

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-Q37PEOPL

ADDRESS (number and street) PO BOX 2882
CHURCH STREET STATION
 Check if different than previously reported. (ACC)
NEW YORK NY 10008

2. **FEC IDENTIFICATION NUMBER** C00149211
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 Quarterly 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 (12G)
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 11 25 2008 through 12 31 2008

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 Alvin Warshaviak

Signature of Treasurer Electronically Filed by Alvin Warshaviak Date 01 30 2009

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		64498.47
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	96187.41									
(c) Total Receipts (from Line 19)	54656.50	609911.67								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	150843.91	674410.14								
7. Total Disbursements (from Line 31)	96187.41	619753.64								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	54656.50	54656.50								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	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 (D-C37PEOPL

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	2286.60	18988.44
(i) Itemized (use Schedule A)		
(ii) Unitemized	52369.90	590923.23
(iii) TOTAL (add Lines 11(a)(i) and (ii)	54656.50	609911.67
(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)	54656.50	609911.67
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 Transfer (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))	54656.50	609911.67
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	54656.50	609911.67

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	96187.41	619753.64
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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) Shared 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))..	96187.41	619753.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	96187.41	619753.64

DETAILED SUMMARY PAGE
of Disbursements

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	54656.50	609911.67
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	54656.50	609911.67
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: PAGE 6 / 31
(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

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 (D-C37PEOPL

A.

Full Name (Last, First, Middle Initial)
Leonard Allen

Mailing Address 512 Powell Street

City State Zip Code
Brooklyn NY 11212

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

Name of Employer District Council 37 Occupation Grievance Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.7131

Amount of Each Receipt this Period 20.00

Payroll Deduction

B.

Full Name (Last, First, Middle Initial)
Miriam Allen

Mailing Address 4322 Claredon Rd

City State Zip Code
Brooklyn NY 11203

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

Name of Employer CUNY Occupation clerical

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 414.60

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.7132

Amount of Each Receipt this Period 38.46

Payroll Deduction

C.

Full Name (Last, First, Middle Initial)
Francisco Alvarez

Mailing Address 1500 Grand Concourse apt 23B

City State Zip Code
Bronx NY 10457

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.7133

Amount of Each Receipt this Period 20.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► 78.46

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 7 / 31
	<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 (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Maynard Anderson		Date of Receipt
	Mailing Address 789 willoughby ave		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Brooklyn	NY	11206
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7134
Name of Employer DC 37		Occupation Assistant Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
		<input type="text" value="204.00"/>	Payroll Deduction

B.	Full Name (Last, First, Middle Initial) Charles Andrews		Date of Receipt
	Mailing Address 2816 Schley Ave apt 4b		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Bronx	NY	10465
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7135
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
		<input type="text" value="240.00"/>	Payroll Deduction

C.	Full Name (Last, First, Middle Initial) Ronald Arnero		Date of Receipt
	Mailing Address 175 Willoughby St #8H		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Brooklyn	NY	11201
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7136
Name of Employer DC 37		Occupation Assistant Division Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
		<input type="text" value="208.00"/>	Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="60.00"/>
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: (check only one)	PAGE 8 / 31
	<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 (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Peggy Benjamin		Date of Receipt
	Mailing Address 545 w 126th st		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	NY	NY	10027
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7138
Name of Employer dc37		Occupation Grievance Rep	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.00
		<input type="text"/> 265.00	Payroll Deduction

B.	Full Name (Last, First, Middle Initial) Frederick Bigger		Date of Receipt
	Mailing Address 447 Monroe Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Brooklyn	NY	11221
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7140
Name of Employer NYC Transit Authority		Occupation Computer Specialist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 16.00
		<input type="text"/> 208.00	Payroll Deduction

C.	Full Name (Last, First, Middle Initial) James Bruni		Date of Receipt
	Mailing Address 22 Brighton 3rd rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Brooklyn	NY	11235
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7141
Name of Employer NYC Department of Protection		Occupation Construction Laborer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 20.00
		<input type="text"/> 240.00	Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 61.00
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: (check only one)	PAGE 9 / 31
	<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 (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Judith Burger-Arroyo		Date of Receipt
	Mailing Address 1056 E37th St		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Brooklyn	NY	11210
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11AI.7142
Name of Employer DC37		Occupation Grievance Rep, Local President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="200.00"/>
		<input type="text" value="2600.00"/>	Payroll Deduction

