

**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-037PEOP)

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

CITY

STATE

ZIP CODE

C00149211

3. IS THIS REPORT

X

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 (12S)

Election on

in the State of

(d) 30-Day Post-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

11

02

2004

in the State of

NY

5. Covering Period

10

14

2004

through

11

22

2004

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

12

02

2004

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. 02/2003)

**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: <sup>M</sup>10 <sup>D</sup>14 <sup>Y</sup>2004 To: <sup>M</sup>11 <sup>D</sup>22 <sup>Y</sup>2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <sup>Y</sup> 2004 <sup>M</sup> <sup>D</sup>		34683.75
(b) Cash on Hand at Beginning of Reporting Period .....	3724.19	
(c) Total Receipts (from Line 19) .....	40692.59	462999.93
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	44416.78	497683.68
<hr/>		
7. Total Disbursements (from Line 31) .....	3724.19	456991.09
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	40692.59	40692.59
<hr/>		
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**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

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

Report Covering the Period: From: <sup>M</sup>10 <sup>D</sup>14 <sup>Y</sup>2004 To: <sup>M</sup>11 <sup>D</sup>22 <sup>Y</sup>2004

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) .....	935.00	
(ii) Unitemized .....	39757.59	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) .....	40692.59	462999.93
(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) .....	40692.59	462999.93
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)) .....	40692.59	462999.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	40692.59	462999.93

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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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.....	3724.19	456991.09
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 ActMty (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))..	3724.19	456991.09
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	3724.19	456991.09

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	40692.59	462999.93
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	40692.59	462999.93
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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 16

(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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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

<b>A.</b> Full Name (Last, First, Middle Initial) Ms Gloria Acevedo Mailing Address 452 Bolton Ave City State Zip Code Bronx NY 10473 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer District Council 37, AFSC-ME Occupation Grievance Representative Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00		Date of Receipt M / D / Y Y Y Y 10 / 31 / 2004 Transaction ID: SA11A1.4743 Amount of Each Receipt this Period 20.00 Payroll Deduction
<b>B.</b> Full Name (Last, First, Middle Initial) Donald Afflick Mailing Address 2267 Virgil Pl. City State Zip Code Bronx NY 10473 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer District Council 37, AFSC-ME Occupation Grievance Representative Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 307.50		Date of Receipt M / D / Y Y Y Y 10 / 31 / 2004 Transaction ID: SA11A1.4744 Amount of Each Receipt this Period 30.00 Payroll Deduction
<b>C.</b> 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. <b>C</b> Name of Employer District Council 37 Occupation Grievance Representative Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M / D / Y Y Y Y 10 / 31 / 2004 Transaction ID: SA11A1.4745 Amount of Each Receipt this Period 20.00 Payroll Deduction

**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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 16

(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

<p><b>A. James Bruni</b> Full Name (Last, First, Middle Initial) Mailing Address 22 Brighton 3rd rd City State Zip Code Brooklyn NY 11235</p>		<p>Date of Receipt M / D / Y 10 / 31 / 2004 Transaction ID: SA11A1.4748</p>
<p>FEC ID number of contributing federal political committee. <b>C</b></p>		<p>Amount of Each Receipt this Period 20.00</p>
<p>Name of Employer NYC Department of Protection Receipt For: Primary General Other (specify) ▼</p>	<p>Occupation Construction Laborer Aggregate Year-to-Date ▼ 220.00</p>	<p>Payroll Deduction</p>
<p><b>B. Cara Casey</b> Full Name (Last, First, Middle Initial) Mailing Address 49-57 Crown Street City State Zip Code Brooklyn NY 11221</p>		<p>Date of Receipt M / D / Y 10 / 31 / 2004 Transaction ID: SA11A1.4747</p>
<p>FEC ID number of contributing federal political committee. <b>C</b></p>		<p>Amount of Each Receipt this Period 20.00</p>
<p>Name of Employer NYC Housing Authority Receipt For: Primary General Other (specify) ▼</p>	<p>Occupation Aggregate Year-to-Date ▼ 220.00</p>	<p>Payroll Deduction</p>
<p><b>C. Michael DeMarco</b> Full Name (Last, First, Middle Initial) Mailing Address 83 Ramblewood Ave City State Zip Code Staten Island NY 10308</p>		<p>Date of Receipt M / D / Y 10 / 31 / 2004 Transaction ID: SA11A1.4748</p>
<p>FEC ID number of contributing federal political committee. <b>C</b></p>		<p>Amount of Each Receipt this Period 20.00</p>
<p>Name of Employer District Council 37 Receipt For: Primary General Other (specify) ▼</p>	<p>Occupation Grievance Representative Aggregate Year-to-Date ▼ 220.00</p>	<p>Payroll Deduction</p>

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)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 16

