

**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="2016"/>	<input type="text" value="58555.39"/>	<input type="text" value="58555.39"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="64029.64"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="65922.50"/>	<input type="text" value="343183.01"/>
(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="129952.14"/>	<input type="text" value="401738.40"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="64029.64"/>	<input type="text" value="335815.90"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="65922.50"/>	<input type="text" value="65922.50"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

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

Report Covering the Period: From: M M / D D / Y Y Y Y 05 / 01 / 2016 To: M M / D D / Y Y Y Y 05 / 31 / 2016

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).....	1545.00	4060.00
(ii) Unitemized	64377.50	339123.01
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	65922.50	343183.01
(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)	65922.50	343183.01
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))..... ▶	65922.50	343183.01
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	65922.50	343183.01

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.....	64029.64	335815.90
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)) ..	64029.64	335815.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	64029.64	335815.90

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)	65922.50	343183.01
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	65922.50	343183.01
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. Michelle Akyenpong
 Full Name (Last, First, Middle Initial)
 Mailing Address 115 Pond Way
 City Staten Island State NY Zip Code 10303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SSEU Local 371 Occupation Greivance Rep
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **05 / 31 / 2016**
Transaction ID : SA11AI.16042
 Amount of Each Receipt this Period **40.00**
 Memo Item
 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 **220.00**

Date of Receipt **05 / 31 / 2016**
Transaction ID : SA11AI.16046
 Amount of Each Receipt this Period **50.00**
 Memo Item
 Payroll Deduction

C. Nola Brooker
 Full Name (Last, First, Middle Initial)
 Mailing Address 1551 UNIONPORT RD APT 5F
 City BRONX State NY Zip Code 10462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer District Council 37 Occupation Division Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **05 / 31 / 2016**
Transaction ID : SA11AI.16050
 Amount of Each Receipt this Period **50.00**
 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: (check only one)	PAGE 8 OF 13
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <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. Mr. Tyler Hemingway
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Sunflow Terrace
 City Middletown State NY Zip Code 10941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer District Council 37 Occupation Asst Division Director - Hosp.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 31 / 2016
Transaction ID : SA11AI.16085
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction

B. 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 ▼ 220.00

Date of Receipt 05 / 31 / 2016
Transaction ID : SA11AI.16090
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction

C. 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 ▼ 440.00

Date of Receipt 05 / 31 / 2016
Transaction ID : SA11AI.16091
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	190.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 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. Jeremy John
 Full Name (Last, First, Middle Initial)
 Mailing Address 861 Elda Lane
 City Westbury State NY Zip Code 11590
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DC 37 Occupation Director of PAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 31 / 2016
Transaction ID : SA11AI.16093
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction

B. Edwin Negrón
 Full Name (Last, First, Middle Initial)
 Mailing Address 80 East 110th St
 City New York State NY Zip Code 10029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer City of New York Admin Service Occupation CITY CUSTODIAL ASST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 31 / 2016
Transaction ID : SA11AI.16111
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction

C. Christopher Policano
 Full Name (Last, First, Middle Initial)
 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 DC 37 Occupation Director Comm.Dept.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 05 / 31 / 2016
Transaction ID : SA11AI.16120
 Amount of Each Receipt this Period 125.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 10 OF 13
(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)

Full Name (Last, First, Middle Initial)
A. John Powers

Mailing Address 5 BRAKEMAN COURT

City State Zip Code
HIGHTSTOWN NJ 08520

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

Name of Employer Occupation
Board of Education (BOE) CITY LABORER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2016

Transaction ID : SA11AI.16121

Amount of Each Receipt this Period
40.00

Memo Item
Payroll Deduction

Full Name (Last, First, Middle Initial)
B. Robin Roach

Mailing Address 135-25 Hoover Ave

City State Zip Code
Kew Gardens NY 11435

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

Name of Employer Occupation
DC 37 General Counsel/Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2016

Transaction ID : SA11AI.16126

Amount of Each Receipt this Period
50.00

Memo Item
Payroll Deduction

Full Name (Last, First, Middle Initial)
C. Edward Rodriguez

Mailing Address 2 Mountain View Dr

City State Zip Code
Thiells NY 10984

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

Name of Employer Occupation
District Council 37 Local 1549 President Local 1549

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2016

Transaction ID : SA11AI.16128

Amount of Each Receipt this Period
125.00

Memo Item
Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 215.00

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 11 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	<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. Kyle Simmons
Full Name (Last, First, Middle Initial)
Mailing Address 1114 Knollwood Drive
City Tobyhanna State PA Zip Code 18466
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 220.00

Date of Receipt 05 / 31 / 2016
Transaction ID : SA11AI.16132
Amount of Each Receipt this Period 40.00
 Memo Item
Payroll Deduction

B. Barbra Terrelonge
Full Name (Last, First, Middle Initial)
Mailing Address 38 Hull Street
City Brooklyn State NY Zip Code 11233
FEC ID number of contributing federal political committee. C
Name of Employer District Council 37 Occupation Asst Director Research Dept.
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 220.00

Date of Receipt 05 / 31 / 2016
Transaction ID : SA11AI.16141
Amount of Each Receipt this Period 50.00
 Memo Item
Payroll Deduction

C. James Tucciarelli
Full Name (Last, First, Middle Initial)
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 District Council 37, AFSCME Occupation Grievance Representative
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 220.00

Date of Receipt 05 / 31 / 2016
Transaction ID : SA11AI.16143
Amount of Each Receipt this Period 50.00
 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 12 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. Barbara Watkins
 Full Name (Last, First, Middle Initial)
 Mailing Address 294 Osborn St
 City State Zip Code
 Brooklyn NY 11212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NYC ADMINISTRATIVE SERVICES CITY CUSTODIAL ASST
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : SA11Al.16149
 Amount of Each Receipt this Period
 40.00
 Memo Item
 Payroll Deduction

B. Cheryl Whatley
 Full Name (Last, First, Middle Initial)
 Mailing Address 1199 E 53rd Street
 apt 3f
 City State Zip Code
 Brooklyn NY 11234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NYC Dept of Health Jr Public Health Nurse
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : SA11Al.16151
 Amount of Each Receipt this Period
 40.00
 Memo Item
 Payroll Deduction

C. Mercedes Youman
 Full Name (Last, First, Middle Initial)
 Mailing Address 345 E 93rd St
 16h
 City State Zip Code
 NY NY 10128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NYC Health Dept. Public Health Nurse
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2016
Transaction ID : SA11Al.16156
 Amount of Each Receipt this Period
 100.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	180.00
TOTAL This Period (last page this line number only).....▶	1545.00

**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 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 05 / 23 / 2016
Mailing Address 1625 L STREET NW		Transaction ID : SB22.16163
City WASHINGTON	State DC	
Zip Code 20036	Purpose of Disbursement Transfer	Amount of Each Disbursement this Period 64029.64
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	64029.64
TOTAL This Period (last page this line number only).....▶	64029.64