

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

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="2017"/>		<input type="text" value="177253.16"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="58504.04"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="59982.16"/>	<input type="text" value="722128.46"/>
(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="118486.20"/>	<input type="text" value="899381.62"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="0.00"/>	<input type="text" value="780895.42"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="118486.20"/>	<input type="text" value="118486.20"/>
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

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 Y Y
11 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y
11 / 30 / 2017

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).....	3412.80	25885.35
(ii) Unitemized	56569.36	696243.11
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	59982.16	722128.46
(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)	59982.16	722128.46
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)).....▶	59982.16	722128.46
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	59982.16	722128.46

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.....	0.00	780895.42
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 (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	0.00	780895.42
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	780895.42

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	59982.16	722128.46
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	59982.16	722128.46
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 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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. Adams, Darryl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 70 Hillside Ave

City Freeport	State NY	Zip Code 11520
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DC37	Occupation (for Individual) Grievance Rep
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 230.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11AI.18214

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll Deduction

B. Adams, Jackie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 870 Riverdale Dr. #5a

City New York	State NY	Zip Code 10032
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DC 37	Occupation (for Individual) President of Local 299
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11AI.18215

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll Deduction

C. Akyenpong, Michelle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 115 Pond Way

City staten island	State NY	Zip Code 10303
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SSEU Local 371	Occupation (for Individual) Grievance Rep
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 506.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11AI.18217

Amount of Each Receipt this Period
 44.00

Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	84.00
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 7 OF 35
	<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. Allen, Miriam, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4322 Claredon Rd
 City Brooklyn State NY Zip Code 11203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC Board of Higher Ed. State Occupation (for Individual) COLLEGE ADMIN ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 461.52

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18218
 Amount of Each Receipt this Period 38.46
 Memo Item
 Payroll Deduction

B. Bankhead, Sharon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1065 Dr.M.L.K. Jr. Blvd
 City Bronx State NY Zip Code 10452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) District Council 37 Occupation (for Individual) Council Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18220
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction

C. Barcant, Lorraine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4720 Cemer Blvd apt 1410
 City LIC State NY Zip Code 11109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC SCA Occupation (for Individual) Technical Inspector
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18221
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	98.46
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 8 OF 35
	<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. Benjamin, Peggy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 545 w 126th st
 City NY State NY Zip Code 10027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) District Council 37, AFSCME Occupation (for Individual) Grievance Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18222
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

B. Brown, Ann, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 240 Napa Dr apt 240
 City Augusta State GA Zip Code 30909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retiree Assoc Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18225
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

C. Brown, Annette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 Polar Rd
 City amityville State NY Zip Code 11701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC Transit Auth Occupation (for Individual) TA railcar tech -4
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18224
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶ 60.00
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 35
<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. Bruni, James, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22 Brighton 3rd rd

City Brooklyn	State NY	Zip Code 11235
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NYC Department of Protection	Occupation (for Individual) Construction Laborer
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2017

Transaction ID : SA11AI.18226

Amount of Each Receipt this Period
10.00

Memo Item
 Payroll Deduction

B. Burger-Arroyo, Judith, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1056 E37th St

City Brooklyn	State NY	Zip Code 11210
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) District Council 37, AFSCME	Occupation (for Individual) Grievance Rep, Local President
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2645.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2017

Transaction ID : SA11AI.18227

Amount of Each Receipt this Period
115.00

Memo Item
 Payroll Deduction

C. Caicedo, Carlos, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 593 Oak Terrace
apt 3E

City Bronx	State NY	Zip Code 10454
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NYC HHC	Occupation (for Individual) Service Aide
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2017

Transaction ID : SA11AI.18228

Amount of Each Receipt this Period
20.00

Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	145.00
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 35
<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. Camero, Felix, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1175 Gerard Ave
 City Bronx State NY Zip Code 10452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dept of Social Services Occupation (for Individual) Eligibility specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18229
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

B. Casey, Cora, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49-57 Crown Street
 City Brooklyn State NY Zip Code 11221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC Housing Authority Occupation (for Individual) Secretary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 288.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18230
 Amount of Each Receipt this Period 24.00
 Memo Item
 Payroll Deduction

C. Charles, Carmen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 681 Palisade Ave
 City Teaneck State NJ Zip Code 07666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) District Council 37, AFSCME Occupation (for Individual) Local President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18232
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	64.00
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 35
	<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. Dechinea, Aggrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 187-25 Keefeville Ave

City St Albans	State NY	Zip Code 11412
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SSEU	Occupation (for Individual) Local 371staff
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 230.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11Al.18239

