

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines.

DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

ADDRESS (number and street)

Check if different than previously reported. (ACC)

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

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

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

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

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

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

Election on / / 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 / / through / /

10 / 18 / 2012 through 11 / 26 / 2012

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 Maf Uddin

Signature of Treasurer Maf Uddin *[Electronically Filed]* Date / /

12 / 05 / 2012

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2012"/> | | 48993.05 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 84256.60 | |
| (c) Total Receipts (from Line 19) | 45546.22 | 563116.10 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 129802.82 | 612109.15 |
| 7. Total Disbursements (from Line 31)..... | 84256.60 | 566562.93 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | 45546.22 | 45546.22 |
| 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)

Page 3

Write or Type Committee Name

DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 18 / 2012 To: M M / D D / Y Y Y Y 11 / 26 / 2012

| 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)..... | 3268.22 | 13527.43 |
| (ii) Unitemized | 42278.00 | 549588.67 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 45546.22 | 563116.10 |
| (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) | 45546.22 | 563116.10 |
| 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 Transfers (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))..... ▶ | 45546.22 | 563116.10 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 45546.22 | 563116.10 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated 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..... | 84256.60 | 566562.93 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (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) Allocated 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)) .. | 84256.60 | 566562.93 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 84256.60 | 566562.93 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| 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) | 45546.22 | 563116.10 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 45546.22 | 563116.10 |
| 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 OF 30 |
| <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 (DC37PEOPLE)

A. Darryl Adams
 Full Name (Last, First, Middle Initial)
 Mailing Address 70 Hillside Ave
 City Freeport State NY Zip Code 11520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DC37 Occupation Greivance Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 11 / 26 / 2012
Transaction ID : SA11AI.11251
 Amount of Each Receipt this Period
 200.00
 payroll deduction

B. Jackie Adams
 Full Name (Last, First, Middle Initial)
 Mailing Address 870 Riverdale Dr. #5a
 City New York State NY Zip Code 10032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DC 37 Occupation President of Local 299
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 295.00

Date of Receipt
 11 / 26 / 2012
Transaction ID : SA11AI.11252
 Amount of Each Receipt this Period
 50.00
 payroll deduction

C. Miriam Allen
 Full Name (Last, First, Middle Initial)
 Mailing Address 4322 Claredon Rd
 City Brooklyn State NY Zip Code 11203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYC Board of Higher Ed. State Occupation COLLEGE ADMIN ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt
 11 / 26 / 2012
Transaction ID : SA11AI.11254
 Amount of Each Receipt this Period
 38.46
 payroll deduction

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 108.46 |
| 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 OF 30 |
| | <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 (DC37PEOPLE)

A. Sharon Bankhead
Full Name (Last, First, Middle Initial)

Mailing Address 1065 Dr.M.L.K. Jr. Blvd

City State Zip Code
Bronx NY 10452

FEC ID number of contributing federal political committee.

Name of Employer Occupation
District Council 37 Council Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : SA11AI.11256

Amount of Each Receipt this Period

payroll deduction

B. Peggy Benjamin
Full Name (Last, First, Middle Initial)

Mailing Address 545 w 126th st

City State Zip Code
NY NY 10027

FEC ID number of contributing federal political committee.

Name of Employer Occupation
District Council 37, AFSCME Grievance Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : SA11AI.11257

Amount of Each Receipt this Period

payroll deduction

C. Glen Blacks
Full Name (Last, First, Middle Initial)

Mailing Address 2120 Madison Ave.

City State Zip Code
new york NY 10037

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Local 372 Exec VP of Local 372

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : SA11AI.11258

Amount of Each Receipt this Period

payroll deduction

SUBTOTAL of Receipts This Page (optional).....

