

DISTRICT



**NATIONAL UNION OF HOSPITAL AND HEALTH CARE EMPLOYEES
AFSCME AFL-CIO**

1319 LOCUST STREET • PHILADELPHIA, PENNSYLVANIA 19107-5498 • 215-735-1300 • FAX 215-735-9878

HENRY NICHOLAS
President

DONNA FORD
Executive Vice-President

PETER GOULD
Executive Vice-President

MARGUERITE MORRISON
Secretary-Treasurer

Vice Presidents

GWENDOLYN JOHNSON • MICHELE MILLS-McCULLOUGH

July 20, 2005

Reports Analysis Division
Federal Election Commission
999 E Street NW
Washington, DC 20463

RE: Mid Year Report – 1/1/05 through 6/30/05
for #C00034066

RECEIVED
FEC MAIL
OPERATIONS CENTER
2005 JUL 25 P 1:41

Dear Sir/Madam:

Enclosed please find the above-mentioned amended reports.

Sincerely,

Marguerite Morrison,
Treasurer

United We Care



25030853450

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL
OPERATIONS CENTER

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

2005 JUL 25 P 1:41
12FE4M5

DISTRICT 1199C NATIONAL UNION OF HOSPITAL AND HEALTH CARE EMPLOYEES

ADDRESS (number and street)

1319 LOCUST STREET

Check if different than previously reported. (ACC)

PHILADELPHIA PA 19107

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 60034066

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

MEM / DEC / YEAR

in the State of

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

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

Election on

MEM / DEC / YEAR

in the State of

5. Covering Period

MEM ' 01 ' 01 ' 2005

through

MEM ' 06 ' 30 ' 2005

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

MARGUERITE MORRISON

Signature of Treasurer

[Handwritten Signature]

Date

MEM ' 07 ' 30 ' 2005

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

Office Use Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

DISTRICT 11990, NAHCE, POLITICAL ACTION FUND

Report Covering the Period: From: 01 ' 01 ' 2005 To: 06 ' 30 ' 2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2005</u>		690.52
(b) Cash on Hand at Beginning of Reporting Period.....	690.52	
(c) Total Receipts (from Line 19).....	-0-	-0-
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	690.52	690.52
7. Total Disbursements (from Line 31).....	-0-	-0-
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	690.52	690.52
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D).....	-0-	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D).....	11666.00	

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

25036653452

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

DISTRICT 11990, ASUHHCE POLITICAL ACTION FUND

Report Covering the Period: From:

01 ' 01 ' 2005

To:

06 ' 30 ' 2005

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

NO ACTIVITY THIS PERIOD

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

(ii) Unitemized.....

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) Total Contributions (add Lines 11(a)(ii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

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DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:	<i>NO ACTIVITY THIS PERIOD</i>	
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....		

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

NO ACTIVITY THIS PERIOD

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SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
DISTRICT 11990, NUHCE, POLITICAL ACTION FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DISTRICT 11990, NUHCE, POLITICAL ACTION FUND

Nature of Debt (Purpose):
Contribution deposited into wrong account. monies were immediately disbursed and were not available to deposit into the non-federal account.

Mailing Address
1319 LOCUST STREET

City State Zip Code
PHILA PA 19107

Outstanding Balance Beginning This Period
66666.00

Amount Incurred This Period
-0-

Payment This Period
-0-

Outstanding Balance at Close of This Period
66666.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DISTRICT 11990, NUHCE, POLITICAL ACTION FUND

Nature of Debt (Purpose):
Contribution deposited into wrong account. Monies were disbursed and are not available to return or to deposit into non-federal account.

Mailing Address
1319 LOCUST STREET

City State Zip Code
PHILA PA 19107

Outstanding Balance Beginning This Period
50000.00

Amount Incurred This Period
-0-

Payment This Period
-0-

Outstanding Balance at Close of This Period
50000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional).....▶

2) TOTALS This Period (last page this line number only).....▶

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....▶

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶

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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 checked="" type="checkbox"/> USPS First Class Mail	Postmarked 7/20/05
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature 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
	Next Business Day Delivery <input type="checkbox"/>
<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 type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


 PREPARER
 (3/2005)

7/25/05
 DATE PREPARED

25038833457