

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-Q37PEOPL

ADDRESS (number and street) PO BOX 2882
CHURCH STREET STATION
 Check if different than previously reported. (ACC)
NEW YORK NY 10008

2. **FEC IDENTIFICATION NUMBER** C00149211
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 12 01 2009 through 12 31 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Alvin Warshaviak

Signature of Treasurer Electronically Filed by Alvin Warshaviak Date 01 19 2010

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

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

Report Covering the Period: From:

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		54656.50
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	96164.25									
(c) Total Receipts (from Line 19)	42457.72	605270.48								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	138621.97	659926.98								
7. Total Disbursements (from Line 31)	96164.25	617469.26								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	42457.72	42457.72								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

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

Report Covering the Period: From:

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	2217.22	14578.87
(ii) Unitemized	40240.50	590691.61
(iii) TOTAL (add Lines 11(a)(i) and (ii)	42457.72	605270.48
(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)	42457.72	605270.48
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from 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))	42457.72	605270.48
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	42457.72	605270.48

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	96164.25	617469.26
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. 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))..	96164.25	617469.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	96164.25	617469.26

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	42457.72	605270.48
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	42457.72	605270.48
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Leonard Allen	Date of Receipt MM / DD / YYYY 12 / 30 / 2009
	Mailing Address 512 Powell Street	Transaction ID: SA11AI.8097
	City State Zip Code Brooklyn NY 11212	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction
Name of Employer District Council 37, AFSC-ME	Occupation Grievance Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Miriam Allen	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 4322 Claredon Rd	Transaction ID: SA11AI.8098
	City State Zip Code Brooklyn NY 11203	Amount of Each Receipt this Period 38.46
	FEC ID number of contributing federal political committee. C	Payroll Deduction
Name of Employer NYC Board of Higher Ed. State	Occupation COLLEGE ADMIN ASSISTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	

C.	Full Name (Last, First, Middle Initial) Maynard Anderson	Date of Receipt MM / DD / YYYY 12 / 30 / 2009
	Mailing Address 789 willoughby ave	Transaction ID: SA11AI.8099
	City State Zip Code Brooklyn NY 11206	Amount of Each Receipt this Period 16.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction
Name of Employer District Council 37, AFSC-ME	Occupation Assistant Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.00	

SUBTOTAL of Receipts This Page (optional)	74.46
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 29
	<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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Charles Andrews		Date of Receipt
	Mailing Address 2816 Schley Ave apt 4b		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 9
	City	State	Zip Code
	Bronx	NY	10465
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11AI.8100
Name of Employer BRONX COMMUNITY COLLEGE		Occupation COLLEGE OFFICE ASST	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 30.00
		<input type="text"/> 260.00	Payroll Deduction

B.	Full Name (Last, First, Middle Initial) Ronald Arnero		Date of Receipt
	Mailing Address 175 Willoughby St #8H		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 9
	City	State	Zip Code
	Brooklyn	NY	11201
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11AI.8101
Name of Employer District Council 37, AFSC-ME		Occupation Assistant Division Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 16.00
		<input type="text"/> 224.00	Payroll Deduction

C.	Full Name (Last, First, Middle Initial) Peggy Benjamin		Date of Receipt
	Mailing Address 545 w 126th st		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 9
	City	State	Zip Code
	NY	NY	10027
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: SA11AI.8102
Name of Employer District Council 37, AFSC-ME		Occupation Grievance Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 20.00
		<input type="text"/> 260.00	Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 66.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 29
	<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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Frederick Bigger		Date of Receipt
	Mailing Address 447 Monroe Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Brooklyn	NY	11221
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8103
Name of Employer NYC Transit Authority		Occupation Computer Specialist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="208.00"/>	<input type="text" value="16.00"/>
			Payroll Deduction

B.	Full Name (Last, First, Middle Initial) James Bruni		Date of Receipt
	Mailing Address 22 Brighton 3rd rd		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Brooklyn	NY	11235
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8104
Name of Employer NYC Department of Protection		Occupation Construction Laborer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>	<input type="text" value="20.00"/>
			Payroll Deduction