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 8 OF 30 |
| | <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 (DC37PEOPLE)

A. Nola Brooker
Full Name (Last, First, Middle Initial)

Mailing Address 1551 UNIONPORT RD
APT 5F

City BRONX State NY Zip Code 10462

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

Name of Employer District Council 37 Occupation Division Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.11260

Amount of Each Receipt this Period
40.00
payroll deduction

B. James Bruni
Full Name (Last, First, Middle Initial)

Mailing Address 22 Brighton 3rd rd

City Brooklyn State NY Zip Code 11235

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

Name of Employer NYC Department of Protection Occupation Construction Laborer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.11262

Amount of Each Receipt this Period
20.00
payroll deduction

C. Judith Burger-Arroyo
Full Name (Last, First, Middle Initial)

Mailing Address 1056 E37th St

City Brooklyn State NY Zip Code 11210

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

Name of Employer District Council 37, AFSCME Occupation Grievance Rep, Local President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2530.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.11263

Amount of Each Receipt this Period
230.00
payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 290.00

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 9 OF 30 |
| | <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 (DC37PEOPLE)

| | | | |
|---|------------------------------------|-------------------|--|
| Full Name (Last, First, Middle Initial) A. Zonnie Butts | | | Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11AI.11264 |
| Mailing Address 363 Dumont Ave | | | Amount of Each Receipt this Period 20.00 payroll deduction |
| City Brooklyn | State NY | Zip Code 11210 | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer NYC Dept Education | Occupation School Aide | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 230.00 | | |

| | | | |
|---|------------------------------------|-------------------|--|
| Full Name (Last, First, Middle Initial) B. Cora Casey | | | Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11AI.11265 |
| Mailing Address 49-57 Crown Street | | | Amount of Each Receipt this Period 20.00 payroll deduction |
| City Brooklyn | State NY | Zip Code 11221 | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer NYC Housing Authority | Occupation Secretary | | |
| 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. Ralph Chappell | | | Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11AI.11266 |
| Mailing Address 374 Murray Ave | | | Amount of Each Receipt this Period 28.00 payroll deduction |
| City Englewood | State NJ | Zip Code 07631 | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer DC 37 | Occupation Attorney | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 201.00 | | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 68.00 |
| 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 OF 30 |
| | <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 (DC37PEOPLE)

A. Carmen Charles
 Full Name (Last, First, Middle Initial)
 Mailing Address 681 Palisade Ave
 City teaneck State NJ Zip Code 07666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer District Council 37, AFSCME Occupation Local President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.11267
 Amount of Each Receipt this Period
 25.00
 payroll deduction

B. Santos Crespo
 Full Name (Last, First, Middle Initial)
 Mailing Address 319 Atkins Ave
 City Brooklyn State NY Zip Code 11208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Local 372 NYC Bd of Ed, AFSCME Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.11270
 Amount of Each Receipt this Period
 10.00
 payroll deduction

C. Francis Curtis
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Beekman St. #8B
 City New York State NY Zip Code 10038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer District Council 37, AFSCME Occupation Program Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.11271
 Amount of Each Receipt this Period
 40.00
 payroll deduction

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 75.00 |
| 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 11 OF 30 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

| | | | | | | | | | | | | |
|---|------------------------------------|---|-------|-------------|-------|---|-------------|----|---|----|---|------|
| Full Name (Last, First, Middle Initial) A. Thomas Custance | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>/</td> <td>26</td> <td>/</td> <td>2012</td> </tr> </table> | M M M | / | D D D | / | Y Y Y Y Y Y | 11 | / | 26 | / | 2012 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | |
| 11 | / | 26 | / | 2012 | | | | | | | | |
| Mailing Address 150-49a 20th Ave | | Transaction ID : SA11Al.11272 | | | | | | | | | | |
| City whitestone | State NY | Zip Code 11357 | | | | | | | | | | |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 200.00 | | | | | | | | | | |
| Name of Employer district council 37 | Occupation unknown | payroll deduction | | | | | | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 205.00 | | | | | | | | | | | |