(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

Full Name (Last, First, Middle Initial) <b>A. Belinda Dixon</b>		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 150 Brabant Street, apt. 1A		Transaction ID: SA11A1.4749
City Staten Island	State NY	Zip Code 10303
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
Name of Employer NYC Police Department	Occupation Secretary	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>B. Oliver Gray</b>		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 855 E. 14th Street		Transaction ID: SA11A1.4750
City New York	State NY	Zip Code 10009
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 80.00
Name of Employer District Council 37, AFSC- ME	Occupation Associate Director	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00	

Full Name (Last, First, Middle Initial) <b>C. Barbara Katsen</b>		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 43 Hamilton Terrace		Transaction ID: SA11A1.4751
City New York	State NY	Zip Code 10031
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer District Council 37, AFSC- ME	Occupation Director of DC 37 Education Fund	Payroll Deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>125.00</b>
TOTAL This Period (last page this line number only) .....	▶	



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 16

(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

<b>A.</b> Full Name (Last, First, Middle Initial) Clifford Koppelman Mailing Address 127D E 19 Street, #1J City State Zip Code Brooklyn NY 11230 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer District Council 37, AFSC-ME Occupation Grievance Representative Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 430.00		Date of Receipt M / D / Y 10 / 31 / 2004 Transaction ID: SA11A1.4753 Amount of Each Receipt this Period 40.00 Payroll Deduction
<b>B.</b> Full Name (Last, First, Middle Initial) Dagna Lewister Mailing Address 423 Atlantic Avenue apt. 4M City State Zip Code Brooklyn NY 11217 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer NY State Board of Higher Educa Occupation College Assistant Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 218.00		Date of Receipt M / D / Y 10 / 31 / 2004 Transaction ID: SA11A1.4756 Amount of Each Receipt this Period 36.00 Payroll Deduction
<b>C.</b> Full Name (Last, First, Middle Initial) Raymond Markey Mailing Address 248 Valley Rd. City State Zip Code Valley Cottage NY 10589 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer District Council 37, AFSC-ME Occupation Grievance Representative Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 472.00		Date of Receipt M / D / Y 10 / 31 / 2004 Transaction ID: SA11A1.4759 Amount of Each Receipt this Period 44.00 Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ..... ► **120.00**

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

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

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 10 / 16  
(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

Full Name (Last, First, Middle Initial) <b>A. Andrew Maya</b>		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 720 Lenox Avenue #24C		Transaction ID: SA11A1.4780
City New York	State NY	Zip Code 10034
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
Name of Employer NYC Department of Environ- ment Protecti Receipt For: Primary      General Other (specify) ▼	Occupation Sr. Sewage Treatment Worker Aggregate Year-to-Date ▼ 215.00	Payroll Deduction

Full Name (Last, First, Middle Initial) <b>B. Terrence Milar</b>		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 417 Prospect Pl		Transaction ID: SA11A1.4788
City Brooklyn	State NY	Zip Code 11238
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
Name of Employer NYC Police Department Receipt For: Primary      General Other (specify) ▼	Occupation Senior Police Admin. Aide Aggregate Year-to-Date ▼ 220.00	Payroll Deduction

Full Name (Last, First, Middle Initial) <b>C. Ralph Papa</b>		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 125 E.17th Street		Transaction ID: SA11A1.4781
City New York	State NY	Zip Code 10003
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00
Name of Employer District Council 37, AFSC- ME Receipt For: Primary      General Other (specify) ▼	Occupation Real Estate Manager Aggregate Year-to-Date ▼ 220.00	Payroll Deduction

SUBTOTAL of Receipts This Page (optional) .....	<b>60.00</b>
TOTAL This Period (last page this line number only) .....	

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 16

(check only one)

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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) <b>A. Catherine Pfondresher</b>		Date of Receipt M / D / Y Y Y Y 10 / 31 / 2004	
Mailing Address 400 3rd St		Transaction ID: SA11A1.4762	
City Brooklyn	State NY	Zip Code 11215	Amount of Each Receipt this Period 60.00
FEC ID number of contributing federal political committee. <b>C</b>		Payroll Deduction	
Name of Employer District Council 37, AFSC- ME	Occupation Assistant Director of Research & Negot	Aggregate Year-to-Date ▼ 570.00	
Receipt For: Primary      General Other (specify) ▼			
Full Name (Last, First, Middle Initial) <b>B. Elnora Phillips</b>		Date of Receipt M / D / Y Y Y Y 10 / 31 / 2004	
Mailing Address 110 E 99th Street apt. 12F		Transaction ID: SA11A1.4763	
City New York	State NY	Zip Code 10029	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. <b>C</b>		Payroll Deduction	
Name of Employer Department of Social Serv- ices	Occupation Case Worker	Aggregate Year-to-Date ▼ 210.00	
Receipt For: Primary      General Other (specify) ▼			
Full Name (Last, First, Middle Initial) <b>C. Walthers Prinnus</b>		Date of Receipt M / D / Y Y Y Y 10 / 31 / 2004	
Mailing Address 137-29 Bedell Street		Transaction ID: SA11A1.4765	
City Springfield Grdns	State NY	Zip Code 11413	Amount of Each Receipt this Period 60.00
FEC ID number of contributing federal political committee. <b>C</b>		Payroll Deduction	
Name of Employer District Council 37, AFSC- ME	Occupation Grievance Representative	Aggregate Year-to-Date ▼ 440.00	
Receipt For: Primary      General Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ..... ► **140.00**