B.	Full Name (Last, First, Middle Initial) Jason Candiate		Date of Receipt
	Mailing Address 85 Tompkins Ave		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Brooklyn	NY	11206
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11AI.7143
Name of Employer City of New York		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="30.00"/>
		<input type="text" value="390.00"/>	Payroll Deduction

C.	Full Name (Last, First, Middle Initial) Cora Casey		Date of Receipt
	Mailing Address 49-57 Crown Street		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Brooklyn	NY	11221
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: SA11AI.7144
Name of Employer NYC Housing Authority		Occupation Secretary	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
		<input type="text" value="250.00"/>	Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="250.00"/>
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: (check only one)	PAGE 10 / 31
	<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 (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Carmen Charles		Date of Receipt
	Mailing Address 681 Palisade Ave		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	teaneck	NJ	07666
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7145
Name of Employer dc37		Occupation Local President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	<input type="text" value="20.00"/>
			Payroll Deduction

B.	Full Name (Last, First, Middle Initial) Santos Crespo		Date of Receipt
	Mailing Address 319 Atkins Ave		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Brooklyn	NY	11208
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7146
Name of Employer Local 372		Occupation Vice President- Local 372	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="248.00"/>	<input type="text" value="20.00"/>
			Payroll Deduction

C.	Full Name (Last, First, Middle Initial) Francis Curtis		Date of Receipt
	Mailing Address 100 Beekman St. #8B		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	New York	NY	10038
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7147
Name of Employer DC 37		Occupation Program Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="265.00"/>	<input type="text" value="25.00"/>
			Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="65.00"/>
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 / 31
(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 (D-C37PEOPL

A.

Full Name (Last, First, Middle Initial)
Michael DeMarco

Mailing Address 83 Ramblewood Ave

City Staten Island State NY Zip Code 10308

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

Name of Employer District Council 37 Occupation Grievance Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 30 / 2008
Transaction ID: SA11AI.7149
Amount of Each Receipt this Period: 20.00
Payroll Deduction

B.

Full Name (Last, First, Middle Initial)
Eddie Demmings

Mailing Address 36 Kent Rd

City Hillsdale State NJ Zip Code 07642

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

Name of Employer DC 37 Occupation General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 30 / 2008
Transaction ID: SA11AI.7148
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C.

Full Name (Last, First, Middle Initial)
Colleen Detroy

Mailing Address 5101 39th St apt. b21

City Woodside State NY Zip Code 11104

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

Name of Employer District Council 37, AFSC-ME Occupation Administrative Assistant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt: 12 / 30 / 2008
Transaction ID: SA11AI.7150
Amount of Each Receipt this Period: 25.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► 65.00

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 / 31
	<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 (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Moira Dolan		Date of Receipt
	Mailing Address 711 Amsterdam Ave #22L		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	New York	NY	10025
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7151
Name of Employer DC 37		Occupation Assist Director - Research & Neg.	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 16.00
		<input type="text"/> 208.00	Payroll Deduction

B.	Full Name (Last, First, Middle Initial) Connie Etheridge		Date of Receipt
	Mailing Address 123-18 153rd St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Jamaica	NY	11434
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7152
Name of Employer DC 37		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 20.00
		<input type="text"/> 240.00	Payroll Deduction