| | | | | | | | | | | | | |
|---|-------------------------------------|---|-------|-------------|-------|---|-------------|----|---|----|---|------|
| Full Name (Last, First, Middle Initial) B. Michael DeMarco | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>/</td> <td>26</td> <td>/</td> <td>2012</td> </tr> </table> | M M M | / | D D D | / | Y Y Y Y Y Y | 11 | / | 26 | / | 2012 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | |
| 11 | / | 26 | / | 2012 | | | | | | | | |
| Mailing Address 83 Ramblewood Ave | | Transaction ID : SA11Al.11274 | | | | | | | | | | |
| City Staten Island | State NY | Zip Code 10308 | | | | | | | | | | |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 30.00 | | | | | | | | | | |
| Name of Employer District Council 37, AFSCME | Occupation Grievance Representative | payroll deduction | | | | | | | | | | |
| 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. Colleen Detroy | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>/</td> <td>26</td> <td>/</td> <td>2012</td> </tr> </table> | M M M | / | D D D | / | Y Y Y Y Y Y | 11 | / | 26 | / | 2012 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | |
| 11 | / | 26 | / | 2012 | | | | | | | | |
| Mailing Address 5101 39th St apt. b21 | | Transaction ID : SA11Al.11275 | | | | | | | | | | |
| City Woodside | State NY | Zip Code 11104 | | | | | | | | | | |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period 40.00 | | | | | | | | | | |
| Name of Employer District Council 37, AFSCME | Occupation Administrative Assistant | payroll deduction | | | | | | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | | | | | | | | | | | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 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: (check only one) | PAGE 12 OF 30 |
| | <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 (DC37PEOPLE)

| | | | |
|---|-------------|---|---|
| Full Name (Last, First, Middle Initial) A. Connie Etheridge | | | Date of Receipt |
| Mailing Address 123-18 153rd St | | | <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> |
| City Jamaica | State NY | Zip Code 11434 | Transaction ID : SA11AI.11278 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="200.00"/> |
| Name of Employer NYC LAW DEPARTMENT | | | payroll deduction |
| Occupation CLERICAL ASSOCIATE | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ <input type="text" value="220.00"/> | |

| | | | |
|---|-------------|---|---|
| Full Name (Last, First, Middle Initial) B. Isabel Figueroa | | | Date of Receipt |
| Mailing Address 431 E147 Street | | | <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> |
| City Bronx | State NY | Zip Code 10455 | Transaction ID : SA11AI.11279 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="25.00"/> |
| Name of Employer Local 420, AFSCME AFL-CIO | | | payroll deduction |
| Occupation Vice President | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ <input type="text" value="220.00"/> | |

| | | | |
|---|-------------|---|---|
| Full Name (Last, First, Middle Initial) C. Henry Garrido | | | Date of Receipt |
| Mailing Address 91 Gotham Ave | | | <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> |
| City Elmont | State NY | Zip Code 11003 | Transaction ID : SA11AI.11281 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="40.00"/> |
| Name of Employer District Council 37 | | | payroll deduction |
| Occupation Asst Assoc Director of DC37 | | | |
| 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"/> | |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="85.00"/> |
| 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 13 OF 30 |
| | <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 (DC37PEOPLE)

A. Oliver Gray
 Full Name (Last, First, Middle Initial)
 Mailing Address 655 E. 14th Street
 City New York State NY Zip Code 10009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer District Council 37, AFSCME Occupation Associate Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 960.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.11283
 Amount of Each Receipt this Period 160.00
 payroll deduction

B. Stephanie Harris
 Full Name (Last, First, Middle Initial)
 Mailing Address 4223 Hill Ave
 City Bronx State NY Zip Code 10466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYC Parks & Recreation Occupation Recreation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.11284
 Amount of Each Receipt this Period 30.00
 payroll deduction

C. Mr. Tyler Hemingway
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Sunflow Terrace
 City Middletown State NY Zip Code 10941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer District Council 37 Occupation Asst Division Director - Hosp.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.11285
 Amount of Each Receipt this Period 70.00
 payroll deduction

SUBTOTAL of Receipts This Page (optional).....▶ 260.00
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 14 OF 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
 DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