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll Deduction

B. Dellavalle, Alfred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 132 Baldwin Drive

City W Hempstead	State NY	Zip Code 11552
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NYC dept of Social Services	Occupation (for Individual) City Laborer
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 230.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11Al.18240

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll Deduction

C. DeMarco, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 83 Ramblewood Ave

City Staten Island	State NY	Zip Code 10308
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) District Council 37, AFSCME	Occupation (for Individual) Grievance Representative
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11Al.18241

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	60.00
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 13 OF 35
	<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)

A. Dickerson, Cuthbert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1969 Benedict Ave
 City Bronx State NY Zip Code 10462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) District Council 37 Occupation (for Individual) Grievance Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11AI.18242
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

B. Dolan, Moira, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 Amsterdam Ave #22L
 City New York State NY Zip Code 10025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) District Council 37, AFSCME Occupation (for Individual) Assist Director - Research & Neg.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11AI.18243
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction

C. Elias, Alexander, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 28 Jennifer lande
 City staten island State NY Zip Code 10306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DC37 Staff Occupation (for Individual) council rep
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 461.76

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11AI.18244
 Amount of Each Receipt this Period 38.48
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	98.48
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 14 OF 35
	<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. Fontano, Gennaro, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3731 Sandra Court
 City Wantagh State NY Zip Code 11793
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) City of NY- health dept. Occupation (for Individual) City Laborer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18245
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction

B. Frederick, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1730 Carroll st. apt a2
 City brooklyn State NY Zip Code 11213
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) nyc dept of health Occupation (for Individual) public health adv
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18246
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

C. Garrido, Henry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 91 Gotham Ave
 City Elmont State NY Zip Code 11003
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) District Council 37 Occupation (for Individual) Asst Assoc Director of DC37
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18248
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
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 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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)

A. graham, Anthony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 27-25 first St
 City Astoria State NY Zip Code 11102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC ACS Occupation (for Individual) Community Coordinator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.40

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11Al.18249
 Amount of Each Receipt this Period 16.70
 Memo Item
 Payroll Deduction

B. Gray, Oliver, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) District Council 37, AFSCME Occupation (for Individual) Associate Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 960.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11Al.18251
 Amount of Each Receipt this Period 80.00
 Memo Item
 Payroll Deduction

C. Harris-Martinez, Keenya, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 810 Henderson Ave
 City Staten Island State NY Zip Code 10310
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC empl retiremnt system Occupation (for Individual) custom rep
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11Al.18252
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	116.70
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 35
	<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. Hemingway, Tyler, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 Sunglow Terrace
 City Middletown State NY Zip Code 10941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) District Council 37 Occupation (for Individual) Asst Division Director - Hosp.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18254
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction

B. Hernandez, Yolanda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 E 115th Street
 City NY State NY Zip Code 10029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HPD Occupation (for Individual) community coordinator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18256
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

C. Hooks, Teresa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9802 springfield blvd.
 City queen village State NY Zip Code 11428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bd. of Education Occupation (for Individual) community assoc
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18257
 Amount of Each Receipt this Period 20.00
 Memo Item
 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 17 OF 35
<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. Hyslop, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 Terrace Place

City Brooklyn	State NY	Zip Code 11218
------------------	-------------	-------------------

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

Name of Employer (for Individual) District Council 37	Occupation (for Individual) Local President/Rep
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 7200.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11AI.18258

Amount of Each Receipt this Period
 600.00

Memo Item
 Payroll Deduction

B. Ifill, Dennis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) City of NY-Rent & Rehab Adm	Occupation (for Individual) Local President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 460.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11AI.18259

Amount of Each Receipt this Period
 40.00

Memo Item
 Payroll Deduction

C. Ingram-Edmonds, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) District Council 37, AFSCME	Occupation (for Individual) Director of Field Operators
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 960.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11AI.18260

Amount of Each Receipt this Period
 80.00

Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	720.00
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 35
	<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. John, Jeremy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 861 Elda Lane

City Westbury	State NY	Zip Code 11590
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DC 37	Occupation (for Individual) Director of PAL
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 480.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11AI.18261

Amount of Each Receipt this Period
 40.00

Memo Item
 Payroll Deduction

B. Johnson, Gerald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1701 Albermarle Rd

City Brooklyn	State NY	Zip Code 11226
------------------	-------------	-------------------

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

Name of Employer (for Individual) DC 37	Occupation (for Individual) Representative
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11AI.18262

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll Deduction

C. Johnson, Stephen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 87-24 115th street

City richmond hill	State NY	Zip Code 11418
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) DC37 ED fund	Occupation (for Individual) Education Dept staff
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 235.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11AI.18263

