbox"/> Other (specify) ▼</p>
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<p>C. PERLMUTTER FOR CONGRESS</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 3440 Youngfield St., #264</p> <p>City Wheat Ridge State CO Zip Code 80033</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CO District: 07</p>		<p>Transaction ID: SB23.90932</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p> <p><input type="text" value="011"/> Category/Type</p> <p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="5500.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**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. RANGEL FOR CONGRESS

Mailing Address P. O. BOX 5577
Manhattanville Station

City New York State NY Zip Code 10027

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NY District: 15

Transaction ID: SB23.90933

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. RE-ELECT MCGOVERN COMMITTEE

Mailing Address P. O. BOX 60405

City Worcester State MA Zip Code 01606-0405

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MA District: 03

Transaction ID: SB23.90934

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. ROBERT WEXLER FOR CONGRESS COMMITTEE

Mailing Address P. O. BOX 810669

City Boca Raton State FL Zip Code 33481

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: FL District: 19

Transaction ID: SB23.90935

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ►

9000.00

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 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, QUALIFIED

Full Name (Last, First, Middle Initial)

A. RUSH HOLT FOR CONGRESS

Mailing Address P. O. BOX 782

City Pennington State NJ Zip Code 08534

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NJ District: 12

Transaction ID: SB23.90958

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. RUSS CARNAHAN FOR CONGRESS COMMITTEE

Mailing Address 7370 Manchester, Suite 20

City St. Louis State MO Zip Code 63143

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MO District: 03

Transaction ID: SB23.90936

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. SCHAKOWSKY FOR CONGRESS

Mailing Address P. O. BOX 5130

City Evanston State IL Zip Code 60204

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: IL District: 09

Transaction ID: SB23.90937

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ►

6500.00

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 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, QUALIFIED

Full Name (Last, First, Middle Initial)

A. SCHWARTZ FOR CONGRESS

Mailing Address 201 Leedom Street

City Jenkintown State PA Zip Code 19046

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: PA District: 13

Transaction ID: SB23.90938

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. SEARCHLIGHT LEADERSHIP FUND

Mailing Address 426 C St., NE
Rear Building

City Washington State DC Zip Code 20002

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: SB23.90939

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. SERRANO FOR CONGRESS

Mailing Address 275 Madison Ave

City New York State NY Zip Code 10016

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NY District: 16

Transaction ID: SB23.90940

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ▶

8000.00

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 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. SHERMAN FOR CONGRESS

Mailing Address 4750 Van Nuys Blvd.
#270

City Sherman Oaks State CA Zip Code 91403

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CA District: 27

Transaction ID: SB23.90941

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. STEPHEN F LYNCH FOR CONGRESS COMMITTEE

Mailing Address 88 Black Falcon Ave.
Suite 246

City Boston State MA Zip Code 02210

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MA District: 09

Transaction ID: SB23.90942

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. STEVE ROTHMAN FOR NEW JERSEY INC.

Mailing Address P. O. BOX 714

City Hackensack State NJ Zip Code 07602

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NJ District: 09

Transaction ID: SB23.91499

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

4500.00

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 239 / 244

<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. SYNERGY PAC

Mailing Address 6849 Old Dominion Drive,
Suite 222

City Mc Lean State VA Zip Code 22101

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: SB23.90943

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. TEXANS FOR HENRY CUELLAR CONGRESSIONAL CAMPAIGN

Mailing Address 1519 Washington Street
Suite 200

City Laredo State TX Zip Code 78042

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: TX District: 28

Transaction ID: SB23.90944

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. TIM JOHNSON FOR SOUTH DAKOTA

Mailing Address P. O. BOX 1859

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: SD District: 00

Transaction ID: SB23.90945

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional) ►

6500.00

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 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

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. VALLEY PAC

Mailing Address 26192 Floyd Lake Point Road

City Detroit Lakes State MN Zip Code 56501

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: SB23.90946

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2500.00

B. VAN HOLLEN FOR CONGRESS

Mailing Address 10537 St. Paul Street

City Kensington State MD Zip Code 20895

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MD District: 08

Transaction ID: SB23.90948

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

5000.00

C. WOOLSEY FOR CONGRESS

Mailing Address P.O. BOX 750176

City PETALUMA State CA Zip Code 94975

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CA District: 06

Transaction ID: SB23.90949

Date of Disbursement

05 / 22 / 2007

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ▶

10000.00

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 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. WYNN FOR CONGRESS

Mailing Address P. O. BOX 39139

City Washington State DC Zip Code 20016

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MD District: 04

Transaction ID: SB23.90965

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

194000.00

**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)

PAGE 242 / 244

<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, QUALIFI-
ED

Full Name (Last, First, Middle Initial)

A. AMALGAMATED BANK

Mailing Address 15 Union Square

City State Zip Code
New York NY 10003

Purpose of Disbursement
Principal Payment 5/18/07

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB26.90782

Date of Disbursement

/

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. AMALGAMATED BANK

Mailing Address 15 Union Square

City State Zip Code
New York NY 10003

Purpose of Disbursement
Principal Payment 5/31/07

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB26.91320

Date of Disbursement

/

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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

SCHEDULE C (FEC Form 3X)

LOANS

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

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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	1874666.64	125333.36

TERMS

Date Incurred: MM DD YY 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) ► 125333.36

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

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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

Date Due

Interest Rate

Secured:

M M
1 0

D D
2 5

Y Y Y Y
2 0 0 6

12/31/2007

8.25000%(apr)

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) ►

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.