Image# 10990830591

FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		RGANIZA	AHO	N		
. •		(See instruction	ons)			Office use only
NAME OF COMMITTEE (in	n full)	(Check if name is changed)		nple: If typying, type the lines	12FE4M5	
_ AMERICAN F	EDERATION OF S	TATE COUNTY	& MUNI	CIPAL EMPLOYEES	PEOPLE	
ADDRESS (number and	d street) 1625	L STREET NW				
(Check if address	ss LL					
is changed)	WAS	HINGTON			PC	20036
			CITY		STATE	ZIP CODE 📥
COMMITTEE'S E-MA	AIL ADDRESS (Please	provide only one e-	mail addre	ess)		
(Check if addressis changed)	itago	jart@afscme.or	g 			
is onaligos)			111			
COMMITTEE'S WEE	3 PAGE ADDRESS (U	RL)				
(Check if addre	NON					1
is changed)	°					
2. DATE M	M / D D / Y	2 0 1 0				
	ATION NUMBER		C COO	01414	1	
3. FEC IDENTIFIC	ATION NUMBER	l.	C COO	011114		
4. IS THIS STATE	MENT NEV	/ (N) OR	X	AMENDED (A)		
I certify that I have exam	nined this Statement and	to the best of my kno	owledge an	d belief it is true, correct an	d complete	_
		EE A. SAUNDE	DC			
Type or Print Name o	f Treasurer	LEE A. SAUNDE	no .			
Signature of Treasure	er Electronically File	d by LEE A. SA	AUNDER	<u>s</u>	Date 07	06 / YYYYY
NOTE: Submission of f				ne person signing this State		
Office Use Only				For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

	1	FEC F	orm 1 (Revised 02/2009)	Page 2
5.			DMMITTEE (Check One) Committee:	
	(a)		This committee is a principal campaign committee. (Complete the candidate information below	w.)
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Coinformation below.)	implete the candidate
	Name Cand			
	Cand Party	idate Affiliatio	Office House Senate Pres	State Sident District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Cand			
	Party	Comm		
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	Politi	cal Act	ion Committee (PAC):	
	(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its o	connected organization is a:
			Corporation Corporation w/o Capital Stock	χ Labor Organization
			Membership Organization Trade Association	Cooperative
	(f)		X In addition, this committee is a Lobbyist/Registrant PAC.	
	(1)		This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	egregated fund or party
			In addition, this committee is a Lobbyist/Registrant PAC.	
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
_	1 - 1 - 1	F		
		runara	ising Representative:	
	(g)	Ш	This committee collects contributions, pays fundraising expenses and disburses net proceeds to committees/organizations, at least one of which is an authorized committee of a federal candidate.	
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds committees/organizations, none of which is an authorized committee of a federal candidate.	for two or more political
		Com	mittees Participating in Joint Fundraiser	
			1. FEC ID number C	
			2. FEC ID number	
			3 FEC ID number C	
			4. FEC ID number	

Write or Type Committee Name

6. Name of Any Connected Or	ganization, Affiliated Committee, Joint Fund	raising Representative, or Lead	dership PAC Sponsor
AMERICAN FEDERATIO	N OF STATE COUNTY & MUNICIPAL E	MPLOYEES, AFL-CIO	
Mailing Address	1625 L STREET NW		
	WASHINGTON	PC	20036 _
	CITY	STATE ≜	ZIP CODE 🛦
Relationship:			
X Connected Organization	Affiliated Committee Joint	Fundraising Representative	Leadership PAC Sponsor
possession of Committee	entify by name, address, (phone number books and records. LES JURGONIS	optional), and position of	the person in
Tuli Name			
Mailing Address	1625 L Street NW		
	1625 L Street NW Washington		20036
		DC_	20036
Mailing Address	Washington CITY A		
Mailing Address Title or Position ♥ DIRECTO 8. Treasurer: List the name	Washington CITY A	STATE Telephone number 202 of the treasurer of the comm	ZIP CODE A _ 429 - 1007
Mailing Address Title or Position ▼ DIRECTO 8. Treasurer: List the name name and address of any Full Name	Washington CITY ▲ R and address (phone number optional)	STATE Telephone number 202 of the treasurer of the comm	ZIP CODE A _ 429 - 1007
Mailing Address Title or Position ▼ DIRECTO 8. Treasurer: List the name name and address of any Full Name	Washington CITY A R and address (phone number optional) y designated agent (e.g., assistant treasure)	STATE Telephone number 202 of the treasurer of the comm	ZIP CODE A _ 429 - 1007
Title or Position ▼ DIRECTO 8. Treasurer: List the name name and address of any Full Name of Treasurer LEE A	Washington CITY A R and address (phone number optional) y designated agent (e.g., assistant treasure) L. SAUNDERS	STATE Telephone number 202 of the treasurer of the comm	ZIP CODE A _ 429 - 1007
Mailing Address Title or Position ▼ DIRECTO 8. Treasurer: List the name name and address of any Full Name of Treasurer LEE A	Washington CITY A R and address (phone number optional) designated agent (e.g., assistant treasulation. SAUNDERS 1625 L Street NW	STATE Telephone number 202 of the treasurer of the commerer).	ZIP CODE 1 - 429 - 1007 nittee; and the

	FEC Form 1 (Revised	02/2009)		Page 4
	Full Name of Designated Agent			
	Mailing Address			
	Title or Position ▼	CITY A	STATE A	ZIP CODE A
		Telephor	ne number	
9.	Banks or Other Depositorie safety deposit boxes or maint Name of Bank, Depository, et	ains funds.	mittee deposits funds, ho	lds accounts, rents
	AMA	LGAMATED BANK OF NEW YORK 1825 K Street, NW		
	Mailing Address	1025 K Street, NW		
		Washington	DC	20006
		CITY 🗻	STATE △	ZIP CODE 🛕
	Name of Bank, Depository, et	tc.		
	⊢ BANI			
		COF AMERICA		
	Mailing Address	COF AMERICA 730 15th Street, NW		
		730 15th Street, NW		
		730 15th Street, NW		
		730 15th Street, NW		

Banks or Other Depositories: safety deposit boxes or maintain		ee deposits funds, hol	ds accounts, rents
Name of Bank, Depository, etc.	o lande.		[ADDITIONAL]
Mailing Address			
	CITY 🗖	STATE ⊿	ZIP CODE 🛕
	anization, Affiliated Committee, Joint Fundraising Repre		
Mailing Address	125 Barclay Street		
	New York	NY L	10007
lationship:	CITY▲	STATE A	ZIP CODE
Connected Organization	X Affiliated Committee Joint Fundraising Repre	esentative Lea	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
			_
Title or Position ▼	CITY A	STATE▲	ZIP CODE A
	Telephon	e number	
Joint Fundraiser Participant			[ADDITIONAL]
	FEC	C ID number C	