Amount of Each Receipt this Period
 20.00

Memo Item
 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 20 OF 35
	<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. Kurun, Sabri, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1134 William Court
 City Brooklyn State NY Zip Code 11235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) District Council 37 Occupation (for Individual) IT Programmer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18267
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

B. Lawrence, Eugene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2760 Grand Concourse Apt 1B
 City Bronx State NY Zip Code 10458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC Parks & Recreation Admin Occupation (for Individual) Associate Park Service Worker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18268
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

C. Lewis, Debbie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 33-35 Saratoga Ave
 City Brooklyn State NY Zip Code 11233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC Dept of Social Services Occupation (for Individual) Clerical Associate
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18269
 Amount of Each Receipt this Period 10.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
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 35
	<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 of Individual (Last, First, Middle Initial) or Full Organization Name A. Lovagelio-Miller, Rose, , ,		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>30</td> <td></td> <td>2017</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		30		2017
M M	/	D D	/	Y Y Y Y								
11		30		2017								
Mailing Address 3001 TIEMANN AVENUE		Transaction ID : SA11Al.18270										
City BRONX	State NY	Zip Code 10469										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00										
Name of Employer (for Individual) DC37	Occupation (for Individual) Council Rep.	<input type="checkbox"/> Memo Item <input type="checkbox"/> 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 of Individual (Last, First, Middle Initial) or Full Organization Name B. Matthews, Zachary, , ,		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>30</td> <td></td> <td>2017</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		30		2017
M M	/	D D	/	Y Y Y Y								
11		30		2017								
Mailing Address 464 Clinton Ave.		Transaction ID : SA11Al.18272										
City Brooklyn	State NY	Zip Code 11238										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00										
Name of Employer (for Individual) NYC Dept of Transportation Adm	Occupation (for Individual) City Laborer	<input type="checkbox"/> Memo Item <input type="checkbox"/> 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 of Individual (Last, First, Middle Initial) or Full Organization Name C. McCaskey, Cory, , ,		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>30</td> <td></td> <td>2017</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		30		2017
M M	/	D D	/	Y Y Y Y								
11		30		2017								
Mailing Address 1235 Woodycrest Ave		Transaction ID : SA11Al.18273										
City Bronx	State NY	Zip Code 10452										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00										
Name of Employer (for Individual) NYC HHC	Occupation (for Individual) Patient Care Assoc	<input type="checkbox"/> Memo Item <input type="checkbox"/> Payroll Deduction										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 245.00											

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 35
	<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. Medina, Belinda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2205 2nd Ave
 City New York State NY Zip Code 10029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC Health & Hospital Corp Occupation (for Individual) Rehabilitation Tech
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 346.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18274
 Amount of Each Receipt this Period 33.00
 Memo Item
 Payroll Deduction

B. Miller, Terrence, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 417 Prospect Pl
 City Brooklyn State NY Zip Code 11238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC Police Department Occupation (for Individual) Senior Police Admin. Aide
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18276
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

C. Milton, Iven, , , Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 253 5th Ave.
 City New Rochelle State NY Zip Code 10801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC Fire Dept Occupation (for Individual) Fire Protection Insp
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18277
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	73.00
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 23 OF 35
	<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. Murphy, Doris, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 725 FDR drive
 10g
 City New York State NY Zip Code 10009
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Local 371 SSEU Occupation (for Individual) Case worker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18278
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

B. Negron, Edwin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) City of New York Admin Service Occupation (for Individual) CITY CUSTODIAL ASST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18279
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction

C. Ortiz, Miguel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108-18 Ditmars blvd
 City E. Elmhurst State NY Zip Code 11369
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NYC HHC Occupation (for Individual) Dietary aide
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18280
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

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 24 OF 35
	<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 of Individual (Last, First, Middle Initial) or Full Organization Name A. Patrick, Samuel, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 30 / 2017
Mailing Address 477 VAN BUREN STREET #18			Transaction ID : SA11AI.18282
City BROOKLYN	State NY	Zip Code 11221	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Deduction
Name of Employer (for Individual) HEALTH AND HOSPITAL CORP		Occupation (for Individual) SERVICE AIDE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 251.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Pemberton, Janice, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 30 / 2017
Mailing Address 128-15 Gotham Rd.			Transaction ID : SA11AI.18283
City s. Ozone Pk	State NY	Zip Code 11420	Amount of Each Receipt this Period 16.70
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Deduction
Name of Employer (for Individual) NYC ACS		Occupation (for Individual) Child Protective Spcst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.40	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Pennie, Edna, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 30 / 2017
Mailing Address 1295 5th Ave apt 11C			Transaction ID : SA11AI.18284
City New York	State NY	Zip Code 10029	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Payroll Deduction
Name of Employer (for Individual) NYC DEP		Occupation (for Individual) Clerical Associate	
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).....▶	66.70
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 25 OF 35
	<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. Pennix, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 3rd Street
 City Edison State NJ Zip Code 08837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DC 37 Occupation (for Individual) IT Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18285
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction

