NOTE: ON: ON: ON: OSMALINGS

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVEU PAGE 1/15 2020 FEB -3 AM 11: 06

	To Other Hair All Authorized Con	(Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼ Example: over the II	typing, type 12FE4M5	
DISTRICT 1199C NAT'L	UNION OF HOSPITAL & HEALTH CA	RE EMPLOYEES POLITICA	AL ACTION FUND
	111111111111		
ADDRESS (number and street)	1319 LOCUST STREET		
▼ Check if different			
than previously reported. (ACC)	PHILA	L PA	19107
2. FEC IDENTIFICATION N	UMBER ▼ CITY ▲	STATE ▲	ZIP CODE A
C C00034066	3. IS THIS	NEW AME (N) OR (A)	NDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Feb 20 (M2) Report Due On:	May 20 (M5) Aug 20	Year Only)
(a) Quarterly Reports:	Mar 20 (M3)	Jun 20 (М6) Sep 20	(M9) Dec 20 (M12) (Non-Election Year Only)
April 15	Apr 20 (M4)	Jul 20 (M7) Oct 20	(M10) Jan 31 (YE)
Quarterly Report ((C) 12-Day Primar	(12P) General (12	(12R) Runoff (12R)
July 15 Quarterly Report (Q2) PRE-Election Report for the: Conve	tion (12C) Special (12	S)
Quarterly Report (Q3)	, , , , , , , , , , , , , , , , , , ,	
January 31 Year-End Report (Floating		In the State of
July 31 Mid-Year Report (Non-electi Year Only) (MY)	on (d) 30-Day POST-Election General Report for the:	l (30G) Runoff (30F	Special (30S)
Termination Report		1 000 1 00000	in the State of
5. Covering Period 0		1	2019
I certify that I have examined t	his Report and to the best of my knowledge	and belief it is true, correct and c	complete.
Type or Print Name of Treasur	Salima PACE		
Signature of Treasurer	88	Date	28 20.20
NOTE: Submission of false, error	eous, or incomplète information may subject the	e person signing this Report to the	penalties of 52 U.S.C. § 30109
Office Use			FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS Page 2 FEC Form 3X (Rev. 05/2016) Write or Type Committee Name DISTRICT 1199C NAT'L UNION OF HOSPITAL & HEALTH CARE EMPLOYEES POLITICAL ACTION FUND 07 01 2019 12 31 2019 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 5875.10 January 1, 2019 (b) Cash on Hand at 4774.22 Beginning of Reporting Period...... 17245.13 29394.25 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 22019,35 35269.35 6(a) and 6(c) for Column B) 17978.37 31228.37 Total Disbursements (from Line 31)...... Cash on Hand at Close of Reporting Period 4040.98 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 121866.00 Schedule C and/or Schedule D) 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. 05/2016)

pts

Page 3

Write or Type Committee Name

DISTRICT 1199C NAT'L UNION OF HOSPITAL & HEALTH CARE EMPLOYEES POLITICAL ACTION FUND

R	eport Covering the Period: From:	7 01 2019 To	o: 12 31 2019
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	0.00	0.00
	(ii) Unitemized	12116.76	24265.88
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	12116,76	24265.88
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00
	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)▶	12116.76	24265.88
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	5128.37	5128.37
17	to Federal Candidates and Other Political Committees Other Federal Receipts	0.00	0.00
	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	0.00
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
10	Total Receipts (add Lines 11(d),	•	
13.	12, 13, 14, 15, 16, 17, and 18(c))	17245.13	29394.25
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	17245.13	29394.25

