

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 LOCAL 32BJ NY/NJ AMERICAN DREAM FUND		3. FEC Identification Number C 90013293
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 25 WEST 18TH STREET, FIFTH FLOOR		
(c) City, State and ZIP Code NEW YORK, NY 10011		
2. Corporate filers only Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☒ October 15 Quarterly Report
☐ January 31 Year-End Report
- ☐ 24-Hour Report
☐ 48-Hour Report

b) Is this Report an amendment? Yes ☒ No ☐

5. COVERING PERIOD: FROM

07 01 2012
 THROUGH
 9 30 2012

6. TOTAL CONTRIBUTIONS **26,718.55**

7. TOTAL INDEPENDENT EXPENDITURES **26,718.55**

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

CORINNE LOCKE

2/5/13

NOTE: Submission of false, erroneous or incomplete information may subject 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

SCHEDULE 5-A **ITEMIZED RECEIPTS**

PAGE 1 OF 1

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 FILER (In Full)
LOCAL 32BJ NY/NJ AMERICAN DREAM FUND

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

SEIU LOCAL 32BJ

Date of Receipt

Mailing Address

25 WEST 18TH STREET

08 08 2012

City

NYC

State

NY

Zip Code

10011

Amount of Each Receipt this Period

FEC ID number of contributing
federal political committee.

C

26,718.55

Name of Employer

Occupation

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

Mailing Address

Date of Receipt

City

State

Zip Code

Amount of Each Receipt this Period

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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

Mailing Address

Date of Receipt

City

State

Zip Code

Amount of Each Receipt this Period

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

D. Full Name (Last, First, Middle Initial)

Mailing Address

Date of Receipt

City

State

Zip Code

Amount of Each Receipt this Period

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

SUBTOTAL of Receipts This Page (optional) ▶

TOTAL This Period (last page carry total to Line 6) ▶

26,718.55

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**PAGE **1** OF **6**
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

LOCAL 32BJ NY/NJ AMERICAN DREAM FUND

Full Name (Last, First, Middle Initial) of Payee

DUNKIN DONUTS

Date

07 21 2012

Mailing Address

101 WEST 23RD STREET

Amount

330.32

City

NYCState
NYZip Code
10011

Purpose of Expenditure

BREAKFAST FOR BUS TRIPCategory/
Type **02**

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMACalendar Year-To-Date Per Election
for Office Sought**26718.55**

Disbursement For:

☐ Primary☒ General☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

COACH BUSES

Date

07 21 2012

Mailing Address

160 S. ROUTE 17

Amount

4185.00

City

PARAMUSState
NJZip Code
07652

Purpose of Expenditure

BUS RENTALCategory/
Type **02**

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BRACK OBAMACalendar Year-To-Date Per Election
for Office Sought**26,718.55**

Disbursement For:

☐ Primary☒ General☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

FOOD EMPORIUM

Date

7 20 2012

Mailing Address

10 UNION SQUARE EAST

Amount

134.30

City

NEW YORKState
NYZip Code
1003

Purpose of Expenditure

SNACK FOR BUS TRIPCategory/
Type **02**

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMACalendar Year-To-Date Per Election
for Office Sought**26,718.55**

Disbursement For:

☐ Primary☒ General☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....

4649.62

(b) SUBTOTAL of Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures.....
(carry total from last page forward to Line 7)**26,718.55**

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**PAGE **2** OF **6**
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

LOCAL 32BJ NY/NJ AMERICAN DREAM FUNDFull Name (Last, First, Middle Initial) of Payee
OUR PARADISE PIZZA

Date

7 21 2012

Mailing Address

12 WEST 18TH STREET

Amount

100.02

City

NEW YORK

State

NY

Zip Code

10011

Purpose of Expenditure

SNACKS FOR BUS TRIPCategory/
Type **02**

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMACalendar Year-To-Date Per Election
for Office Sought**26,718.55**

Disbursement For:

☐ Primary☒ General☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

BOSTON MARKET

Date

7 28 2012

Mailing Address

1301 SOUTH CHRISTOPHER COLUMBUS BOULEVARD

Amount

2849.00

City

PHILADELPHIA

State

PA 19147

Zip Code

Purpose of Expenditure

LUNCH FOR BUS TRIPCategory/
Type **02**

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMACalendar Year-To-Date Per Election
for Office Sought**26,718.55**

Disbursement For:

☐ Primary☒ General☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

CBL ADVERTISING NOV INC

Date

9 27 2012

Mailing Address

2313 PENN AVE

Amount

4,774.43

City

WEST LAWN

State

PA

Zip Code

19609

Purpose of Expenditure

T-SHIRTS PRINTINGCategory/
Type **02**

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMACalendar Year-To-Date Per Election
for Office Sought**26,718.55**

Disbursement For:

☐ Primary☒ General☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....