B. Perez, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 83-87C Woodhaven Blvd APT 2
 City WOODHAVEN State NY Zip Code 11421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Health & Hospital Corp (HHC) Occupation (for Individual) HOUSEKEEPING AIDE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18286
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction

C. Perry, Joseph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105-23 132nd st.
 City s. richmond hill State NY Zip Code 11419
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYS board of higher ed Occupation (for Individual) city Laborer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18287
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

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 26 OF 35
	<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. Pitts, Deborah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4286 Conashaugh Lks
 City Milford State PA Zip Code 18337
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) District Council 37, AFSCME Occupation (for Individual) Grievance Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 30 / 2017
 Transaction ID : SA11AI.18288
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction

B. Policano, Christopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 Haven Ave. apt 6f
 City New York State NY Zip Code 10033
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) DC 37 Occupation (for Individual) Director Comm.Dept.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 11 / 30 / 2017
 Transaction ID : SA11AI.18289
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction

C. Powers, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 BRAKEMAN COURT
 City HIGHTSTOWN State NJ Zip Code 08520
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Board of Education (BOE) Occupation (for Individual) CITY LABORER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 30 / 2017
 Transaction ID : SA11AI.18290
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶ 170.00
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 35
	<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. Pyle, Terence, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1067 Eastern Pkwy
 1d
 City Brooklyn State NY Zip Code 11213
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) DC37 Occupation (for Individual) Local 420 Staff
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2017
Transaction ID : SA11AI.18291
 Amount of Each Receipt this Period
 20.00
 Memo Item
 Payroll Deduction

B. Roach, Robin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135-25 Hoover Ave
 City Kew Gardens State NY Zip Code 11435
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) DC 37 Occupation (for Individual) General Counsel/Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 960.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2017
Transaction ID : SA11AI.18293
 Amount of Each Receipt this Period
 80.00
 Memo Item
 Payroll Deduction

C. Rodriquez, Edward, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) District Council 37 Local 1549 Occupation (for Individual) President Local 1549
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2017
Transaction ID : SA11AI.18295
 Amount of Each Receipt this Period
 100.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	200.00
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 35
	<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. Roper, Alma, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115-24 165th Street
 City Jamaica State NY Zip Code 11434
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) district Council 37 Occupation (for Individual) Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11Al.18296
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

B. Sabater, Kathleen, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1566 Macombs Rd
 City Bronx State NY Zip Code 10452
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Dept. of Social Services Occupation (for Individual) Case Workers
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11Al.18297
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

C. Schmidt, Joanne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1018 Faile St
 City Bronx State NY Zip Code 10459
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NYC Dept of Health Occupation (for Individual) Family Public Health Nurse
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11Al.18298
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	60.00
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 29 OF 35
	<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. Simmons, Kyle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1114 Knollwood Drive

City Tobyhanna	State PA	Zip Code 18466
-------------------	-------------	-------------------

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

Name of Employer (for Individual) District Council 37, AFSCME	Occupation (for Individual) Grievance Representative
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 480.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2017
Transaction ID : SA11AI.18299

Amount of Each Receipt this Period
 40.00

Memo Item
 Payroll Deduction

B. Smith, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 199

City BRONX	State NY	Zip Code 10451
---------------	-------------	-------------------

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

Name of Employer (for Individual) City University of New York	Occupation (for Individual) City Custodial Asst.
--	---

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 / 30 / 2017
Transaction ID : SA11AI.18300

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll Deduction

C. Stein, Peter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 766 Broadway

City Woodmere	State NY	Zip Code 15598
------------------	-------------	-------------------

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

Name of Employer (for Individual) DC37	Occupation (for Individual) President local 508
---	--

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 / 30 / 2017
Transaction ID : SA11AI.18302

Amount of Each Receipt this Period
 20.00

Memo Item
 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 30 OF 35
	<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. Stevens, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Board of Higher Ed. State Occupation (for Individual) INFO TECH SR. ASSOCIATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 477.12