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

	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)	10tal lills Fallou	Catendar Jear-10-Date	
	(i) Federal Share	0.00	0.00	
	(ii) Non-Federal Share	0.00	0.00	
	(b) Other Federal Operating Expenditures	10728.37	13878.37	
	(c) Total Operating Expenditures			
	(add 21(a)(i), (a)(ii), and (b))▶	10728.37	13878.37	
22.	Transfers to Affiliated/Other Party Committees	0.00	0.00	
23.	Contributions to Federal Candidates/Committees and Other Political Committees	1000.00	1000.00	
24.	Independent Expenditures			
25.	(use Schedule E)	0.00	0.00	
	(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00	
26.	Loan Repayments Made	0.00	0.00	
27.	Loans Made	0.00	0.00	
	Refunds of Contributions To: (a) Individuals/Persons Other			
	Than Political Committees	0.00	0.00 	
	(b) Political Party Committees	0.00	0.00	
	(c) Other Political Committees (such as PACs)	0.00	0.00	
	(d) Total Contribution Refunds			
	(add Lines 28(a), (b), and (c))	0.00	0.00	
29.	Other Disbursements (Including			
	Non-Federal Donations)	6250.00	16350.00	
30.	Federal Election Activity (52 U.S.C. § 30101 (a) Allocated Federal Election Activity (from Schedule H6)	(20))		
	(i) Federal Share	0.00	0.00	
	(ii) "Levin" Share	0.00	0.00	
	(b) Federal Election Activity Paid Entirely With Federal Funds			
	(c) Total Federal Election Activity (add	0.00	0,00	
	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))	17978.37	31228.37	
32.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	17978.37	31228.37 31228.37	

DETAILED SUMMARY PAGE of Disbursements

	FEC Form 3X (Rev. 05/2016)		Page 5
	III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) (from Line 11(d), page 3)	12116.76	24265.88
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	12116.78	24265.88
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	10728.37	13878.37
37.	Offsets to Operating Expenditures (from Line 15, page 3)	5128.37	5128.37
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	5600.00	8750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 OF 15 (check only one)
ILEMNZED KECELLIS	for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 X 15 16 17
Any information copied from such Reports and State or for commercial purposes, other than using the na	ments may not be sold or used by any pe me and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) DISTRICT 1199C NAT'L UNION OF HO	OSPITAL & HEALTH CARE EMPL	OYEES POLITICAL ACTION FUND
Full Name of Individual (Last, First, Middle Initial) A. DISTRICT 1199C BUILDING FUND, , , ,	or Full Organization Name	Date of Receipt
Mailing Address 1319 LOCUST STREET City	State Zip Code	10 01 2019 Transaction ID : SA15.4188
PHILADELPHIA	PA 19107	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2889.13
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item DEPOSIT IN ERROR
	aggregate Year-to-Date ▼ 2889.13	
Full Name of Individual (Last, First, Middle Initial) B. NATIONAL UNION OF HHÇE, , , ,	or Full Organization Name	Date of Receipt
Mailing Address 1319 LOCUST STREET	late out	10 15 2019
City PHILADELPHIA	State Zip Code PA 19107	Transaction ID : SA15.4187 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2239.24
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item DEPOSIT IN ERROR
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2239,24	
Full Name of Individual (Last, First, Middle Initial)	or Full Organization Name	Date of Receipt
Mailing Address		Ham , Load , Lakadak
City	State Zip Code	Amount of Each Receipt this Period
E	C	
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
	aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		5128.37
TOTAL This Period (last page this line number only	/)	5128.37

