

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

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="20190.83"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="84757.88"/>	<input type="text" value="323285.82"/>
(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="104948.71"/>	<input type="text" value="372278.87"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="20190.83"/>	<input type="text" value="287520.99"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="84757.88"/>	<input type="text" value="84757.88"/>
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)

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 06 / 01 / 2012 To: M M / D D / Y Y Y Y Y 06 / 30 / 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).....	1379.33	5352.55
(ii) Unitemized	83378.55	317933.27
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	84757.88	323285.82
(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)	84757.88	323285.82
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))..... ▶	84757.88	323285.82
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	84757.88	323285.82

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.....	20190.83	287520.99
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)) ..	20190.83	287520.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20190.83	287520.99

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)	84757.88	323285.82
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	84757.88	323285.82
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 13
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. Miriam Allen
 Full Name (Last, First, Middle Initial)
 Mailing Address 4322 Claredon Rd
 City Brooklyn State NY Zip Code 11203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYC Board of Higher Ed. State Occupation COLLEGE ADMIN ASSISTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **269.22**

Date of Receipt **06 / 30 / 2012**
Transaction ID : SA11AI.10821
 Amount of Each Receipt this Period **57.69**
 Payroll Deduction

B. Sharon Bankhead
 Full Name (Last, First, Middle Initial)
 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 District Council 37 Occupation Council Rep
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **06 / 30 / 2012**
Transaction ID : SA11AI.10823
 Amount of Each Receipt this Period **40.00**
 Payroll Deduction

C. Glen Blacks
 Full Name (Last, First, Middle Initial)
 Mailing Address 2120 Madison Ave.
 City new york State NY Zip Code 10037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Local 372 Occupation Exec VP of Local 372
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **270.00**

Date of Receipt **06 / 30 / 2012**
Transaction ID : SA11AI.10825
 Amount of Each Receipt this Period **50.00**
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **147.69**
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 13
<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. Judith Burger-Arroyo		Date of Receipt MM / DD / YYYY 06 / 30 / 2012 Transaction ID : SA11AI.10830
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	Payroll Deduction	
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 ▼ 1495.00	

Full Name (Last, First, Middle Initial) B. Oliver Gray		Date of Receipt MM / DD / YYYY 06 / 30 / 2012 Transaction ID : SA11AI.10850
Mailing Address 655 E. 14th Street		Amount of Each Receipt this Period 80.00
City New York	State NY	Zip Code 10009
FEC ID number of contributing federal political committee. C	Payroll Deduction	
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 ▼ 520.00	

Full Name (Last, First, Middle Initial) C. Mr. Tyler Hemingway		Date of Receipt MM / DD / YYYY 06 / 30 / 2012 Transaction ID : SA11AI.10852
Mailing Address 7 Sunflow Terrace		Amount of Each Receipt this Period 50.00
City Middletown	State NY	Zip Code 10941
FEC ID number of contributing federal political committee. C	Payroll Deduction	
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 ▼ 270.00	

SUBTOTAL of Receipts This Page (optional).....▶	360.00
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 8 OF 13
(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. 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 260.00

Date of Receipt 06 / 30 / 2012
 Transaction ID : SA11AI.10855
 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 520.00

Date of Receipt 06 / 30 / 2012
 Transaction ID : SA11AI.10856
 Amount of Each Receipt this Period 80.00
 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 260.00

Date of Receipt 06 / 30 / 2012
 Transaction ID : SA11AI.10864
 Amount of Each Receipt this Period 40.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... 160.00
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 13
(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)

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

Mailing Address 80 East 110th St

City State Zip Code
 New York NY 10029

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

Name of Employer Occupation
 City of New York Admin Service CITY CUSTODIAL ASST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 325.00

Date of Receipt
 06 / 30 / 2012
Transaction ID : SA11AI.10878

Amount of Each Receipt this Period
 50.00

Payroll Deduction

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

Mailing Address 125 E.17th Street

City State Zip Code
 New York NY 10003

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

Name of Employer Occupation
 District Council 37, AFSCME Real Estate Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 06 / 30 / 2012
Transaction ID : SA11AI.10881