7,723.45

(b) SUBTOTAL of Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures.....
(carry total from last page forward to Line 7)**26,718.55**

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**PAGE **3** OF **8**
FOR LINE 7 OF FORM 5

NAME OF FILER (in Full)

LOCAL 32BJ NY/NJ AMERICAN DREAM FUND

Full Name (Last, First, Middle Initial) of Payee

ACADEMY

Date

8 18 2012

Mailing Address

PO BOX 1410, 111 PATERSON AVENUE

Amount

1,097.00

City

HOBOKEN

State

NJ

Zip Code

07030

Purpose of Expenditure

CHARTERING A BUSCategory/
Type **007**

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMACalendar Year-To-Date Per Election
for Office Sought**26,718.55**Disbursement For: ☒ Primary☐ General☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

DUNKIN DONUTS

Date

8 18 2012

Mailing Address

789 AMBOY AVENUE

Amount

159.21

City

EDISON

State

NJ

Zip Code

08837

Purpose of Expenditure

BREAKFAST FOR BUS TRIPCategory/
Type **007**

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMACalendar Year-To-Date Per Election
for Office Sought**26,718.55**Disbursement For: ☒ Primary☐ General☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Date

Mailing Address

Amount

City

State

Zip Code

Purpose of Expenditure

Category/
Type

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☐ President

Check One:

☐ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary☐ General☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....

1,256.21

(b) SUBTOTAL of Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures.....
(carry total from last page forward to Line 7)**26,718.55**

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**PAGE 4 OF 6
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

LOCAL 32BJ NY/NJ AMERICAN DREAM FUND

Full Name (Last, First, Middle Initial) of Payee

Custom Coach And Limo

Date

9 29 2012

Mailing Address

7061 Route 35 south

Amount

5,800.00

City

SOUTH AMBOY

State

NJ

Zip Code

08879

Purpose of Expenditure

CHARTERING A BUS

Category/
Type 2

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

26,718.55

Disbursement For:

☐ Primary☒ General☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

DUNKIN DONUTS

Date

9 29 2012

Mailing Address

101 WEST 23RD STREET, NY NY 10011

Amount

312.91

City

NYC

State

NY

Zip Code

10011

Purpose of Expenditure

BREAKFAST FOR BUS TRIP

Category/
Type 002

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

26,718.55

Disbursement For:

☐ Primary☒ General☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

AMAZON MARKET PLACE

Date

9 29 2012

Mailing Address

1200 12th Ave. South, Ste. 1200

Amount

202.86

City

Seattle,

State

WA

Zip Code

98144-2734

Purpose of Expenditure

SNACKS FOR BUS TRIP

Category/
Type 002

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

26,718.55

Disbursement For:

☐ Primary☒ General☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....

6,315.77

(b) SUBTOTAL of Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures.....
(carry total from last page forward to Line 7)

26,718.55

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 5 OF 6
FOR LINE 7 OF FORM 5

NAME OF FILER (in Full)

LOCAL 32BJ NY/NJ AMERICAN DREAM FUND

Full Name (Last, First, Middle Initial) of Payee

BOSTON MARKET

Date

9 29 2012

Mailing Address

4600 City Line Avenue

Amount

1664.85

City

PHILADELPHIA

State

PA

Zip Code

19131

Purpose of Expenditure

LUNCH FOR BUS TRIP

Category/
Type

002

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

26,718.55

Disbursement For: ☐ Primary☒ General☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

NG SLATER CORP

Date

8 31 2012

Mailing Address

42 WEST 38TH STREET SUITE 1002

Amount

955.70

City

NYC

State

NY 10018

Zip Code

Purpose of Expenditure

OBAMA BUTTONS

Category/
Type

02

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

26,718.55

Disbursement For: ☐ Primary☒ General☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

STAR GRAPHICS

Date

9 4 2012

Mailing Address

425 RIVERSIDE DRIVE APT 16D

Amount

900.00

City

NEW YORK

State

NY

Zip Code

10025

Purpose of Expenditure

DESIGN FOR OBAMA BUTTONS

Category/
Type

02

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

26,718.55

Disbursement For: ☐ Primary☒ General☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....

3520.55

(b) SUBTOTAL of Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures.....
(carry total from last page forward to Line 7)

26,718.55

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**PAGE 6 OF 6
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

LOCAL 32BJ NY/NJ AMERICAN DREAM FUND

Full Name (Last, First, Middle Initial) of Payee

Cafe COCO

Date

08 18 2012

Mailing Address

1735 MARKET STREET

Amount

805.95

City

PHILADELPHIA,

State
PAZip Code
19103

Purpose of Expenditure

LUNCH FOR CANVASSERS

Category/
Type

002

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

26,718.55

Disbursement For:

☐ Primary☒ General☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

SEIU PA STATE COUNCIL

Date

08 18 2012

Mailing Address

1500 N. SECOND STREET SUITE11

Amount

1,350.00

City

HARRISBURG

State
PAZip Code
17102

Purpose of Expenditure

RENTING BUSES FOR CANVASSERS

Category/
Type

02

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

26,718.55

Disbursement For: ☐ Primary☒ General☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

ACADEMY EXPRESS

Date

07 12 2012

Mailing Address

PO BOX 1410, 111 PATERSON AVENUE

Amount

1097.00

City

HOBOKEN

State
NJZip Code
07030

Purpose of Expenditure

RENTING BUS FOR CANVASSERS

Category/
Type

002

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

BARACK OBAMA

Calendar Year-To-Date Per Election
for Office Sought

26,718.55

Disbursement For: ☐ Primary☒ General☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....

3252.95

(b) SUBTOTAL of Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures.....
(carry total from last page forward to Line 7)

26718.55

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

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

The document preceding this page was received by FAX at the FEC. The receiving FAX machine has printed at the bottom of each page the date and time of receipt, the phone number of the transmitting machine and the sequential page numbers.

N/A
PREPARER

N/A
DATE PREPARED

(5/2004)

13031034452