S

SC	HEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 7 OF 15
ITE	MIZED DISBURSEMENTS	for each o	rate schedule(s) category of the Summary Page	(check only X 21b 28a	
Any or fe	information copied from such Reports and Staten or commercial purposes, other than using the nam	nents may n	ot be sold or use	d by any perso	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (IN FUII) DISTRICT 1199C NAT'L UNION OF HO				
	Full Name (Last, First, Middle Initial) BOARD OF ETHICS, CITY OF PH	ILADELF	PHIA, , ,		Date of Disbursement
٨	Mailing Address 1401 JOHN F. KENNEDY BLVD				12 20 2019
F	PHILADELPHIA	State PA	Zip Code 19102		FEC identification Number
_	Purpose of Disbursement SETTLEMENT AGREEMENT Candidate Name		·	Category/	Transaction ID : SB21B.4107 Amount of Each Disbursement this Period
ō		Primary	General	Туре	500.00
8	President District:	Other (spec	ify) ▼		Memo Item
B.	Full Name (Last, First, Middle Initial) CITIZENS BANK, , , , Malling Address P.O. BOX 7000				Date of Disbursement
i	City PROVIDENCE Purpose of Disbursement	State RI	Zip Code 02940		FEC Identification Number
	BANK FEES Candidate Name	·		Category/ Type	Transaction ID : SB21B.4109 Amount of Each Disbursement this Period
	Office Sought: House Disbursen Senate President State: District:	nent For: Primary Other (spec	General		100.00 Memo Item
	Full Name (Last, First, Middle Initial) DISTRICT 1199C BUILDING FUNI	D, , , ,			Date of Disbursement
N	Mailing Address 1319 LOCUST STREET				10 29 2019
F	PHILADELPHIA	State PA	Zip Code 19107		FEC Identification Number
_	Purpose of Disbursement RETURN OF DEPOSIT IN ERROR Candidate Name		<u></u>	Category/ Type	Transaction ID : SB21B.4105 Amount of Each Disbursement this Period
	H H	nent For: Primary Other (spec	☐ General		2889.13 2889.13 Memo Item
gu	BTOTAL of Disbursements This Page (optional)				3489.13
	TAL This Period (last page this line number only).				

S

S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 8 OF 15
IT	EMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only	one)
			Summary Page	X 21b	22 23 26 27 28b 28c 29 30b
۲,	y Information copied from such Reports and Statem	l nonto movi n	at he sold or use	1 1 1	
or	for commercial purposes, other than using the nam	e and addre	ess of any politica	of by any personal committee to	solicit contributions from such committee.
abla	NAME OF COMMITTEE (In Full)				
2	DISTRICT 1199C NAT'L UNION OF HO	SPITAL 8	HEALTH CA	RE EMPLO	YEES POLITICAL ACTION FUND
	Full Name (Last, First, Middle Initial)	_			Date of Disbursement
۸.	DISTRICT 1199C GENERAL FUNI	٠, , , ,		•	
	Mailing Address 1319 LOCUST STREET				07 12 2019
	- ·	State	Zip Code		FEC Identification Number
	PHILADELPHIA Purpose of Disbursement	PA	19107		Samuel and the same of the sam
	REIMBURSEMENT				C
	Candidate Name			Category/	Transaction ID : SB21B.4098 Amount of Each Disbursement this Period
				Туре	
	Office Sought: House Disbursen				2500.00
	⊢	Primary Other (spec	☐ General		***
	State: District:		,, 4		Memo Item
_	Full Name (Last, First, Middle Initial)	_			
В.	MONROE PRESS INC, , , ,				Date of Disbursement
	Mailing Address 4674 CANTON STREET		· · · · · · · · · · · · · · · · · · ·		08 23 2019
	City	State	Zip Code		
	· ·	PA	19127		FEC Identification Number
	Purpose of Disbursement CONSULTING FEES		, I	777	C
	Candidate Name				Transaction ID: SB21B.4100
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period
	Office Sought: House Disburser	nent For:		туре	1600.00
	Senate	Primary	General		hander 12-12-11-11-11-11-11-11-11-11-11-11-11-1
	<u> </u>	Other (spec	ify)		Memo Item
_	State: District:				
C.	Full Name (Last, First, Middle Initial) MONROE PRESS INC, , , ,				Date of Disbursement
	WONTOL I NESS ING, , , ,		<u> </u>		
	Mailing Address 4674 CANTON STREET				10 11 2019
	,	State	Zip Code		FEC Identification Number
	PHILADELPHIA Purpose of Disbursement	PA	19127		
	CONSULTING FEES				C
	Candidate Name		·	Category/ Type	Transaction ID : SB21B.4102 Amount of Each Disbursement this Period
	Office Sought: House Disburserr	ent For:			900.00
		Primary	General		
	State: District:	Other (spec	ity) ▼		Memo Item
Г					
s	UBTOTAL of Disbursements This Page (optional)	<u>i.</u>		<u> </u>	5000.00
7	OTAL This Period (last page this line number only).	***************************************		>	