Amount of Each Receipt this Period
 50.00

Payroll Deduction

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

Mailing Address 137-29 Bedell Street

City State Zip Code
 Springfield Grdns NY 11413

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

Name of Employer Occupation
 District Council 37, AFSCME Grievance Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 06 / 30 / 2012
Transaction ID : SA11AI.10885

Amount of Each Receipt this Period
 40.00

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: (check only one)	PAGE 10 OF 13
	<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. Lillian Roberts		Date of Receipt
Mailing Address 2373 Broadway		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code
New York	NY	10024
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.10890
Name of Employer	Occupation	Amount of Each Receipt this Period
District Council 37, AFSCME	Executive Director	<input type="text" value="220.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Payroll Deduction
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1430.00"/>	

Full Name (Last, First, Middle Initial) B. Edward Rodriguez		Date of Receipt
Mailing Address 2 Mountain View Dr		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code
Thiells	NY	10984
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.10891
Name of Employer	Occupation	Amount of Each Receipt this Period
District Council 37 Local 1549	President Local 1549	<input type="text" value="100.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Payroll Deduction
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="650.00"/>	

Full Name (Last, First, Middle Initial) C. Jose Sierra		Date of Receipt
Mailing Address 130 South Highland		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code
Ossining	NY	10562
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.10896
Name of Employer	Occupation	Amount of Each Receipt this Period
District Council 37, AFSCME	Division Director	<input type="text" value="40.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Payroll Deduction
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="260.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="360.00"/>
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: PAGE 11 OF 13
(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. David Stevens
 Full Name (Last, First, Middle Initial)
 Mailing Address 23 Water Grant St
 City State Zip Code
 Yonkers NY 10701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Board of Higher Ed. State INFO TECH SR. ASSOCIATE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 278.32

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2012
Transaction ID : SA11AI.10899
 Amount of Each Receipt this Period
 59.64
 Payroll Deduction

B. Barbra Terrelonge
 Full Name (Last, First, Middle Initial)
 Mailing Address 38 Hull Street
 City State Zip Code
 Brooklyn NY 11233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 District Council 37 Asst Director Research Dept.
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2012
Transaction ID : SA11AI.10901
 Amount of Each Receipt this Period
 40.00
 Payroll Deduction

C. James Tucciarelli
 Full Name (Last, First, Middle Initial)
 Mailing Address 361 Mill Rd.
 City State Zip Code
 Staten Island NY 10306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 District Council 37, AFSCME Grievance Representative
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2012
Transaction ID : SA11AI.10902
 Amount of Each Receipt this Period
 40.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 139.64
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 13
	<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. Barbara Watkins
 Full Name (Last, First, Middle Initial)
 Mailing Address 294 Osborn St
 City Brooklyn State NY Zip Code 11212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYC ADMINISTRATIVE SERVICES Occupation CITY CUSTODIAL ASST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt 06 / 30 / 2012
Transaction ID : SA11AI.10910
 Amount of Each Receipt this Period 32.00
 Payroll Deduction

B. 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 ▼ 240.00

Date of Receipt 06 / 30 / 2012
Transaction ID : SA11AI.10915
 Amount of Each Receipt this Period 40.00
 Payroll Deduction

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
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	72.00
TOTAL This Period (last page this line number only).....▶	1379.33

**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 06 / 26 / 2012
Mailing Address 1625 L STREET NW		Transaction ID : SB22.10921
City WASHINGTON State DC Zip Code 20036	Amount of Each Disbursement this Period 2019.83	
Purpose of Disbursement Transfer	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Category/ Type	
Purpose of Disbursement	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Category/ Type	
Purpose of Disbursement	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	2019.83
TOTAL This Period (last page this line number only).....▶	2019.83