

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. 12FE4M5

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

ADDRESS (number and street) 125 Barclay Street

Check if different than previously reported. (ACC)

NEW YORK NY 10007

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

C C00149211

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 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)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on M M / D D / Y Y Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 07 / 01 / 2012 through 07 / 31 / 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 08 / 20 / 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)

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"/>	<input type="text" value="48993.05"/>	<input type="text" value="48993.05"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="84757.88"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="57827.07"/>	<input type="text" value="381112.89"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="142584.95"/>	<input type="text" value="430105.94"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="84757.88"/>	<input type="text" value="372278.87"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="57827.07"/>	<input type="text" value="57827.07"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="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 07 / 01 / 2012 To: M M / D D / Y Y Y Y 07 / 31 / 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).....	1585.22	6937.77
(ii) Unitemized	56241.85	374175.12
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	57827.07	381112.89
(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)	57827.07	381112.89
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))..... ▶	57827.07	381112.89
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	57827.07	381112.89

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.....	84757.88	372278.87
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)) ..	84757.88	372278.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	84757.88	372278.87

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)	57827.07	381112.89
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	57827.07	381112.89
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 14
	<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)

Full Name (Last, First, Middle Initial) A. Miriam Allen			Date of Receipt MM / DD / YYYY 07 / 31 / 2012 Transaction ID : SA11AI.10927
Mailing Address 4322 Claredon Rd			Amount of Each Receipt this Period 38.46
City Brooklyn	State NY	Zip Code 11203	
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer NYC Board of Higher Ed. State	Occupation COLLEGE ADMIN ASSISTANT	Aggregate Year-to-Date ▼ 307.68	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Sharon Bankhead			Date of Receipt MM / DD / YYYY 07 / 31 / 2012 Transaction ID : SA11AI.10929
Mailing Address 1065 Dr.M.L.K. Jr. Blvd			Amount of Each Receipt this Period 70.00
City Bronx	State NY	Zip Code 10452	
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer District Council 37	Occupation Council Rep	Aggregate Year-to-Date ▼ 330.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Glen Blacks			Date of Receipt MM / DD / YYYY 07 / 31 / 2012 Transaction ID : SA11AI.10931
Mailing Address 2120 Madison Ave.			Amount of Each Receipt this Period 70.00
City new york	State NY	Zip Code 10037	
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer Local 372	Occupation Exec VP of Local 372	Aggregate Year-to-Date ▼ 340.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	178.46
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 14
	<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. Judith Burger-Arroyo		Date of Receipt MM / DD / YYYY 07 / 31 / 2012 Transaction ID : SA11AI.10937
Mailing Address 1056 E37th St		Amount of Each Receipt this Period 230.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1725.00	
		Payroll Deduction

Full Name (Last, First, Middle Initial) B. Oliver Gray		Date of Receipt MM / DD / YYYY 07 / 31 / 2012 Transaction ID : SA11AI.10957
Mailing Address 655 E. 14th Street		Amount of Each Receipt this Period 100.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 620.00	
		Payroll Deduction

Full Name (Last, First, Middle Initial) C. Mr. Tyler Hemingway		Date of Receipt MM / DD / YYYY 07 / 31 / 2012 Transaction ID : SA11AI.10959
Mailing Address 7 Sunflow Terrace		Amount of Each Receipt this Period 40.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	
		Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	370.00
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 8 OF 14
	<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. 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 ▼ 300.00

Date of Receipt 07 / 31 / 2012
Transaction ID : SA11AI.10963
 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 ▼ 620.00

Date of Receipt 07 / 31 / 2012
Transaction ID : SA11AI.10964
 Amount of Each Receipt this Period 100.00
 Payroll Deduction

C. Clifford Koppelman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1270 E 19 Street, #1J
 City Brooklyn State NY Zip Code 11230
 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 ▼ 310.00

Date of Receipt 07 / 31 / 2012
Transaction ID : SA11AI.10972
 Amount of Each Receipt this Period 50.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	190.00
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 9 OF 14
(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. 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 ▼ 375.00

Date of Receipt 07 / 31 / 2012
Transaction ID : SA11AI.10986
 Amount of Each Receipt this Period 50.00
 Payroll Deduction