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 9 OF 15	
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	one)	
	for each category of the Detailed Summary Page	X 21b	22 23 26 27	
A. I. C. A.		28a	28b 28c 29 30b	
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan	nents may not be sold or used ne and address of any political	committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)				
DISTRICT 1199C NAT'L UNION OF HO	SPITAL & HEALTH CAR	RE EMPLO	YEES POLITICAL ACTION FUND	
/	 	· · · · · · · · · · · · · · · · · · ·		
Full Name (Last, First, Middle Initial) A. NATIONAL UNION OF HHCE, , , ,		1	Date of Disbursement	
			WHU	
Mailing Address 1319 LOCUST STREET			10 29 2019	
City	State Zip Code			
PHILADELPHIA	PA 19107		FEC Identification Number	
Purpose of Disbursement RETURN OF DEPOSIT IN ERROR	·		C	
Candidate Name	· · · · · · · · · · · · · · · · · · ·		Transaction ID : SB21B.4103	
·		Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disburser	ment For:	.,,,,,	2239.24	
Senate	Primary General	Ì	hand the state of	
President State: District:	Other (specify) ▼	1	Memo Item	
Full Name (Last, First, Middle Initial)				
B.			Date of Disbursement	
			Mand, Lord, Aganaga	
Mailing Address			A Record of the second of the	
City	State Zip Code		FEC Identification Number	
Purpose of Disbursement			C	
Candidate Name		Category/	Amount of Each Disbursement this Period	
Office Sought: House Disburser	ment For	Туре		
Senate Disburser	Primary General			
President	Other (specify)		Memo Item	
State: District:	···		I Metho Itali	
Full Name (Last, First, Middle Initial)			Data of Disharanana	
C.		ł	Date of Disbursement	
Mailing Address			HHW , GIG , VIYIV	
City	State Zip Code			
	State Zip Code	ŀ	FEC Identification Number	
Purpose of Disbursement			C	
Candidate Name				
Sandado Hamo		Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disburser	nent For:			
Senate	Primary General		TOTAL CONTRACTOR OF THE PROPERTY OF THE PROPER	
President State: District:	Other (specify) ▼		Memo Item	
one. Printi.				
SUBTOTAL of Disbursements This Page (optional)				
TOTAL This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X)	<u> </u>	FOR LINE NU	JMBER: PAGE 10 OF 15	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only or	ne)	
	Detailed Summary Page	21b 28a	22 X 23 26 27 28b 28c 29 30b	
Any information copied from such Reports and Statem		y any person	for the purpose of soliciting contributions	
or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) DISTRICT 1199C NAT'L UNION OF HO	SPITAL & HEALTH CARE	E EMPLOYI	EES POLITICAL ACTION FUND	
Full Name (Last, First, Middle Initial)			Date of Dishares	
A. EMGAGE PAC			Date of Disbursement	
Mailing Address 1140 3RD STREET NE			12 05 2019	
	State Zip Code		FEC Identification Number	
WASHINGTON Purpose of Disbursement	DC 20002		C C00453704	
CONTRIBUTION			Transaction ID : SB23.4140	
Candidate Name	C	57-	Amount of Each Disbursement this Period	
Office Sought: House Disbursen	nent For:	Турө	1000.00	
<u> </u>	Primary General		Took and the last	
President State: District:	Other (specify) ▼		Memo Item	
Full Name (Last, First, Middle Initial)		'		
B.		1	Date of Disbursement	
Malling Address			Many , Load , Landard	
Mailing Address				
City	State Zip Code		FEC Identification Number	
Purpose of Disbursement			C	
Candidate Name				
Sandingio Manio	c	ategory/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disbursen				
	Primary General Other (specify)	'		
State: District:	Onioi (apoully)		Memo Item	
Full Name (Last, First, Middle Initial)				
C.			Date of Disbursement	
Mailing Address			WWW. / DED / VIVEVOV	
City	State Zip Code			
			FEC Identification Number	
Purpose of Disbursement				
Candidate Name		ategory/	Amount of Each Disbursement this Period	
Office Sought: House Disbursen		Турв		
	Primary General			
President	Other (specify) ▼		Memo Item	
State: District:				
SUBTOTAL of Disbursements This Page (optional)				
TOTAL This Period (last page this line number only)				