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18303
 Amount of Each Receipt this Period 39.76
 Memo Item
 Payroll Deduction

B. Sykes, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90 SCHENCK AVENUE APT.1A
 City GREAT NECK State NY Zip Code 11021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DC37 Occupation (for Individual) DC 37 COUNCIL STAFF EMP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18305
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction

C. Terrelonge, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 Hull Street
 City Brooklyn State NY Zip Code 11233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) District Council 37 Occupation (for Individual) Asst Director Research Dept.
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt 11 / 30 / 2017
Transaction ID : SA11AI.18306
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	129.76
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 31 OF 35
	<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. Trester, Michele, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9952 66th Road
 apt 9k
 City Queens State NY Zip Code 11374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DC 37 Occupation (for Individual) Asst Dir Research dept.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11AI.18307
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

B. Tucciarelli, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 361 Mill Rd.
 City Staten Island State NY Zip Code 10306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) District Council 37, AFSCME Occupation (for Individual) Grievance Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11AI.18308
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction

C. Tucker, Esther, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 934 Lincoln Station
 City New York State NY Zip Code 10037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) District Council 37, ASFCME Occupation (for Individual) Grievance Representative
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11AI.18309
 Amount of Each Receipt this Period 20.00
 Memo Item
 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 32 OF 35
	<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. Uddin, Maf, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

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 (for Individual) District Council 37, AFSCME	Occupation (for Individual) Treasurer
--	--

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 / 30 / 2017

Transaction ID : SA11AI.18310

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll Deduction

B. Vasquez, Cesar, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 969

City New York	State NY	Zip Code 10029
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NYC Board of Education	Occupation (for Individual) Community Associate
---	--

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 / 30 / 2017

Transaction ID : SA11AI.18312

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll Deduction

C. Velasquez, Martin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 96 Wenlock Street

City Staten Island	State NY	Zip Code 10303
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NY State Board of Higher Educa	Occupation (for Individual) City Laborer
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 30 / 2017

Transaction ID : SA11AI.18313

Amount of Each Receipt this Period
 30.00

Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	70.00
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 33 OF 35
	<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. Washington, Leon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 744 Vermont Street
 City Brooklyn State NY Zip Code 11207
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Occupation (for Individual)
 kingsboro comm, college City Laborer
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2017
Transaction ID : SA11AI.18315
 Amount of Each Receipt this Period
 40.00
 Memo Item
 Payroll Deduction

B. Watkins, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 294 Osborn St
 City Brooklyn State NY Zip Code 11212
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Occupation (for Individual)
 NYC ADMINISTRATIVE SERVICES CITY CUSTODIAL ASST
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2017
Transaction ID : SA11AI.18316
 Amount of Each Receipt this Period
 40.00
 Memo Item
 Payroll Deduction

C. Whatley, Cheryl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1199 E 53rd Street apt 3f
 City Brooklyn State NY Zip Code 11234
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Occupation (for Individual)
 NYC Dept of Health Jr Public Health Nurse
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2017
Transaction ID : SA11AI.18318
 Amount of Each Receipt this Period
 40.00
 Memo Item
 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 34 OF 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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)

A. Wilgenkamp, Chris, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2415 wolson Ave

City Bronx	State NY	Zip Code 10469
---------------	-------------	-------------------

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

Name of Employer (for Individual) District Council 37, AFSCME	Occupation (for Individual) Asst Divison Director
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11Al.18319

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll Deduction

B. Williams, Wanda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 Roy Lane

City Highland	State NY	Zip Code 12528
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) District Council 37, AFSCME	Occupation (for Individual) Director of Political Action & Legisla
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11Al.18320

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll Deduction

C. Youman, Mercedes, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 345 E 93rd St
 16h

City NY	State NY	Zip Code 10128
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NYC Health Dept.	Occupation (for Individual) Public Health Nurse
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 1200.00

Date of Receipt
 11 / 30 / 2017
Transaction ID : SA11Al.18321

Amount of Each Receipt this Period
 100.00

Memo Item
 Payroll Deduction

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: PAGE 35 OF 35
(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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Young-Pinback, Willie Mae, , ,

Mailing Address 156 south 14th Ave

City Mt Vernon	State NY	Zip Code 10550
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FEC ID number of contributing federal political committee.

Name of Employer (for Individual) NYC HPD	Occupation (for Individual) Real Property Manager
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Transaction ID : SA11AL18322

Amount of Each Receipt this Period

Memo Item
 Payroll Deduction

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee.

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="16.70"/>
TOTAL This Period (last page this line number only).....	<input type="text" value="3412.80"/>