C.	Full Name (Last, First, Middle Initial) Jessica Forrest		Date of Receipt
	Mailing Address 216 Rockaway Ave #2E		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Brooklyn	NY	11233
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7156
Name of Employer NYC Fire Dept		Occupation Clerical Assoc.	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 19.24
		<input type="text"/> 221.26	Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 55.24
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: (check only one)	PAGE 13 / 31
	<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 (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Dorothy Fraizer		Date of Receipt MM / DD / YYYY 12 / 30 / 2008		
	Mailing Address 2670 Briggs Ave		Transaction ID: SA11AI.7154		
	City Bronx	State NY	Zip Code 10458	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		Payroll Deduction		
	Name of Employer NYC Parks Dept.	Occupation City Park Worker	Aggregate Year-to-Date 240.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Lenora Gates		Date of Receipt MM / DD / YYYY 12 / 30 / 2008		
	Mailing Address 112-23 196th St.		Transaction ID: SA11AI.7158		
	City St. Albans	State NY	Zip Code 11412	Amount of Each Receipt this Period 5.00	
	FEC ID number of contributing federal political committee. C		Payroll Deduction		
	Name of Employer DC 37, Local 1549	Occupation Vice President, Local 1549	Aggregate Year-to-Date 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Oliver Gray		Date of Receipt MM / DD / YYYY 12 / 30 / 2008		
	Mailing Address 655 E. 14th Street		Transaction ID: SA11AI.7159		
	City New York	State NY	Zip Code 10009	Amount of Each Receipt this Period 80.00	
	FEC ID number of contributing federal political committee. C		Payroll Deduction		
	Name of Employer District Council 37, AFSC-ME	Occupation Associate Director	Aggregate Year-to-Date 1020.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	▶	105.00
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 14 / 31
	<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 (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Chandler Henderson		Date of Receipt MM / DD / YYYY 12 / 30 / 2008
	Mailing Address 367 Monroe		Transaction ID: SA11AI.7160
	City Brooklyn	State NY	Zip Code 11221
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.00
	Name of Employer DC 37	Occupation Council Representative	Payroll Deduction

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.00
---	------------------------------------

B.	Full Name (Last, First, Middle Initial) Mathildegl Holguin		Date of Receipt MM / DD / YYYY 12 / 30 / 2008
	Mailing Address 35-33 64th St 1a		Transaction ID: SA11AI.7161
	City Woodside	State NY	Zip Code 11377
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer NYC Social Services Dept	Occupation Eligibility Specialist	Payroll Deduction

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00
---	------------------------------------

C.	Full Name (Last, First, Middle Initial) Anderson Hyland		Date of Receipt MM / DD / YYYY 12 / 30 / 2008
	Mailing Address 751 E. 89th St #5		Transaction ID: SA11AI.7163
	City brooklyn	State NY	Zip Code 11236
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer DC 37, Local 420	Occupation Local 420 staff	Payroll Deduction

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00
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SUBTOTAL of Receipts This Page (optional)	56.00
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 / 31
	<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 (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Barbara Ingram-Edmonds		Date of Receipt
	Mailing Address 34 douth Mill Rd		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	West Winsor	NJ	08550
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7164
Name of Employer DC 37		Occupation Director of Field Operators	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1040.00"/>	<input type="text" value="80.00"/>
			Payroll Deduction

B.	Full Name (Last, First, Middle Initial) Dorothy Jelks		Date of Receipt
	Mailing Address 340 Williams		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Brooklyn	NY	11207
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7165
Name of Employer NYC Clerial Administration		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	<input type="text" value="20.00"/>
			Payroll Deduction