5

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 11 OF 15
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b 28a	22 23 26 27 28b 28c X 29 30b
Any information copied from such Reports and Statem	nents may not be sold or used	by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the name	ne and address of any political	committee to	solicit contributions from such committee.
NAME OF COMMITTEE (IN Full) DISTRICT 1199C NAT'L UNION OF HO	SPITAL & HEALTH CAR	RE EMPLO	YEES POLITICAL ACTION FUND
Full Name (Last, First, Middle Initial)	TTCC		Date of Disbursement
4. 51ST WARD EXECUTIVE COMMI	1166,,,,		Date of Discussional
Mailing Address 5030 SPRINGFIELD AVENUE			07 12 2019
,	State Zip Code		FEC Identification Number
PHILADELPHIA Purpose of Disbursement	PA 19143		C
CÓNTRIBUTION	[Transaction ID : SB29.4111
Candidate Name		Category/	Amount of Each Disbursement this Period
Office Sought: House Disbursen	nent For:	Туре	1000.00
Senate	Primary General	ł	
President State: District:	Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial)			
B. CITIZENS FOR HUGHES, , , ,			Date of Disbursement
			10 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
Mailing Address 4950 PARKSIDE AVENUE	New The Control		10 27 2019
7	State Zip Code PA 19131		FEC Identification Number
Purpose of Disbursement CONTRIBUTION			С
Candidate Name			Transaction ID: SB29.4121
Canadato muno		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursen	_		500.00
	Primary General		
State: District:	Other (specify)		Memo Item
Full Name (Last, First, Middle Initial)			
COMMITTEE TO ELECT JUDY MO	OORE, , , ,		Date of Disbursement
Malling Address P.O. BOX 2119			10 18 2019
	<u> </u>		Installment Emples early Burnel Property
City PHILADELPHIA	State Zip Code PA 19154		FEC Identification Number
Purpose of Disbursement			C
CONTRIBUTION Candidate Name			Transaction ID : SB29.4119
Canadate Hane		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursen			1000.00
 1	Primary General Other (specify) ▼		
State: District:	onial (sheeris) A	ļ	Memo Item
SUBTOTAL of Disbursements This Page (optional)			2500.00
TOTAL Title Dudad floor countries		<u></u>	
TOTAL This Period (last page this line number only).	•••••••••••••••••••••••••••••••••••••••	······	

$SCHEDULE\;B\;\;(FEC\;Form\;3X)$		FOR LINE	NUMBER: PAGE 12 OF 15	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	21b 28a	22 23 26 27 28b 28c X 29 30b	
Any information copied from such Reports and Statem	ents may not be sold or used			
or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full) DISTRICT 1199C NAT'L UNION OF HO	SPITAL & HEALTH CAR	E EMPLO	YEES POLITICAL ACTION FUND	
Full Name (Last, First, Middle Initial)			Date of Distriction	
A. DEMOCRATIC COUNTY EXEC CO	OMM., , , ,		Date of Disbursement	
Mailing Address 210 SPRING GARDEN STREET			07 01 2019	
·	itate Zip Code		FEC Identification Number	
PHILADELPHIA Purpose of Disbursement	PA 19123		C	
CONTRIBUTION			Transaction ID : SB29.4131	
Candidate Name		Category/	Amount of Each Disbursement this Period	
Office Sought: House Disbursem	nent For:	Туре	400.00	
_	Primary General		The Constitution of the Co	
· · · · · · · · · · · · · · · · · · ·	Other (specify) ▼		Memo Item	
State: District: Full Name (Last, First, Middle Initial)			ins.	
FRIENDS OF ISABELLA FITZGER	ALD		Date of Disbursement	
			Naw (Pap) (And	
Mailing Address P.O. BOX 6580			12 05 2019	
	itate Zip Code PA 19138		FEC Identification Number	
Purpose of Disbursement				
CONTRIBUTION Candidate Name			Transaction ID: SB29.4129	
Candidate Name	(Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disbursem	nent For:		500.00	
	Primary General			
State: District:	Other (specify)		Memo Item	
Full Name (Last, First, Middle Initial)				
FRIENDS OF JOANNA MC CLIINT	ON, , , ,	Ì	Date of Disbursement	
Mailing Address P.O. BOX 1668			07 24 2019	
Olle	70.0-4-			
City S PHILADELPHIA	itate Zip Code PA 19139		FEC identification Number	
Purpose of Disbursement CONTRIBUTION	f		С	
Candidate Name			Transaction ID : SB29.4113	
) '	Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disbursem			1000.00	
	Primary General Other (specify) ▼			
State: District:			Memo Item	
SUBTOTAL of Disbursements This Page (optional)				
TOTAL This Period float page this line sumber and				
TOTAL This Period (last page this line number only).	••••••			