A. Dennis Ifill
 Full Name (Last, First, Middle Initial)
 Mailing Address 257-37 149th Ave
 City Rosedale State NY Zip Code 11422
 FEC ID number of contributing federal political committee. C
 Name of Employer City of NY-Rent & Rehab Adm Occupation Local President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.11288
 Amount of Each Receipt this Period 40.00
 payroll deduction

B. Barbara Ingram-Edmonds
 Full Name (Last, First, Middle Initial)
 Mailing Address 34 douth Mill Rd
 City West Winsor State NJ Zip Code 08550
 FEC ID number of contributing federal political committee. C
 Name of Employer District Council 37, AFSCME Occupation Director of Field Operators
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 960.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.11289
 Amount of Each Receipt this Period 160.00
 payroll deduction

C. Dorothy Jelks
 Full Name (Last, First, Middle Initial)
 Mailing Address 340 Williams
 City Brooklyn State NY Zip Code 11207
 FEC ID number of contributing federal political committee. C
 Name of Employer NYC FIRE DEPARTMENT Occupation CLERICAL ASSOCIATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.11290
 Amount of Each Receipt this Period 20.00
 payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 OF 30 |
| | <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 (DC37PEOPLE)

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Gerald Johnson | | Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11AI.11292 |
| Mailing Address 1701 Albermarle Rd | | Amount of Each Receipt this Period 25.00 payroll deduction |
| City Brooklyn | State NY | Zip Code 11226 |
| FEC ID number of contributing federal political committee. C | Name of Employer DC 37 | Occupation Representative |
| 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. Beresford Julien | | Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11AI.11293 |
| Mailing Address 2061 Fulton Street | | Amount of Each Receipt this Period 20.00 payroll deduction |
| City Brooklyn | State NY | Zip Code 11233 |
| FEC ID number of contributing federal political committee. C | Name of Employer NYC Parks Dept. | Occupation City Park worker |
| 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. Barbara Kairson | | Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11AI.11295 |
| Mailing Address 43 Hamilton Terrence | | Amount of Each Receipt this Period 20.00 payroll deduction |
| City New York | State NY | Zip Code 10031 |
| FEC ID number of contributing federal political committee. C | Name of Employer District Council 37, AFSCME | Occupation Director of DC 37 Education Fund |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 215.00 | |

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|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 65.00 |
| 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 16 OF 30 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

| | | | | | | | | | | | | |
|--|---|---|-------|-------------|-------|---|-------------|----|---|----|---|------|
| Full Name (Last, First, Middle Initial) A. Madonna Knight | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>/</td> <td>26</td> <td>/</td> <td>2012</td> </tr> </table> | M M M | / | D D D | / | Y Y Y Y Y Y | 11 | / | 26 | / | 2012 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | |
| 11 | / | 26 | / | 2012 | | | | | | | | |
| Mailing Address 282 E 35th Street | | Transaction ID : SA11AI.11296 | | | | | | | | | | |
| City Brooklyn | State NY | Zip Code 11203 | | | | | | | | | | |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 40.00 | | | | | | | | | | | |
| Name of Employer District Council 37, AFSCME | Occupation Council Representative | payroll deduction | | | | | | | | | | |
| 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. Clifford Koppelman | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>/</td> <td>26</td> <td>/</td> <td>2012</td> </tr> </table> | M M M | / | D D D | / | Y Y Y Y Y Y | 11 | / | 26 | / | 2012 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | |
| 11 | / | 26 | / | 2012 | | | | | | | | |
| Mailing Address 1270 E 19 Street, #1J | | Transaction ID : SA11AI.11297 | | | | | | | | | | |
| City Brooklyn | State NY | Zip Code 11230 | | | | | | | | | | |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 80.00 | | | | | | | | | | | |
| Name of Employer District Council 37, AFSCME | Occupation Grievance Representative | payroll deduction | | | | | | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 480.00 | | | | | | | | | | | |