C.	Full Name (Last, First, Middle Initial) amy Kadlub		Date of Receipt
	Mailing Address 115 Douglas Rd		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	SI	NY	10304
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7166
Name of Employer DC 37		Occupation HR Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="212.00"/>	<input type="text" value="20.00"/>
			Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="120.00"/>
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: (check only one)	PAGE 16 / 31
	<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 (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Barbara Kairson		Date of Receipt MM / DD / YYYY 12 / 30 / 2008		
	Mailing Address 43 Hamilton Terrence		Transaction ID: SA11AI.7168		
	City New York	State NY	Zip Code 10031	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		Payroll Deduction		
	Name of Employer District Council 37, AFSC-ME	Occupation Director of DC 37 Education Fund	Aggregate Year-to-Date 255.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Madonna Knight		Date of Receipt MM / DD / YYYY 12 / 30 / 2008		
	Mailing Address 282 E 35th Street		Transaction ID: SA11AI.7169		
	City Brooklyn	State NY	Zip Code 11203	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C		Payroll Deduction		
	Name of Employer District Council 37, AFSC-ME	Occupation Council Representative	Aggregate Year-to-Date 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Clifford Koppelman		Date of Receipt MM / DD / YYYY 12 / 30 / 2008		
	Mailing Address 1270 E 19 Street, #1J		Transaction ID: SA11AI.7170		
	City Brooklyn	State NY	Zip Code 11230	Amount of Each Receipt this Period 60.00	
	FEC ID number of contributing federal political committee. C		Payroll Deduction		
	Name of Employer District Council 37, AFSC-ME	Occupation Grievance Representative	Aggregate Year-to-Date 530.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional)	▶	105.00
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 / 31
	<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 (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Jane Latour		Date of Receipt MM / DD / YYYY 12 / 30 / 2008
	Mailing Address 72 Seaman apt 6b		Transaction ID: SA11AI.7171
	City New York	State NY	Zip Code 10034
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer District Council 37	Occupation Associate Editor	Payroll Deduction
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) Eugene Lawrence		Date of Receipt MM / DD / YYYY 12 / 30 / 2008
	Mailing Address 2760 Grand Concourse Apt 1B		Transaction ID: SA11AI.7172
	City Bronx	State NY	Zip Code 10458
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer NYC Parks & Recreation Ad-min	Occupation Associate Park Service Worker	Payroll Deduction
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) Peter Leon		Date of Receipt MM / DD / YYYY 12 / 30 / 2008
	Mailing Address 183-55 Babylon Ave.		Transaction ID: SA11AI.7173
	City St. Albans	State NY	Zip Code 11412
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
	Name of Employer District Council 37, Local 420	Occupation Local 420 Staff	Payroll Deduction
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional)	▶	95.00
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 / 31
	<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 (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Marva Lewis		Date of Receipt
	Mailing Address 5700 Arlington Ave 9u		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 0 / 2 0 0 8
	City	State	Zip Code
	Riverdale	NY	10471
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7174
Name of Employer DC37		Occupation Division Director	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 236.00	<input type="text"/> 20.00
Payroll Deduction			

B.	Full Name (Last, First, Middle Initial) Tanya Mayers-Dunn		Date of Receipt
	Mailing Address 6 Crecent Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 0 / 2 0 0 8
	City	State	Zip Code
	Hillcrest	NY	10977
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7176
Name of Employer DC 37		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 638.82	<input type="text"/> 49.14
Payroll Deduction			

C.	Full Name (Last, First, Middle Initial) Terrence Miller		Date of Receipt
	Mailing Address 417 Prospect Pl		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 0 / 2 0 0 8
	City	State	Zip Code
	Brooklyn	NY	11238
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7177
Name of Employer NYC Police Department		Occupation Senior Police Admin. Aide	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text"/> 20.00
Payroll Deduction			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 89.14
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: (check only one)	PAGE 19 / 31
	<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 (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Veronica Montgomery		Date of Receipt
	Mailing Address 202 Wycham Ct.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Slingerlands	NY	12159
	FEC ID number of contributing federal political committee.	C <input type="text"/>	
Name of Employer Local 372		Occupation President of Local 372	Transaction ID: SA11AI.7178
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 248.00	<input type="text"/> 20.00
			Payroll Deduction

B.	Full Name (Last, First, Middle Initial) Edwin Nergon		Date of Receipt
	Mailing Address 80 East 110th St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	New York	NY	10029
	FEC ID number of contributing federal political committee.	C <input type="text"/>	
Name of Employer city of New York		Occupation	Transaction ID: SA11AI.7180
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 650.00	<input type="text"/> 50.00
			Payroll Deduction

C.	Full Name (Last, First, Middle Initial) Ralph Pepe		Date of Receipt
	Mailing Address 125 E.17th Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	New York	NY	10003
	FEC ID number of contributing federal political committee.	C <input type="text"/>	
Name of Employer District Council 37, AFSC-ME		Occupation Real Estate Manager	Transaction ID: SA11AI.7181
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 250.00	<input type="text"/> 20.00
			Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 90.00
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: (check only one)	PAGE 20 / 31
	<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 (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Elnora Phillips		Date of Receipt
	Mailing Address 110 E 99th Street apt. 12F		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	New York	NY	10029
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7182
Name of Employer Department of Social Services		Occupation Case Worker	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
		<input type="text" value="260.00"/>	Payroll Deduction