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 13 OF 15	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	21b 28a	22 23 26 27 28b 28c x 29 30b	
Any information copied from such Reports and Statem	costo mou pet bo cold or upod			
or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
DISTRICT 1199C NAT'L UNION OF HO	SPITAL & HEALTH CAR	RE EMPLO'	YEES POLITICAL ACTION FUND	
Full Name (Last, First, Middle Initial)				
FRIENDS OF LINDA FIELDS, , , ,			Date of Disbursement	
Malling Address 840 FIRST AVENUE			11 07 2019	
· · ·	State Zip Code		FEC Identification Number	
KING OF PRUSSIA Purpose of Disbursement	PA 19406			
CONTRIBUTION			C	
Candidate Name	E.	Calegory/ Type	Transaction ID: SB29.4126 Amount of Each Disbursement this Period	
Office Sought: House Disburser			500.00	
	Primary General Other (specify) ▼		Mana Itan	
State: District:			Memo Item	
Full Name (Last, First, Middle Initial)			Date of Distance 1	
B. FRIENDS OF TRACY GORDON, ,	1 1	ļ	Date of Disbursement	
Mailing Address 1869 N. 65TH STREET	· · · · · · · · · · · · · · · · · · ·		09 25 2019	
	State Zip Code		FEC Identification Number	
PHILADELPHIA Purpose of Disbursement	PA 19142			
CONTRIBUTION			Transaction ID : \$B29.4117	
Candidate Name		Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disbursers	nent For:	-77-	550.00	
<u>├</u> ─	Primary General			
State: District:	Other (specify)	Ì	Memo Item	
Full Name (Last, First, Middle Initial)				
C. GREG FOR PHILLY, , , ,			Date of Disbursement	
Mailing Address P.O. BOX 23904			10 31 2019	
1	State Zip Code		FEC Identification Number	
PHILADELPHIA Purpose of Disbursement	PA 19143		C	
CONTRIBUTION Condidate Name			Transaction ID : SB29.4123	
Candidate Name		Category/ Type	Amount of Each Disbursement this Period	
Office Sought: House Disbursen	nent For:	-76-	500.00	
	Primary General	1		
State: District:	Other (specify) ▼		Memo Item	
SUBTOTAL of Dishusements This Page (optional)				
TOTAL This Period (last page this line number only)				
		•		