| | | | | | | | | | | | | |
|--|---|---|-------|-------------|-------|---|-------------|----|---|----|---|------|
| Full Name (Last, First, Middle Initial) C. Sabri Kurun | | Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td>/</td> <td>26</td> <td>/</td> <td>2012</td> </tr> </table> | M M M | / | D D D | / | Y Y Y Y Y Y | 11 | / | 26 | / | 2012 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | |
| 11 | / | 26 | / | 2012 | | | | | | | | |
| Mailing Address 1134 William Court | | Transaction ID : SA11AI.11298 | | | | | | | | | | |
| City Brooklyn | State NY | Zip Code 11235 | | | | | | | | | | |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 40.00 | | | | | | | | | | | |
| Name of Employer District Council 37 | Occupation IT Programmer | payroll deduction | | | | | | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 210.00 | | | | | | | | | | | |

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| SUBTOTAL of Receipts This Page (optional).....▶ | 160.00 |
| 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 OF 30 |
| | <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 (DC37PEOPLE)

| | | |
|---|------------------------------------|--|
| Full Name (Last, First, Middle Initial) A. Ramona Lacen | | Date of Receipt M M / D D / Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11Al.11299 |
| Mailing Address 431 54 St | | Amount of Each Receipt this Period 20.00 payroll deduction |
| City brooklyn | State NY | Zip Code 11220 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer NYC HHC | Occupation enroll rep | |
| 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) B. Jane Latour | | Date of Receipt M M / D D / Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11Al.11300 |
| Mailing Address 72 Seaman apt 6b | | Amount of Each Receipt this Period 40.00 payroll deduction |
| City New York | State NY | Zip Code 10034 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer District Council 37, AFSCME | Occupation Associate Editor | |
| 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) C. Eugene Lawrence | | Date of Receipt M M / D D / Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11Al.11301 |
| Mailing Address 2760 Grand Concourse Apt 1B | | Amount of Each Receipt this Period 20.00 payroll deduction |
| City Bronx | State NY | Zip Code 10458 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer NYC Parks & Recreation Admin | Occupation Associate Park Service Worker | |
| 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).....▶ | 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: (check only one) | PAGE 18 OF 30 |
| | <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 (DC37PEOPLE)

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Marva Lewis | | Date of Receipt |
| Mailing Address 5700 Arlington Ave 9u | | <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> |
| City Riverdale | State NY | Zip Code 10471 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.11302 |
| Name of Employer District Council 37, AFSCME | Occupation 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" value="40.00"/> |
| | <input type="text" value="240.00"/> | payroll deduction |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Cory McCaskey | | Date of Receipt |
| Mailing Address 1235 Woodycrest Ave | | <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> |
| City Bronx | State NY | Zip Code 10452 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.11305 |
| Name of Employer NYC HHC | Occupation Patient Care Assoc | 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="25.00"/> |
| | <input type="text" value="220.00"/> | payroll deduction |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Mary McCloud | | Date of Receipt |
| Mailing Address 100 Asch Loop | | <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> |
| City Bronx | State NY | Zip Code 10475 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : SA11AI.11306 |
| Name of Employer NYC HHC | Occupation Patient Care Assoc | 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="25.00"/> |
| | <input type="text" value="220.00"/> | payroll deduction |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="90.00"/> |
| 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 19 OF 30 |
| | <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 (DC37PEOPLE)

A. Terrence Miller
Full Name (Last, First, Middle Initial)
Mailing Address 417 Prospect Pl
City Brooklyn State NY Zip Code 11238
FEC ID number of contributing federal political committee. C
Name of Employer NYC Police Department Occupation Senior Police Admin. Aide
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 220.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.11307
Amount of Each Receipt this Period 200.00
payroll deduction

B. Edwin Negrón
Full Name (Last, First, Middle Initial)
Mailing Address 80 East 110th St
City New York State NY Zip Code 10029
FEC ID number of contributing federal political committee. C
Name of Employer City of New York Admin Service Occupation CITY CUSTODIAL ASST
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 550.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.11310
Amount of Each Receipt this Period 50.00
payroll deduction