B.	Full Name (Last, First, Middle Initial) Deborah Pitts		Date of Receipt
	Mailing Address 4286 Conashaugh Lks		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Milford	PA	18337
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7183
Name of Employer DC37		Occupation Greiv. Rep.	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
		<input type="text" value="260.00"/>	Payroll Deduction

C.	Full Name (Last, First, Middle Initial) Togba Porte		Date of Receipt
	Mailing Address PO Box 20346		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Staten Island	NY	10302
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7185
Name of Employer District Council 37 Local 420		Occupation Vice President Local 420	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
		<input type="text" value="260.00"/>	Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="60.00"/>
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: (check only one)	PAGE 21 / 31
	<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 (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Walthene Primus	Date of Receipt MM / DD / YYYY 12 / 30 / 2008
	Mailing Address 137-29 Bedell Street	Transaction ID: SA11AI.7186
	City State Zip Code Springfield Grdns NY 11413	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction
Name of Employer District Council 37, AFSC-ME	Occupation Grievance Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

B.	Full Name (Last, First, Middle Initial) Sheila Rabb	Date of Receipt MM / DD / YYYY 12 / 30 / 2008
	Mailing Address 219-18 Alecia ave	Transaction ID: SA11AI.7187
	City State Zip Code Laurelton NY 11413	Amount of Each Receipt this Period 16.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction
Name of Employer DC37	Occupation Council Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.00	

C.	Full Name (Last, First, Middle Initial) Wendell Reid	Date of Receipt MM / DD / YYYY 12 / 30 / 2008
	Mailing Address 29 Marion Ave	Transaction ID: SA11AI.7188
	City State Zip Code Hartsdale NY 10530	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction
Name of Employer DC37	Occupation Council Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

SUBTOTAL of Receipts This Page (optional)	▶	76.00
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 / 31
	<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 (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Michael Riggio	Date of Receipt MM / DD / YYYY 12 / 30 / 2008
	Mailing Address 38-24 Corporal Stone S	Transaction ID: SA11AI.7189
	City State Zip Code Bayside NY 11361	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction
Name of Employer DC37	Occupation Council Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

B.	Full Name (Last, First, Middle Initial) Lillian Roberts	Date of Receipt MM / DD / YYYY 12 / 30 / 2008
	Mailing Address 2373 Broadway	Transaction ID: SA11AI.7191
	City State Zip Code New York NY 10024	Amount of Each Receipt this Period 220.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction
Name of Employer District Council 37, AFSC-ME	Occupation Executive Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2750.00	

C.	Full Name (Last, First, Middle Initial) Edward Rodriquez	Date of Receipt MM / DD / YYYY 12 / 30 / 2008
	Mailing Address 2 Mountain View Dr	Transaction ID: SA11AI.7192
	City State Zip Code Thiells NY 10984	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction
Name of Employer District Council 37 Local 1549	Occupation President Local 1549	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	▶	265.00
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 23 / 31
(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 (D-C37PEOPL

A.

Full Name (Last, First, Middle Initial)
Paulette Sher

Mailing Address 381 Edgegrove Avenue

City Staten Island State NY Zip Code 10312

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

Name of Employer NYC Off Track Betting Occupation Betting Clerk

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 30 / 2008
Transaction ID: SA11AI.7193

Amount of Each Receipt this Period 40.00

Payroll Deduction

B.

Full Name (Last, First, Middle Initial)
Jose Sierra

Mailing Address 130 South Highland

City Ossining State NY Zip Code 10562

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

Name of Employer District Council 37, AFSC-ME Occupation Division Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt 12 / 30 / 2008
Transaction ID: SA11AI.7194

Amount of Each Receipt this Period 40.00

Payroll Deduction

C.