C.	Full Name (Last, First, Middle Initial) Judith Burger-Arroyo		Date of Receipt
	Mailing Address 1056 E37th St		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Brooklyn	NY	11210
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8105
Name of Employer District Council 37, AFSCME		Occupation Grievance Rep, Local President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="2600.00"/>	<input type="text" value="200.00"/>
			Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="236.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 29
	<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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Jason Canidate		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 85 Tompkins Ave		Transaction ID: SA11AI.8106		
	City Brooklyn	State NY	Zip Code 11206	Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. C		Payroll Deduction		
	Name of Employer NYC POLICE Dept.	Occupation POLICE ADMIN AIDE	Aggregate Year-to-Date 390.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Cora Casey		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 49-57 Crown Street		Transaction ID: SA11AI.8107		
	City Brooklyn	State NY	Zip Code 11221	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		Payroll Deduction		
	Name of Employer NYC Housing Authority	Occupation Secretary	Aggregate Year-to-Date 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Carmen Charles		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 681 Palisade Ave		Transaction ID: SA11AI.8108		
	City teaneck	State NJ	Zip Code 07666	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		Payroll Deduction		
	Name of Employer District Council 37, AFSC-ME	Occupation Local President	Aggregate Year-to-Date 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	70.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 29
	<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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Cynthia Chin-Marshall		Date of Receipt
	Mailing Address 119 E 38th St.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Paterson	NJ	07514
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.8109
		Amount of Each Receipt this Period	<input type="text"/> 16.00
Name of Employer DC 37 Health & Security Fund		Occupation H&S Administrator	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 204.00	

B.	Full Name (Last, First, Middle Initial) Santos Crespo		Date of Receipt
	Mailing Address 319 Atkins Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Brooklyn	NY	11208
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.8110
		Amount of Each Receipt this Period	<input type="text"/> 20.00
Name of Employer Local 372 NYC Bd of Ed, AFSCME		Occupation Vice President	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 255.00	

C.	Full Name (Last, First, Middle Initial) Francis Curtis		Date of Receipt
	Mailing Address 100 Beekman St. #8B		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	New York	NY	10038
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.8111
		Amount of Each Receipt this Period	<input type="text"/> 20.00
Name of Employer District Council 37, AFSC-ME		Occupation Program Director	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 260.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 56.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 29
	<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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Michael DeMarco		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 83 Ramblewood Ave		Transaction ID: SA11AI.8112		
	City Staten Island	State NY	Zip Code 10308	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		Payroll Deduction		
	Name of Employer District Council 37, AFSC-ME	Occupation Grievance Representative	Aggregate Year-to-Date 250.00		

B.	Full Name (Last, First, Middle Initial) Colleen Detroy		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 5101 39th St apt. b21		Transaction ID: SA11AI.8113		
	City Woodside	State NY	Zip Code 11104	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		Payroll Deduction		
	Name of Employer District Council 37, AFSC-ME	Occupation Administrative Assistant	Aggregate Year-to-Date 260.00		

C.	Full Name (Last, First, Middle Initial) Moira Dolan		Date of Receipt MM / DD / YYYY 12 / 31 / 2009		
	Mailing Address 711 Amsterdam Ave #22L		Transaction ID: SA11AI.8114		
	City New York	State NY	Zip Code 10025	Amount of Each Receipt this Period 16.00	
	FEC ID number of contributing federal political committee. C		Payroll Deduction		
	Name of Employer District Council 37, AFSC-ME	Occupation Assist Director - Research & Neg.	Aggregate Year-to-Date 208.00		

SUBTOTAL of Receipts This Page (optional)	56.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 29
	<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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Connie Etheridge		Date of Receipt
	Mailing Address 123-18 153rd St		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Jamaica	NY	11434
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer NYC LAW DEPARTMENT		Occupation CLERICAL ASSOCIATE	Transaction ID: SA11AI.8115
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="260.00"/>	<input type="text" value="20.00"/>
			Payroll Deduction

B.	Full Name (Last, First, Middle Initial) Lenora Gates		Date of Receipt
	Mailing Address 112-23 196th St.		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	St. Albans	NY	11412
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Local 1549 NYC Clerical Adm.		Occupation Vice President, Local 1549	Transaction ID: SA11AI.8116
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="230.00"/>	<input type="text" value="15.00"/>
			Payroll Deduction

C.	Full Name (Last, First, Middle Initial) Oliver Gray		Date of Receipt
	Mailing Address 655 E. 14th Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	New York	NY	10009
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer District Council 37, AFSC-ME		Occupation Associate Director	Transaction ID: SA11AI.8117
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1040.00"/>	<input type="text" value="80.00"/>
			Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="115.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 29
(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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.