C. Ralph Pepe
Full Name (Last, First, Middle Initial)
Mailing Address 125 E.17th Street
City New York State NY Zip Code 10003
FEC ID number of contributing federal political committee. C
Name of Employer District Council 37, AFSCME Occupation Real Estate Manager
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 430.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.11313
Amount of Each Receipt this Period 40.00
payroll deduction

SUBTOTAL of Receipts This Page (optional)..... 110.00
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 20 OF 30 |
| | <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 (DC37PEOPLE)

A. Deborah Pitts
 Full Name (Last, First, Middle Initial)
 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, AFSCME Occupation Grievance Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.11314
 Amount of Each Receipt this Period 30.00
 payroll deduction

B. Togba Porte
 Full Name (Last, First, Middle Initial)
 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 ▼ 275.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.11317
 Amount of Each Receipt this Period 25.00
 payroll deduction

C. Walthene Primus
 Full Name (Last, First, Middle Initial)
 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, AFSCME Occupation Grievance Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.11318
 Amount of Each Receipt this Period 40.00
 payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 95.00
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 21 OF 30 |
| | <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 (DC37PEOPLE)

A. Darryl Ramsey
Full Name (Last, First, Middle Initial)

Mailing Address 189-10 Williamson Ave.

City Springflds Grd State NY Zip Code 11413

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

Name of Employer DC 37 Occupation Grievance Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.11320

Amount of Each Receipt this Period
20.00
payroll deduction

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

Mailing Address 29 Marion Ave

City Hartsdale State NY Zip Code 10530

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

Name of Employer District Council 37, AFSCME Occupation Council Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.11321

Amount of Each Receipt this Period
45.00
payroll deduction

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

Mailing Address 38-24 Corporal Stone S

City Bayside State NY Zip Code 11361

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

Name of Employer District Council 37, AFSCME Occupation Council Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.11322

Amount of Each Receipt this Period
40.00
payroll deduction

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 105.00 |
| 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 OF 30 |
| | <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 (DC37PEOPLE)

| | | | |
|--|--------------------------------------|-------------------|---|
| Full Name (Last, First, Middle Initial) A. Lillian Roberts | | | Date of Receipt |
| Mailing Address 2373 Broadway | | | <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> |
| City | State | Zip Code | Transaction ID : SA11AI.11323 |
| New York | NY | 10024 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="440.00"/> |
| Name of Employer | Occupation | payroll deduction | |
| District Council 37, AFSCME | Executive Director | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="2640.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|--------------------------------------|-------------------|---|
| Full Name (Last, First, Middle Initial) B. Edward Rodriguez | | | Date of Receipt |
| Mailing Address 2 Mountain View Dr | | | <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> |
| City | State | Zip Code | Transaction ID : SA11AI.11324 |
| Thiells | NY | 10984 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="100.00"/> |
| Name of Employer | Occupation | payroll deduction | |
| District Council 37 Local 1549 | President Local 1549 | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="1100.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|-------------------------------------|-------------------|---|
| Full Name (Last, First, Middle Initial) C. Alma Roper | | | Date of Receipt |
| Mailing Address 115-24 165th Street | | | <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> |
| City | State | Zip Code | Transaction ID : SA11AI.11325 |
| Jamaica | NY | 11434 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | | <input type="text" value="20.00"/> |
| Name of Employer | Occupation | payroll deduction | |
| district Council 37 | Representative | | |
| Receipt For: | Aggregate Year-to-Date ▼ | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="220.00"/> | | |
| <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="560.00"/> |
| 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 23 OF 30 |
| | <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 (DC37PEOPLE)

A. K G Sabater
Full Name (Last, First, Middle Initial)

Mailing Address 1566 Macombs Rd

City State Zip Code
Bronx NY 10452

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

Name of Employer Occupation
Dept. of Social Services Case Workers

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2012
Transaction ID : SA11AI.11326

Amount of Each Receipt this Period
20.00
payroll deduction

B. Indira Seenauth-Fraser
Full Name (Last, First, Middle Initial)

Mailing Address 107-05 123rd Street

City State Zip Code
Richmond Hill NY 11419

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

Name of Employer Occupation
DC 37 Local Staff

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2012
Transaction ID : SA11AI.11328