Full Name (Last, First, Middle Initial)
Kyle Simmons

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 Occupation Grievance Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 30 / 2008
Transaction ID: SA11AI.7195

Amount of Each Receipt this Period 20.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► 100.00

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 24 / 31
(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 (D-C37PEOPL

A.

Full Name (Last, First, Middle Initial)
Yvonne singh

Mailing Address 501 E 145th St

City State Zip Code
Bronx NY 10454

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

Name of Employer Occupation
TBTA Clerical Assoc.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.7196

Amount of Each Receipt this Period
20.00

Payroll Deduction

B.

Full Name (Last, First, Middle Initial)
David Stevens

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
dc37

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 477.12

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.7198

Amount of Each Receipt this Period
39.76

Payroll Deduction

C.

Full Name (Last, First, Middle Initial)
Dennis Sullivan

Mailing Address 94 Buckingham Rd.

City State Zip Code
Yonkers NY 10701

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

Name of Employer Occupation
District Council 37 Director of Research and Negotiations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 670.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.7199

Amount of Each Receipt this Period
40.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► 99.76

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: PAGE 25 / 31
(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 (D-C37PEOPL

A.

Full Name (Last, First, Middle Initial)
Carol thomas

Mailing Address PO Box 618 Old Chelsea Sta

City NY State NY Zip Code 10113

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

Name of Employer DC37 Occupation Greiv. Rep.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt: 12 / 30 / 2008
Transaction ID: SA11AI.7200
Amount of Each Receipt this Period: 40.00
Payroll Deduction

B.

Full Name (Last, First, Middle Initial)
Jeffrey thompson

Mailing Address 1949 McGraw Ave

City Bronx State NY Zip Code 10462

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

Name of Employer NYC OTB Occupation Assist Acctg.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 12 / 30 / 2008
Transaction ID: SA11AI.7202
Amount of Each Receipt this Period: 20.00
Payroll Deduction

C.

Full Name (Last, First, Middle Initial)
John Townsend

Mailing Address 29 Westwood Ave.

City Deer Park State NY Zip Code 11729

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

Name of Employer District Council 37, ASFC-ME Occupation Grievance Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt: 12 / 30 / 2008
Transaction ID: SA11AI.7204
Amount of Each Receipt this Period: 16.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ▶ 76.00

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 / 31
	<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 (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) James Tucciarelli		Date of Receipt
	Mailing Address 361 Mill Rd.		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Staten Island	NY	10306
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer District Council 37, AFSC-ME		Occupation Grievance Representative	Transaction ID: SA11AI.7205
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="520.00"/>	<input type="text" value="40.00"/>
			Payroll Deduction

B.	Full Name (Last, First, Middle Initial) Esther Tucker		Date of Receipt
	Mailing Address P.O. Box 934 Lincoln Station		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	New York	NY	10037
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer District Council 37, ASFC-ME		Occupation Grievance Representative	Transaction ID: SA11AI.7206
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="20.00"/>
			Payroll Deduction

C.	Full Name (Last, First, Middle Initial) Maf Uddin		Date of Receipt
	Mailing Address 161-17 85th Ave		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Jamiaca Hills	NY	11432
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer DC37		Occupation Treasurer	Transaction ID: SA11AI.7207
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="260.00"/>	<input type="text" value="20.00"/>
			Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="80.00"/>
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: (check only one)	PAGE 27 / 31
	<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 (D-C37PEOPL

A.	Full Name (Last, First, Middle Initial) Robin Vall		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 0 / 2 0 0 8
	Mailing Address 7508 Bell Blvd apt 1n		Transaction ID: SA11AI.7209
	City Bayside	State NY	Zip Code 11364
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer NY Dept. of CAS	Occupation Clerical Associate	Payroll Deduction

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00
---	------------------------------------

B.	Full Name (Last, First, Middle Initial) Martin Velasquez		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 0 / 2 0 0 8
	Mailing Address 96 Wenlock Street		Transaction ID: SA11AI.7210
	City Staten Island	State NY	Zip Code 10303
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer NY State Board of Higher Educa	Occupation City Laborer	Payroll Deduction