B. 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 ▼ 300.00

Date of Receipt 07 / 31 / 2012
Transaction ID : SA11AI.10989
 Amount of Each Receipt this Period 40.00
 Payroll Deduction

C. 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 ▼ 225.00

Date of Receipt 07 / 31 / 2012
Transaction ID : SA11AI.10990
 Amount of Each Receipt this Period 30.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
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 14
	<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. Togba Porte		Date of Receipt
Mailing Address PO Box 20346		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Staten Island	NY	10302
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.10992
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	Payroll Deduction
Local 420 AFSCME AFL-CIO	Vice President- Local 420	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Walthene Primus		Date of Receipt
Mailing Address 137-29 Bedell Street		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Springfield Grdns	NY	11413
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.10993
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="40.00"/>
Name of Employer	Occupation	Payroll Deduction
District Council 37, AFSCME	Grievance Representative	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="280.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Lillian Roberts		Date of Receipt
Mailing Address 2373 Broadway		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
New York	NY	10024
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.10998
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="275.00"/>
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="1705.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="340.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 14
	<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. Edward Rodriguez
 Full Name (Last, First, Middle Initial)
 Mailing Address 2 Mountain View Dr
 City Thiells State NY Zip Code 10984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer District Council 37 Local 1549 Occupation President Local 1549
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **775.00**

Date of Receipt **07 / 31 / 2012**
Transaction ID : SA11AI.10999
 Amount of Each Receipt this Period **125.00**
 Payroll Deduction

B. Jose Sierra
 Full Name (Last, First, Middle Initial)
 Mailing Address 130 South Highland
 City Ossining State NY Zip Code 10562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer District Council 37, AFSCME Occupation Division Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **310.00**

Date of Receipt **07 / 31 / 2012**
Transaction ID : SA11AI.11004
 Amount of Each Receipt this Period **50.00**
 Payroll Deduction

C. David Stevens
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 Water Grant St
 City Yonkers State NY Zip Code 10701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Board of Higher Ed. State Occupation INFO TECH SR. ASSOCIATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **318.08**

Date of Receipt **07 / 31 / 2012**
Transaction ID : SA11AI.11008
 Amount of Each Receipt this Period **39.76**
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	214.76
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 14
<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. Barbra Terrelonge		Date of Receipt MM / DD / YYYY 07 / 31 / 2012 Transaction ID : SA11Al.11010
Mailing Address 38 Hull Street		Amount of Each Receipt this Period 50.00
City Brooklyn	State NY	Zip Code 11233
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer District Council 37	Occupation Asst Director Research Dept.	Aggregate Year-to-Date ▼ 310.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. James Tucciarelli		Date of Receipt MM / DD / YYYY 07 / 31 / 2012 Transaction ID : SA11Al.11011
Mailing Address 361 Mill Rd.		Amount of Each Receipt this Period 50.00
City Staten Island	State NY	Zip Code 10306
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer District Council 37, AFSCME	Occupation Grievance Representative	Aggregate Year-to-Date ▼ 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Barbara Watkins		Date of Receipt MM / DD / YYYY 07 / 31 / 2012 Transaction ID : SA11Al.11019
Mailing Address 294 Osborn St		Amount of Each Receipt this Period 32.00
City Brooklyn	State NY	Zip Code 11212
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer NYC ADMINISTRATIVE SERVICES	Occupation CITY CUSTODIAL ASST	Aggregate Year-to-Date ▼ 240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	132.00
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 13 OF 14
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (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 ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 31 / 2012
Transaction ID : SA11AI.11024
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).....▶	1585.22

**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 07 / 24 / 2012
Mailing Address 1625 L STREET NW		Transaction ID : SB22.11028
City WASHINGTON	State DC	
Zip Code 20036	Purpose of Disbursement Transfer	Amount of Each Disbursement this Period 84757.88
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.		Date of Disbursement MM / DD / YYYY
Mailing Address		Transaction ID :
City	State	
Zip Code	Purpose of Disbursement	Amount of Each Disbursement this Period
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		Transaction ID :
City	State	
Zip Code	Purpose of Disbursement	Amount of Each Disbursement this Period
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	84757.88
TOTAL This Period (last page this line number only).....▶	84757.88