Amount of Each Receipt this Period
25.00
payroll deduction

C. Jose Sierra
Full Name (Last, First, Middle Initial)

Mailing Address 130 South Highland

City State Zip Code
Ossining NY 10562

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

Name of Employer Occupation
District Council 37, AFSCME Division Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2012
Transaction ID : SA11AI.11329

Amount of Each Receipt this Period
80.00
payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

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 24 OF 30 |
| | <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 (DC37PEOPLE)

| | | | |
|---|--|-------------------|---|
| Full Name (Last, First, Middle Initial) A. Kyle Simmons | | | Date of Receipt |
| Mailing Address 1114 Knollwood Drive | | | <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> |
| City Tobyhanna | State PA | Zip Code 18466 | Transaction ID : SA11AI.11330 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="200.00"/> |
| Name of Employer District Council 37, AFSCME | Occupation Grievance Representative | | Aggregate Year-to-Date ▼ <input type="text" value="230.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|------------------------------------|-------------------|---|
| Full Name (Last, First, Middle Initial) B. John Smith | | | Date of Receipt |
| Mailing Address P.O.BOX 199 | | | <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> |
| City BRONX | State NY | Zip Code 10451 | Transaction ID : SA11AI.11331 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="200.00"/> |
| Name of Employer City University of New York | Occupation City Custodial Asst. | | Aggregate Year-to-Date ▼ <input type="text" value="220.00"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

payroll deduction

| | | | |
|---|---------------------------------------|-------------------|---|
| Full Name (Last, First, Middle Initial) C. David Stevens | | | Date of Receipt |
| Mailing Address 23 Water Grant St | | | <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> |
| City Yonkers | State NY | Zip Code 10701 | Transaction ID : SA11AI.11332 |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/> | | | Amount of Each Receipt this Period <input type="text" value="39.76"/> |
| Name of Employer Board of Higher Ed. State | Occupation INFO TECH SR. ASSOCIATE | | Aggregate Year-to-Date ▼ <input type="text" value="437.36"/> |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

payroll deduction

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="79.76"/> |
| 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 OF 30 |
| | (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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Barbra Terrelonge | | Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11AI.11334 |
| Mailing Address 38 Hull Street | | Amount of Each Receipt this Period 80.00 payroll deduction |
| City Brooklyn | State NY | Zip Code 11233 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer District Council 37 | Occupation Asst Director Research Dept. | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 480.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. James Tucciarelli | | Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11AI.11335 |
| Mailing Address 361 Mill Rd. | | Amount of Each Receipt this Period 40.00 payroll deduction |
| City Staten Island | State NY | Zip Code 10306 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer District Council 37, AFSCME | Occupation Grievance Representative | |
| 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. Esther Tucker | | Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11AI.11336 |
| Mailing Address P.O. Box 934 Lincoln Station | | Amount of Each Receipt this Period 20.00 payroll deduction |
| City New York | State NY | Zip Code 10037 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer District Council 37, ASFCME | Occupation Grievance Representative | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 210.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 140.00 |
| 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 OF 30 |
| | <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 (DC37PEOPLE)

A. Maf Uddin
Full Name (Last, First, Middle Initial)

Mailing Address 161-17 85th Ave

City Jamiaca Hills State NY Zip Code 11432

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

Name of Employer District Council 37, AFSCME Occupation Treasurer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.11338

Amount of Each Receipt this Period 40.00
payroll deduction

B. Robin Vall
Full Name (Last, First, Middle Initial)

Mailing Address 7508 Bell Blvd apt 1n

City Bayside State NY Zip Code 11364

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

Name of Employer NY Dept . of Admin. Service Occupation Clerical Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.11339

Amount of Each Receipt this Period 20.00
payroll deduction

C. Cesar Vasquez
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 969

City New York State NY Zip Code 10029

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

Name of Employer NYC Board of Education Occupation Community Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.11340

