10/21/2012 15 : 14

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FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

| 1. | (a) Name of Individual, | Organization or Corporation Healthcare Workers East | anig Quanned Nonpi | ont outporations | |
|--|---|--|---------------------------------|----------------------------------|---------------------|
| | (b) Address (number ar 330 West 42nd Street | d street) check if different than previously | reported | | |
| | (c) City, State and ZIP | Code | | 3. FEC Ide | entification Number |
| | New York | NY | 10036 | | |
| 2. | Corporate filers only | | 10000 | C C900 | 13426 |
| ۷. | Corporate mers only | Is the filer a qualified nonprofit corporation? | ☐ Yes 🔀 I | | 13420 |
| | Individual filers only | Name of Employer | | Occupation | |
| | (a) April 1 July 1 Octob | THROUGH | 24-Hour Report 48-Hour Report | | |
| | | PENDENT EXPENDITURES | | | 0.00 54589.25 |
| sug | ggestion of, any candidate o | that the independent expenditures reported herein were authorized committee or agent of either, or any political tion) I certify that the corporation is a qualified nonprofit | party committee or its agen | t. In addition, (if the indepen- | |
| TYPE OR PRINT NAME OF PERSON COMPLETING FORM | | F PERSON COMPLETING FORM | SIGNATURE | [Electronically Filed] | DATE |
| Alexander Rabb | | | Alexander Rabb | | 10/21/2012 |
| | NOTE: Submissi | on of false, erroneous or incomplete information may su | bject the person signing this | report to the penalties of 2 U | .S.C. §437g. |

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

5PG021 FEC **Schedule 5** (REV. 09/2005)

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 OF 3 FOR LINE 7 OF FORM 5

| NAME OF FILER (In Full) 1199SEIU United Healthcare Workers E | East | | | | • | | |
|---|--|-----------------------|--------------------|--|-------------------------------------|--|--|
| Full Name (Last, First, Middle Initial Food Trends |) of Payee | | | Date | / D D / | Y | |
| Mailing Address 56 East 41st Stre | et | | | 10 Amount | 20 | 2012 | |
| City New York | State NY | Zip Code 10017 | | | 7-1-1-2 | 7382.70 | |
| Purpose of Expenditure Food | | Category/ Type 007 | Offi | Transaction | on ID : F57.4266 House Senate | State: | |
| Name of Federal Candidate Suppor Barack Obama | ame of Federal Candidate Supported or Opposed by Expenditure: Barack Obama | | | eck One: | X President X Support | District: | |
| Calendar Year-To-Date Per Ele for Office S | | 345737.31 | Disk | oursement Fo 2012 Other (| | General | |
| | full Name (Last, First, Middle Initial) of Payee | | | | | | |
| Giorgio's Caterers Mailing Address 14002 McNulty Re | oad | | | 10 | 20 | 2012 | |
| City Philadelphia | State PA | Zip Code 19154 | | Amount | 1 | 187.50 | |
| Purpose of Expenditure Food | | Category/ Type 007 | Offi | Transaction ice Sought: | on ID : F57.4269 House Senate | 9 State: | |
| Name of Federal Candidate Suppor Barack Obama | ame of Federal Candidate Supported or Opposed by Expenditure: | | | eck One: | X President X Support | District: | |
| | Calendar Year-To-Date Per Election for Office Sought | | | Disbursement For: Primary General 2012 Other (specify) | | | |
| Full Name (Last, First, Middle Initia RVP Tours | l) of Payee | | | Date | / D D / | Y = Y = Y = Y | |
| Mailing Address 38-11 Ditmars Blv | | | | 10 | | | |
| City Astoria | State NY | Zip Code 11105 | | Transacti | on ID : F57.427 | 32500.00 1 | |
| Purpose of Expenditure Vehicle rental | | Category/ Type 007 | Offic | ce Sought: | House Senate | State: | |
| Name of Federal Candidate Suppor Barack Obama | ted or Opposed by Expendi | iture: | Che | eck One: | X President X Support | Oppose | |
| Calendar Year-To-Date Per Ele for Office So | | 323648.06 | Dist | bursement Fo 2012 Other (| Primary (specify) | General | |
| (a) SUBTOTAL of Itemized Independent | dent Expenditures | | | | 7 | 40070.20 | |
| (b) SUBTOTAL of Unitemized Indep | endent Expenditures | | ······ > | | 7 7 | | |
| (c) TOTAL Independent Expenditure (carry total from last page | | | ······ • | | 7 | | |

