

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.
COUNCIL OF SCHOOL SUPERVISORS AND ADMINISTRATORS LOCAL 1 AFSA AFL-CIO

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Anita Gomez-Palacio

Signature of Treasurer Anita Gomez-Palacio [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

COUNCIL OF SCHOOL SUPERVISORS AND ADMINISTRATORS LOCAL 1 AFSA AFL-CIO

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="2011"/>		<input type="text" value="121809.93"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="121809.93"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="17000.00"/>	<input type="text" value="17000.00"/>
(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="138809.93"/>	<input type="text" value="138809.93"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="15336.45"/>	<input type="text" value="15336.45"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="123473.48"/>	<input type="text" value="123473.48"/>
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

COUNCIL OF SCHOOL SUPERVISORS AND ADMINISTRATORS LOCAL 1 AFSA AFL-CIO

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2011 To: M M / D D / Y Y Y Y 06 / 30 / 2011

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).....	0.00	0.00
(ii) Unitemized	17000.00	17000.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	17000.00	17000.00
(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)	17000.00	17000.00
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))..... ▶	17000.00	17000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	17000.00	17000.00

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	3106.45	3106.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3106.45	3106.45
22. Transfers to Affiliated/Other Party Committees.....	1150.00	1150.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6955.00	6955.00
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	4125.00	4125.00
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)) ..	15336.45	15336.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15336.45	15336.45

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)	17000.00	17000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17000.00	17000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3106.45	3106.45
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3106.45	3106.45

**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 checked="" type="checkbox"/> 21b	<input 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)

COUNCIL OF SCHOOL SUPERVISORS AND ADMINISTRATORS LOCAL 1 AFSA AFL-CIO

Full Name (Last, First, Middle Initial)

A. Hudson Printing

Mailing Address 48-09 34 street

City Long Island City State NY Zip Code 11101

Purpose of Disbursement
Professional services - brochure

004

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	1		2	0	1	1

Transaction ID : SB21B.4135

Amount of Each Disbursement this Period

1	0	4	5	.	2	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Prime New York

Mailing Address 233 Broadway Suite 702

City New York State NY Zip Code 10279

Purpose of Disbursement

003

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	1		2	0	1	1

Transaction ID : SB21B.4137

Amount of Each Disbursement this Period

8	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Satty, Levine and Ciacco

Mailing Address 125 Jericho Turnpike Suite 200

City Jericho State NY Zip Code 11753

Purpose of Disbursement
Accounting

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	1		2	0	1	1

Transaction ID : SB21B.4139

Amount of Each Disbursement this Period

1	2	1	1	.	2	5
---	---	---	---	---	---	---

SUBTOTAL of Disbursements This Page (optional)..... ▶

3	1	0	6	.	4	5
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TOTAL This Period (last page this line number only)..... ▶

3	1	0	6	.	4	5
---	---	---	---	---	---	---

**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)

COUNCIL OF SCHOOL SUPERVISORS AND ADMINISTRATORS LOCAL 1 AFSA AFL-CIO

Full Name (Last, First, Middle Initial)

A. Androc Democratic Club

Mailing Address 45-26 47 street

City woodside State NY Zip Code 11377

Purpose of Disbursement
Reception 3/3/11

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	10	/	2011

Transaction ID : SB22.4104

Amount of Each Disbursement this Period

150.00

Full Name (Last, First, Middle Initial)

B. Bronx Democratic County Committee

Mailing Address 2156 Crueger Ave
4J

City Bronx State NY Zip Code 10462

Purpose of Disbursement
journal ad

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	27	/	2011

Transaction ID : SB22.4149

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

C. Bronx Democratic County Committee Housekeeping

Mailing Address 2156 Cruger Ave
4J

City Bronx State NY Zip Code 10462

Purpose of Disbursement
County Dinner

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	27	/	2011

Transaction ID : SB22.4146

Amount of Each Disbursement this Period

600.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1150.00

1150.00

**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 type="checkbox"/> 22	<input checked="" 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)

COUNCIL OF SCHOOL SUPERVISORS AND ADMINISTRATORS LOCAL 1 AFSA AFL-CIO

Full Name (Last, First, Middle Initial)