Amount of Each Receipt this Period 20.00
payroll deduction

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: (check only one) | PAGE 27 OF 30 |
| | <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 (DC37PEOPLE)

| | | | |
|---|---|-------------------|---|
| Full Name (Last, First, Middle Initial) A. Martin Velasquez | | | Date of Receipt |
| Mailing Address 96 Wenlock Street | | | <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> |
| City Staten Island | State NY | Zip Code 10303 | Transaction ID : SA11AI.11341 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 20.00 | | |
| Name of Employer NY State Board of Higher Educa | Occupation City Laborer | payroll deduction | |
| 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) B. Yensenia Villanueva | | | Date of Receipt |
| Mailing Address 90 East End Ave | | | <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> |
| City New York | State NY | Zip Code 10028 | Transaction ID : SA11AI.11343 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 40.00 | | |
| Name of Employer DC 37 | Occupation Council Representative | payroll deduction | |
| 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) C. Barbara Watkins | | | Date of Receipt |
| Mailing Address 294 Osborn St | | | <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> |
| City Brooklyn | State NY | Zip Code 11212 | Transaction ID : SA11AI.11344 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 32.00 | | |
| Name of Employer NYC ADMINISTRATIVE SERVICES | Occupation CITY CUSTODIAL ASST | payroll deduction | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 352.00 | | |

| | |
|--|-------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 92.00 |
| 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 28 OF 30 |
| | <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 (DC37PEOPLE)

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Kenneth Wheeler | | Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11AI.11346 |
| Mailing Address 1100 Teller Ave. apt 2G | | Amount of Each Receipt this Period 20.00 payroll deduction |
| City Bronx | State NY | Zip Code 10456 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer NYC Parks & Recreation Admin | Occupation Associate Park Service Worker | |
| 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. Chris Wilgenkamp | | Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11AI.11347 |
| Mailing Address 2415 wolson Ave | | Amount of Each Receipt this Period 40.00 payroll deduction |
| City Bronx | State NY | Zip Code 10469 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer District Council 37, AFSCME | Occupation Asst Divison Director | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 240.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Wanda Williams | | Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11AI.11349 |
| Mailing Address 25 Roy Lane | | Amount of Each Receipt this Period 40.00 payroll deduction |
| City Highland | State NY | Zip Code 12528 |
| FEC ID number of contributing federal political committee. C | | |
| Name of Employer District Council 37, AFSCME | 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 ▼ 240.00 | |

| | |
|--|--------|
| 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: PAGE 29 OF 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
 DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

A. Mercedes Youman
 Full Name (Last, First, Middle Initial)
 Mailing Address 345 E 93rd St
 16h
 City NY State NY Zip Code 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYC Health Dept. Occupation Public Health Nurse
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.11350
 Amount of Each Receipt this Period
 40.00
 payroll deduction

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 40.00 |
| TOTAL This Period (last page this line number only).....▶ | 3268.22 |

**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)

| | | | | | |
|------------------------------|--|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 (DC37PEOPLE)

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED | | Date of Disbursement MM / DD / YYYY 10 / 25 / 2012 |
| Mailing Address 1625 L STREET NW | | Transaction ID : SB22.11355 |
| City WASHINGTON State DC Zip Code 20036 | Amount of Each Disbursement this Period 65243.88 | |
| Purpose of Disbursement transfer | Candidate Name | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED | | Date of Disbursement MM / DD / YYYY 11 / 21 / 2012 |
| Mailing Address 1625 L STREET NW | | Transaction ID : SB22.11356 |
| City WASHINGTON State DC Zip Code 20036 | Amount of Each Disbursement this Period 19012.72 | |
| Purpose of Disbursement transfer | Candidate Name | Category/Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|------------------|---|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement MM / DD / YYYY |
| Mailing Address | | Amount of Each Disbursement this Period |
| City State Zip Code | Category/Type | |
| Purpose of Disbursement | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 84256.60 |
| TOTAL This Period (last page this line number only).....▶ | 84256.60 |