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 3 OF 3 FOR LINE 7 OF FORM 5

| AME OF FILER (In Full) | | | | | | |
|--|------------------------|-----------------------|-------------|---------------------|--------------------|-----------------|
| 199SEIU United Healthcare Workers Eas | st | | | | | |
| | | | | | | |
| | | | | | | |
| Full Name (Last, First, Middle Initial) | of Payee | | Date | | | |
| SEIU PA State Council | | | | M = M / | D | Y - Y - Y - Y |
| Mailing Address 1500 N. Second Str | eet 2nd Floor | | | 10 | 20 | 2012 |
| 1000 14. 0000114 01. | cot, zna i looi | | Amo | unt | | |
| City | State | Zip Code | | | | |
| Harrisburg | PA | 17102 | | 7 | 7 | 10800.00 |
| | 171 | | | | D : F57.427 | |
| Purpose of Expenditure Vehicle rental | | Category/ Type 007 | Office Sou | ight: | House | State: |
| | | | | Y | Senate | District: |
| Name of Federal Candidate Supporter Barack Obama | d or Opposed by Expend | iture: | | | President | |
| Bardok Obama | | | Check On | e: 🔼 | Support | Oppose |
| Calendar Year-To-Date Per Elect | ion | | Disbursem | | Primary | X General |
| for Office Sou | | 338167.11 | | 2012 Other (spec | cify) | |
| Full Name (Last First Middle Law 1) | of Dayes | | | | | |
| Full Name (Last, First, Middle Initial) | of Payee | | Date | | | |
| SVM Cards | | | | M = M / | D D / | 2042 |
| Mailing Address 185 N. Franklin Stre | et 5th Floor | | | 10 | 20 | 2012 |
| | | | Amo | unt | | |
| City | State | Zip Code | | | | 3719.05 |
| Chicago | IL | 60606 | Tro | negation II | D : F57.4273 | |
| Purpose of Expenditure | | Category/ 007 | Office Sou | | House | State: |
| Gas cards | | Type 007 | | | Senate | State. |
| Name of Federal Candidate Supporte | d or Opposed by Expend | liture: | | X | President | District: |
| Barack Obama | а от оррозса ву Ехрепо | illuio. | Check On | e: X | Support | Oppose |
| | | | | | | |
| Calendar Year-To-Date Per Electi | on | 327367.11 | Disbursem | ent For: 2012 | Primary | Meneral General |
| for Office Soug | ght | 327307.11 | | Other (spec | cify) | |
| Full Name (Last, First, Middle Initial) | of Payee | | Date | <u> </u> | | |
| | | | | M = M / | D D / | |
| Mailing Address | | | | M - M / | | 1 |
| Mailing Address | | | | | | |
| | | | Amo | unt | | |
| City | State | Zip Code | | | | |
| | | | | 7 | , | |
| Purpose of Expenditure | | Category/ | Office Sou | ght: | House | State: |
| | | Туре | | | Senate | District: |
| Name of Federal Candidate Supporte | d or Opposed by Expend | liture: | | | President | |
| | | | Check One | e: | Support | Oppose |
| Oolondon Vees Te B B E | | | Disbursem | ent For | Primary | General |
| Calendar Year-To-Date Per Electi for Office Sough | | | | | | Gonoral |
| | 7 | | | Other (spec | ^{11y} / ▶ | |
| (a) CURTOTAL of Bosch 111 | at Francisco | | | - | | |
| (a) SUBTOTAL of Itemized Independe | nt Expenditures | | ·· } | 7 | 7 | 14519.05 |
| | | | | | | |
| (b) SUBTOTAL of Unitemized Indepen | dent Expenditures | | ·· • | | | |
| | | | | | , | |
| (c) TOTAL Independent Expenditures. | | | • | | | 54589.25 |
| (carry total from last page fo | rward to Line 7) | | | , | , | |