S	CHEDULE B (FEC Form 3X) \lceil	·····		FOR LINE I	NUMBER: PAGE 14 OF 15	
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the		(check only	one)	
			ummary Page	21b 28a	22 23 26 27 28b 28c y 29 30b	
Ar	ny information copied from such Reports and Statem	ents may n	ot be sold or use	<u> </u>		
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 FUII) DISTRICT 1199C NAT'L UNION OF HOSPITAL & HEALTH CARE EMPLOYEES POLITICAL ACTION FUND						
_	Full Name (Last, First, Middle Initial)					
A.	PEOPLE FOR PARKER, , , ,				Date of Disbursement	
	Malling Address P.O. BOX 27647				08 30 2019	
	• •	tate	Zip Code		FEC Identification Number	
	PHILADELPHIA Purpose of Disbursement	PA	19118			
	CONTRIBUTION				Transaction ID : SB29.4115	
	Candidate Name		\	Category/	Amount of Each Disbursement this Period	
	Office Sought: House Disbursem	ent For:		Туре	300.00	
	Senate	Primary	General		Complete State Complete State	
	President Ostate: District:	Other (speci	fy) ▼		Memo Item	
	Full Name (Last, First, Middle Initial)					
В.					Date of Disbursement	
	Mailing Address				NEW (POP (VEVEY OY	
	Mailing Address					
	City	tate	Zip Code		FEC Identification Number	
	Purpose of Disbursement		· 1 .	heralencheral	C	
	·					
	andidate Name Category/			Category/	Amount of Each Disbursement this Period	
	Office Sought: House Disbursem	ent For:		Туре	, , , , , , , , , , , , , , , , , , ,	
	 	Primary	General			
	State: District:	Other (speci	ty)		Memo Item	
	Full Name (Last, First, Middle Initial)					
C.					Date of Disbursement	
	Mailing Address				MOM / DOD / YOUR DO	
					hatal laster las	
	City	tate	ZIp Code		FEC Identification Number	
	Purpose of Disbursement		<u> </u>		C	
	Candidate Name					
	Caralletto Halito			Category/ Type	Amount of Each Disbursement this Period	
	Office Sought: House Disbursement For:					
		Primary Other (speci	General			
	State: District:	ogiei (speci	·y) ▼		Memo Item	
SUBTOTAL of Disbursements This Page (optional)						
TOTAL This Period (lest page this line number only)						
•	TOTAL This Period (last page this line number only).					

SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 15 OF 15 FOR LINE NUMBER: (check only one) 9

X 10 NAME OF COMMITTEE (In Full) DISTRICT 1199C NAT'L UNION OF HOSPITAL & HEALTH CARE EMPLOYEES POLITICAL ACTION FUND A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): CONTRIBUTION DEPOSITED INTO WRONG DISTRICT 1199C NUHHCE PAC, , , , **ACCOUNT FUND DISBURSED ND NOT** AVAILABLE TO BE RE-PAID Mailing Address 1319 LOCUST STREET State Zlp Code **PHILADELPHIA** PA 19107 Transaction ID: SD10:4133 Outstanding Balance Beginning This Period 66666.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 66666.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): DISTRICT 1199C NUHHCE PAC, , , , CONTRIBUTION DEPOSITED INTO WRONG **ACCOUNT FUNDS DISBURSED AND NOT AVAILABLE TO RE-PAY** Mailing Address 1319 LOCUST STREET City State Zip Code **PHILADELPHIA** 19107 Outstanding Balance Beginning This Period Transaction ID: SD10.4136 50000.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 50000.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **EXCESSIVE CONTRIBUTION REQUEST** DISTRICT 1199C NUHHCE PAC, . . . FOR REFUND MADE Mailing Address 1319 LOCUST STREET City State Zip Code **PHILADELPHIA** 19107 PA Outstanding Balance Beginning This Period Transaction ID: SD10.4136 5200.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 5200.00 12186B.00 1) SUBTOTALS This Period This Page (optional)..... 121866.00 2) TOTALS This Period (last page this line number only)...... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 121866.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) >



National Union of Hospital and Health Care Employees

AFSCME, AFL-CIO 1319 Locust Street Philadelphia, PA 19107-5498

01/28/2020 USIPOSITAGE \$000.80º

Federal Election Commission

Washington, DC 20463 1040 First Street, N.E.

Address Correction Requested

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FIRST-CLASS MAIL

ZIP 19107 011D11653074

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DATE PREPARED

(3/2015)

PREPARER