Full Name (Last, First, Middle Initial)
Chandler Henderson

Mailing Address 367 Monroe

City State Zip Code
Brooklyn NY 11221

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

Name of Employer District Council 37, AFSC-ME Occupation Council Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.8118

Amount of Each Receipt this Period
16.00

Payroll Deduction

B.

Full Name (Last, First, Middle Initial)
Mathildegl Holguin

Mailing Address 35-33 64th St 1a

City State Zip Code
Woodside NY 11377

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

Name of Employer NYC Social Services Dept Occupation Eligibility Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.8119

Amount of Each Receipt this Period
20.00

Payroll Deduction

C.

Full Name (Last, First, Middle Initial)
Anderson Hyland

Mailing Address 751 E. 89th St #5

City State Zip Code
Brooklyn NY 11236

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

Name of Employer Local 420, AFSCME AFL-CIO Occupation Accountant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.8120

Amount of Each Receipt this Period
20.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► **56.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 29
	<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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Barbara Ingram-Edmonds		Date of Receipt
	Mailing Address 34 douth Mill Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 9
	City	State	Zip Code
	West Winsor	NJ	08550
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8121
Name of Employer District Council 37, AFSC-ME		Occupation Director of Field Operators	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1040.00	<input type="text"/> 80.00
Payroll Deduction			

B.	Full Name (Last, First, Middle Initial) Dorothy Jelks		Date of Receipt
	Mailing Address 340 Williams		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 9
	City	State	Zip Code
	Brooklyn	NY	11207
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8122
Name of Employer NYC FIRE DEPARTMENT		Occupation CLERICAL ASSOCIATE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text"/> 20.00
Payroll Deduction			

C.	Full Name (Last, First, Middle Initial) amy Kadlub		Date of Receipt
	Mailing Address 115 Douglas Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 9
	City	State	Zip Code
	SI	NY	10304
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8123
Name of Employer District Council 37, AFSC-ME		Occupation HR Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 208.00	<input type="text"/> 16.00
Payroll Deduction			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 116.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 29
	<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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Barbara Kairson		Date of Receipt
	Mailing Address 43 Hamilton Terrence		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 0 / 2 0 0 9
	City	State	Zip Code
	New York	NY	10031
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8124
Name of Employer District Council 37, AFSC-ME		Occupation Director of DC 37 Education Fund	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 255.00	<input type="text"/> 20.00
Payroll Deduction			

B.	Full Name (Last, First, Middle Initial) Madonna Knight		Date of Receipt
	Mailing Address 282 E 35th Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 9
	City	State	Zip Code
	Brooklyn	NY	11203
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8125
Name of Employer District Council 37, AFSC-ME		Occupation Council Representative	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text"/> 20.00
Payroll Deduction			

C.	Full Name (Last, First, Middle Initial) Clifford Koppelman		Date of Receipt
	Mailing Address 1270 E 19 Street, #1J		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 0 / 2 0 0 9
	City	State	Zip Code
	Brooklyn	NY	11230
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8126
Name of Employer District Council 37, AFSC-ME		Occupation Grievance Representative	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 520.00	<input type="text"/> 40.00
Payroll Deduction			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 80.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 29
	<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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Jane Latour		Date of Receipt MM / DD / YYYY 12 / 30 / 2009
	Mailing Address 72 Seaman apt 6b		Transaction ID: SA11AI.8127
	City New York	State NY	Zip Code 10034
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer District Council 37, AFSC-ME	Occupation Associate Editor	Payroll Deduction
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) Eugene Lawrence		Date of Receipt MM / DD / YYYY 12 / 30 / 2009
	Mailing Address 2760 Grand Concourse Apt 1B		Transaction ID: SA11AI.8128
	City Bronx	State NY	Zip Code 10458
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer NYC Parks & Recreation Ad-min	Occupation Associate Park Service Worker	Payroll Deduction
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) Peter Leon		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 183-55 Babylon Ave.		Transaction ID: SA11AI.8129
	City St. Albans	State NY	Zip Code 11412
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
	Name of Employer Local 420 AFSCME, AFI-CIO	Occupation Treasurer, Local 420	Payroll Deduction
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