A. Clarke for Congress

Mailing Address

City State Zip Code

Purpose of Disbursement
Fundraiser

011

Candidate Name

Clarke for Congress

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NY District: 11

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	2		2	0	1	1

Transaction ID : SB23.4109

Amount of Each Disbursement this Period

6	0	0	0
---	---	---	---

Full Name (Last, First, Middle Initial)

B. Committee to re-elect ed towns

Mailing Address 438 LEWIS AVENUE

City State Zip Code
BROOKLYN NY 11233

Purpose of Disbursement
Fundraiser

011

Candidate Name

Committee to re-elect ed towns

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NY District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	1	1

Transaction ID : SB23.4141

Amount of Each Disbursement this Period

1	0	0	0
---	---	---	---

Full Name (Last, First, Middle Initial)

C. Crowley for Congress

Mailing Address 84-56 GRAND AVENUE

City State Zip Code
ELMHURST NY 11373

Purpose of Disbursement
fundraiser

011

Candidate Name

Crowley for Congress

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: NY District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	4		2	0	1	1

Transaction ID : SB23.4150

Amount of Each Disbursement this Period

1	0	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

2	6	0	0
---	---	---	---

2	6	0	0
---	---	---	---

**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 type="checkbox"/> 22	<input checked="" 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)

COUNCIL OF SCHOOL SUPERVISORS AND ADMINISTRATORS LOCAL 1 AFSA AFL-CIO

Full Name (Last, First, Middle Initial)

A. Democratic Organization of Queens County

Mailing Address 72-50 Austin Street

City State Zip Code
Forest Hills NY 11375

Purpose of Disbursement
Reception

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2011

Transaction ID : SB23.4127

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Democratic Organization of Queens County

Mailing Address 72-50 Austin Street

City State Zip Code
Forest Hills NY 11375

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	09	/	2011

Transaction ID : SB23.4125

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C. Democratic Organization of Richmond

Mailing Address PO Box 141093

City State Zip Code
Staten Island NY 10314

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2011

Transaction ID : SB23.4111

Amount of Each Disbursement this Period

255.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

1855.00

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

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**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 type="checkbox"/> 22	<input checked="" 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)

COUNCIL OF SCHOOL SUPERVISORS AND ADMINISTRATORS LOCAL 1 AFSA AFL-CIO

Full Name (Last, First, Middle Initial)

A. Hakeem Jeffries Exploratory Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2011

Mailing Address

City State Zip Code

Transaction ID : SB23.4129

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

500.00

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Kings County Democratic Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		20		2011

Mailing Address 16 Court Street

City State Zip Code
Brooklyn NY 11241

Transaction ID : SB23.4119

Purpose of Disbursement
Reception

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

400.00

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. New York County Democratic Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2011

Mailing Address PO Box 309
243 5 Ave

City State Zip Code
New York NY 10016

Transaction ID : SB23.4122

Purpose of Disbursement
Reception

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

500.00

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

1400.00

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

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**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 type="checkbox"/> 22	<input checked="" 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)

COUNCIL OF SCHOOL SUPERVISORS AND ADMINISTRATORS LOCAL 1 AFSA AFL-CIO

Full Name (Last, First, Middle Initial)

A. Queens Village Republican Club

Mailing Address 242-33 90 Ave

City Bellerose State NY Zip Code 11426

Purpose of Disbursement
Lincoln's Birthday Dinner

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	22	/	2011

Transaction ID : SB23.4131

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Rangel for Congress

Mailing Address PO BOX 5577

City NEW YORK State NY Zip Code 10027

Purpose of Disbursement
breakfast

Candidate Name

Rangel for Congress

Office Sought: House Senate President
State: NY District: 15

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	01	/	2011

Transaction ID : SB23.4152

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1100.00

6955.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

COUNCIL OF SCHOOL SUPERVISORS AND ADMINISTRATORS LOCAL 1 AFSA AFL-CIO

Full Name (Last, First, Middle Initial)

A. Federal Election Commission

Mailing Address 1005 Conversation Plaza
FEC#979058

City St Louis State MO Zip Code 63101

Purpose of Disbursement
Administrative Fine

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		1	8		2	0	1	1		

Transaction ID : SB29.4156

Amount of Each Disbursement this Period

4	1	2	5	.	0	0
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Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

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Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

4	1	2	5	.	0	0
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4	1	2	5	.	0	0
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