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00
---	------------------------------------

C.	Full Name (Last, First, Middle Initial) Barbara Watkins		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 0 / 2 0 0 8
	Mailing Address 294 osborn St		Transaction ID: SA11AI.7211
	City Brooklyn	State NY	Zip Code 11212
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
	Name of Employer DC37	Occupation	Payroll Deduction

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00
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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: PAGE 28 / 31
(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 (D-C37PEOPL

A. Full Name (Last, First, Middle Initial)
Barbara Wehner

Mailing Address 269 73rd St

City State Zip Code
bklyn NY 11209

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

Name of Employer DC37 Occupation Greiv. Rep.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.7212

Amount of Each Receipt this Period 20.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Kenneth Wheeler

Mailing Address 1100 Teller Ave.
apt 2G

City State Zip Code
Bronx NY 10456

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

Name of Employer NYC Parks & Recreation Ad-min Occupation Associate Park Service Worker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.7214

Amount of Each Receipt this Period 20.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Chris Wilgenkamp

Mailing Address 2415 wolson Ave

City State Zip Code
Bronx NY 10469

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

Name of Employer DC37 Occupation Asst Divison Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.7215

Amount of Each Receipt this Period 20.00

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: PAGE 29 / 31
(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 (D-C37PEOPL

A.

Full Name (Last, First, Middle Initial) Sheryl Williams		Date of Receipt <table border="1" style="font-size: small; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>2</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		3	0		2	0	0	8													
Mailing Address 475 Willson Avenue Apt 1D		Transaction ID: SA11AI.7217																				
City Brooklyn	State NY	Zip Code 11221																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>20.00</td></tr> </table>	20.00																			
20.00																						
Name of Employer Clerical Assistant	Occupation NYC Finance Administration	Payroll Deduction																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>260.00</td></tr> </table>	260.00																				
260.00																						

B.

Full Name (Last, First, Middle Initial) Wanda Williams		Date of Receipt <table border="1" style="font-size: small; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>2</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		3	0		2	0	0	8													
Mailing Address 25 Roy Lane		Transaction ID: SA11AI.7218																				
City Highland	State NY	Zip Code 12528																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>25.00</td></tr> </table>	25.00																			
25.00																						
Name of Employer District Council 37, AFSC-ME	Occupation Director of Political Action & Legisla	Payroll Deduction																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>265.00</td></tr> </table>	265.00																				
265.00																						

C.

Full Name (Last, First, Middle Initial) Mercedes Youman		Date of Receipt <table border="1" style="font-size: small; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>2</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		3	0		2	0	0	8													
Mailing Address 345 E 93rd St 16h		Transaction ID: SA11AI.7220																				
City NY	State NY	Zip Code 10128																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>40.00</td></tr> </table>	40.00																			
40.00																						
Name of Employer NYC Health Dept.	Occupation Public Health Nurse	Payroll Deduction																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>520.00</td></tr> </table>	520.00																				
520.00																						

SUBTOTAL of Receipts This Page (optional)	<table border="1" style="width: 100%;"><tr><td>85.00</td></tr></table>	85.00
85.00		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 30 / 31	
	(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"/> 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 (D-C37PEOPL

A.

Full Name (Last, First, Middle Initial) Timothy Young	
Mailing Address 186-17 Foch Blvd.	
City St. Albans	State NY
Zip Code 11412	
FEC ID number of contributing federal political committee. C	
Name of Employer City Debris Remover	Occupation NYC Department of Transportation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00

Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 0 / 2 0 0 8
Transaction ID: SA11AI.7219
Amount of Each Receipt this Period 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	20.00
TOTAL This Period (last page this line number only)	2286.60

**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)

PAGE 31 / 31

<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 (D-C37PEOPL

Full Name (Last, First, Middle Initial)

A. AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - PEOPLE, QUALIFIED

Mailing Address 1625 L STREET NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
Transfer

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB22.7128

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2008

Amount of Each Disbursement this Period

96187.41

SUBTOTAL of Disbursements This Page (optional)

96187.41

TOTAL This Period (last page this line number only)

96187.41