SUBTOTAL of Receipts This Page (optional)	▶	70.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 29
	<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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.

Full Name (Last, First, Middle Initial) Marva Lewis		Date of Receipt MM / DD / YYYY 12 / 30 / 2009
Mailing Address 5700 Arlington Ave 9u		Transaction ID: SA11AI.8130
City Riverdale	State NY	Zip Code 10471
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer District Council 37, AFSC-ME	Occupation Division Director	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.

Full Name (Last, First, Middle Initial) Terrence Miller		Date of Receipt MM / DD / YYYY 12 / 30 / 2009
Mailing Address 417 Prospect Pl		Transaction ID: SA11AI.8131
City Brooklyn	State NY	Zip Code 11238
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NYC Police Department	Occupation Senior Police Admin. Aide	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.

Full Name (Last, First, Middle Initial) Veronica Montgomery		Date of Receipt MM / DD / YYYY 12 / 31 / 2009
Mailing Address 202 Wyham Ct.		Transaction ID: SA11AI.8132
City Slingerlands	State NY	Zip Code 12159
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer Local 372 NYC Bd of Ed, AFSCME	Occupation President of Local 372	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 29
	<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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Edwin Negron		Date of Receipt
	Mailing Address 80 East 110th St		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	New York	NY	10029
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8133
Name of Employer City of New York Admin Service		Occupation CITY CUSTODIAL ASST	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="650.00"/>	<input type="text" value="50.00"/>
			Payroll Deduction

B.	Full Name (Last, First, Middle Initial) Ralph Pepe		Date of Receipt
	Mailing Address 125 E.17th Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	New York	NY	10003
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8134
Name of Employer District Council 37, AFSCME		Occupation Real Estate Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="375.00"/>	<input type="text" value="40.00"/>
			Payroll Deduction

C.	Full Name (Last, First, Middle Initial) Elnora Phillips		Date of Receipt
	Mailing Address 110 E 99th Street apt. 12F		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	New York	NY	10029
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8135
Name of Employer Department of Social Services		Occupation Case Worker	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	<input type="text" value="20.00"/>
			Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="110.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 29
(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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.

Full Name (Last, First, Middle Initial)
Deborah Pitts

Mailing Address 4286 Conashaugh Lks

City Milford State PA Zip Code 18337

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

Name of Employer District Council 37, AFSC-ME Occupation Grievance Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt 12 / 31 / 2009

Transaction ID: SA11AI.8136

Amount of Each Receipt this Period 30.00

Payroll Deduction

B.

Full Name (Last, First, Middle Initial)
Togba Porte

Mailing Address PO Box 20346

City Staten Island State NY Zip Code 10302

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

Name of Employer Local 420 AFSCME AFL-CIO Occupation Vice President- Local 420

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 12 / 31 / 2009

Transaction ID: SA11AI.8137

Amount of Each Receipt this Period 20.00

Payroll Deduction

C.

Full Name (Last, First, Middle Initial)
Walthene Primus

Mailing Address 137-29 Bedell Street

City Springfield Grdns State NY Zip Code 11413

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

Name of Employer District Council 37, AFSC-ME Occupation Grievance Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 31 / 2009

Transaction ID: SA11AI.8138

Amount of Each Receipt this Period 40.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► 90.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 29
(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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.

Full Name (Last, First, Middle Initial)
Sheila Rabb

Mailing Address 219-18 Alecia ave

City State Zip Code
Laurelton NY 11413

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

Name of Employer District Council 37, AFSC-ME Occupation Council Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.8139

Amount of Each Receipt this Period
16.00

Payroll Deduction

B.

Full Name (Last, First, Middle Initial)
Wendell Reid

Mailing Address 29 Marion Ave

City State Zip Code
Hartsdale NY 10530

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

Name of Employer District Council 37, AFSC-ME Occupation Council Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.8140

Amount of Each Receipt this Period
20.00

Payroll Deduction

C.

Full Name (Last, First, Middle Initial)
Michael Riggio

Mailing Address 38-24 Corporal Stone S

City State Zip Code
Bayside NY 11361

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

Name of Employer District Council 37, AFSC-ME Occupation Council Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.8141

Amount of Each Receipt this Period
20.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► **56.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 29
(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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.

Full Name (Last, First, Middle Initial)
Lillian Roberts

Mailing Address 2373 Broadway

City State Zip Code
New York NY 10024

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

Name of Employer District Council 37, AFSC-ME Occupation Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2860.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.8142

Amount of Each Receipt this Period
220.00

Payroll Deduction

B.

Full Name (Last, First, Middle Initial)
Edward Rodriquez

Mailing Address 2 Mountain View Dr

City State Zip Code
Thiells NY 10984

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

Name of Employer District Council 37 Local 1549 Occupation President Local 1549

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.8143

Amount of Each Receipt this Period
100.00

Payroll Deduction

C.

Full Name (Last, First, Middle Initial)
Paulette Sher

Mailing Address 381 Edgegrove Avenue

City State Zip Code
Staten Island NY 10312

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

Name of Employer NYC Off Track Betting Occupation Betting Clerk

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.8144

Amount of Each Receipt this Period
40.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► **360.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 29
	<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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Jose Sierra	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 130 South Highland	Transaction ID: SA11AI.8145
	City State Zip Code Ossining NY 10562	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction
	Name of Employer District Council 37, AFSC-ME Occupation Division Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 560.00	

B.	Full Name (Last, First, Middle Initial) Kyle Simmons	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 1114 Knollwood Drive	Transaction ID: SA11AI.8146
	City State Zip Code Tobyhanna PA 18466	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction
	Name of Employer District Council 37, AFSC-ME Occupation Grievance Representative Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) Yvonne Singh	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 501 E 145th St	Transaction ID: SA11AI.8147
	City State Zip Code Bronx NY 10454	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction
	Name of Employer Triboro Bridge & Tunnel Auth. Occupation Clerical Assoc. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	▶	80.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 29
(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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.

Full Name (Last, First, Middle Initial)
David Stevens

Mailing Address 23 Water Grant St

City State Zip Code
Yonkers NY 10701

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

Name of Employer Board of Higher Ed. State Occupation INFO TECH SR. ASSOCIATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 516.88

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.8148

Amount of Each Receipt this Period
39.76

Payroll Deduction

B.

Full Name (Last, First, Middle Initial)
Dennis Sullivan

Mailing Address 94 Buckingham Rd.

City State Zip Code
Yonkers NY 10701

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

Name of Employer District Council 37, AFSC-ME Occupation Director of Research and Negotiations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.8149

Amount of Each Receipt this Period
40.00

Payroll Deduction

C.

Full Name (Last, First, Middle Initial)
Carol Thomas

Mailing Address PO Box 618 Old Chelsea Sta

City State Zip Code
NY NY 10113

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

Name of Employer District Council 37, AFSC-ME Occupation Greivance Rep.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.8150

Amount of Each Receipt this Period
40.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► **119.76**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 29
	<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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Jeffrey Thompson		Date of Receipt
	Mailing Address 1949 McGraw Ave		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Bronx	NY	10462
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8151
Name of Employer NYC Off Track Betting		Occupation MOTOR VEHICLE OPERATOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	<input type="text" value="20.00"/>
			Payroll Deduction

B.	Full Name (Last, First, Middle Initial) Jennifer Torres		Date of Receipt
	Mailing Address 460 Grand Street apr #21g		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	New York	NY	10002
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8152
Name of Employer DC 37 Health & Security		Occupation Confidential Secretary	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="204.00"/>	<input type="text" value="16.00"/>
			Payroll Deduction

C.	Full Name (Last, First, Middle Initial) James Tucciarelli		Date of Receipt
	Mailing Address 361 Mill Rd.		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Staten Island	NY	10306
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8153
Name of Employer District Council 37, AFSC-ME		Occupation Grievance Representative	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="520.00"/>	<input type="text" value="40.00"/>
			Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="76.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 29

(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)

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

A.

Full Name (Last, First, Middle Initial)

Esther Tucker

Mailing Address P.O. Box 934 Lincoln Station

City State Zip Code
New York NY 10037

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

Name of Employer Occupation
District Council 37, AFSC- Grievance Representative
ME

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.8154

Amount of Each Receipt this Period

20.00

Payroll Deduction

B.

Full Name (Last, First, Middle Initial)

Maf Uddin

Mailing Address 161-17 85th Ave

City State Zip Code
Jamaica Hills NY 11432

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

Name of Employer Occupation
District Council 37, AFSC- Treasurer
ME

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

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.8155

Amount of Each Receipt this Period

20.00

Payroll Deduction

C.

Full Name (Last, First, Middle Initial)

Robin Vall

Mailing Address 7508 Bell Blvd
apt 1n

City State Zip Code
Bayside NY 11364

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

Name of Employer Occupation
NY Dept . of Admin. Servi- Clerical Associate
ce

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

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.8156

Amount of Each Receipt this Period

20.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 29
	<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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Martin Velasquez		Date of Receipt
	Mailing Address 96 Wenlock Street		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Staten Island	NY	10303
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8157
Name of Employer NY State Board of Higher Educa		Occupation City Laborer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	<input type="text" value="20.00"/>
			Payroll Deduction

B.	Full Name (Last, First, Middle Initial) Barbara Watkins		Date of Receipt
	Mailing Address 294 Osborn St		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Brooklyn	NY	11212
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8158
Name of Employer NYC ADMINISTRATIVE SERVICES		Occupation CITY CUSTODIAL ASST	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="390.00"/>	<input type="text" value="30.00"/>
			Payroll Deduction

C.	Full Name (Last, First, Middle Initial) Kenneth Wheeler		Date of Receipt
	Mailing Address 1100 Teller Ave. apt 2G		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Bronx	NY	10456
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8159
Name of Employer NYC Parks & Recreation Admin		Occupation Associate Park Service Worker	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	<input type="text" value="20.00"/>
			Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="70.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 29
	<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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Chris Wilgenkamp	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 2415 wolson Ave	Transaction ID: SA11AI.8160
	City State Zip Code Bronx NY 10469	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction
	Name of Employer District Council 37, AFSC-ME Occupation Ast Divison Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) Sheryl Williams	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 475 Willson Avenue Apt 1D	Transaction ID: SA11AI.8161
	City State Zip Code Brooklyn NY 11221	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction
	Name of Employer NYC Finance Administration Occupation COMPUTER ASSOC. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) Wanda Williams	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 25 Roy Lane	Transaction ID: SA11AI.8162
	City State Zip Code Highland NY 12528	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction
	Name of Employer District Council 37, AFSC-ME Occupation Director of Political Action & Legisla Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	▶	60.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 28 / 29	
	(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"/> 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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.

Full Name (Last, First, Middle Initial)
Mercedes Youman

Mailing Address 345 E 93rd St
16h

City State Zip Code
NY NY 10128

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

Name of Employer Occupation
NYC Health Dept. Public Health Nurse

Receipt For: Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.8163

Amount of Each Receipt this Period
40.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	40.00
TOTAL This Period (last page this line number only)	▶	2217.22

**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 29 / 29

<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)

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

Full Name (Last, First, Middle Initial)

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

Mailing Address 1625 L STREET NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement transfer

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB22.8165

Date of Disbursement

12 / 28 / 2009

Amount of Each Disbursement this Period

96164.25

SUBTOTAL of Disbursements This Page (optional)

96164.25

TOTAL This Period (last page this line number only)

96164.25