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

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

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 16  
(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

Full Name (Last, First, Middle Initial) <b>A. Lillian Roberts</b>		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 2373 Broadway		Transaction ID: SA11A1.4768
City	State	Zip Code
New York	NY	10024
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 40.00
Name of Employer Executive Director	Occupation District Council 37, AFSCME	Payroll Deduction
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 430.00	

Full Name (Last, First, Middle Initial) <b>B. Pamela Sher</b>		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 381 Edgegrove Avenue		Transaction ID: SA11A1.4767
City	State	Zip Code
Staten Island	NY	10312
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 40.00
Name of Employer NYC Off Track Betting	Occupation Betting Clerk	Payroll Deduction
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) <b>C. Jose Slama</b>		Date of Receipt M / D / Y 10 / 31 / 2004
Mailing Address 130 South Highland		Transaction ID: SA11A1.4768
City	State	Zip Code
Ossining	NY	10562
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 40.00
Name of Employer District Council 37, AFSCME	Occupation Division Director	Payroll Deduction
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>120.00</b>
TOTAL This Period (last page this line number only) .....	

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

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 16

(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

<b>A.</b> Full Name (Last, First, Middle Initial) Kyle Simmons Mailing Address 1114 Knollwood Drive City State Zip Code Tobyhanna PA 18466 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer District Council 37 Occupation Grievance Representative Receipt For: Primary General Other (specify) ▼		Date of Receipt M / D / Y 10 / 31 / 2004 Transaction ID: SA11A1.4769 Amount of Each Receipt this Period 20.00 Payroll Deduction
<b>B.</b> Full Name (Last, First, Middle Initial) John Smith Mailing Address P.O. BOX 199 City State Zip Code BRONX NY 10451 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer City University of New York Occupation City Custodial Asst. Receipt For: Primary General Other (specify) ▼		Date of Receipt M / D / Y 10 / 31 / 2004 Transaction ID: SA11A1.4770 Amount of Each Receipt this Period 20.00 Payroll Deduction
<b>C.</b> Full Name (Last, First, Middle Initial) Danna Sullivan Mailing Address 94 Buckingham Rd. City State Zip Code Yonkers NY 10701 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer District Council 37 Occupation Director of Research and Negotiations Receipt For: Primary General Other (specify) ▼		Date of Receipt M / D / Y 10 / 31 / 2004 Transaction ID: SA11A1.4771 Amount of Each Receipt this Period 60.00 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 16

(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

<b>A. James Tuccirelli</b> Full Name (Last, First, Middle Initial) Mailing Address 381 Mill Rd. City Staten Island State NY Zip Code 10306 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2004 Transaction ID: SA11A1.4772 Amount of Each Receipt this Period 40.00 Payroll Deduction
Name of Employer District Council 37, AFSC-ME Receipt For: Primary General Other (specify) ▼	Occupation Grievance Representative Aggregate Year-to-Date ▼ 430.00	
<b>B. Esther Tucker</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 934 Lincoln Station City New York State NY Zip Code 10037 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2004 Transaction ID: SA11A1.4773 Amount of Each Receipt this Period 30.00 Payroll Deduction
Name of Employer District Council 37, AFSC-ME Receipt For: Primary General Other (specify) ▼	Occupation Grievance Representative Aggregate Year-to-Date ▼ 220.00	
<b>C. Martin Velasquez</b> Full Name (Last, First, Middle Initial) Mailing Address 98 Wrenlock Street City Staten Island State NY Zip Code 10303 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2004 Transaction ID: SA11A1.4774 Amount of Each Receipt this Period 30.00 Payroll Deduction
Name of Employer NY State Board of Higher Educa Receipt For: Primary General Other (specify) ▼	Occupation City Laborer Aggregate Year-to-Date ▼ 220.00	

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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 16  
(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

Full Name (Last, First, Middle Initial) <b>A. Sheryl Williams</b>		Date of Receipt M / D / Y 10 / 31 / 2004	
Mailing Address 475 Willson Avenue Apt 1D		Transaction ID: SA11A1.4778	
City Brooklyn	State NY	Zip Code 11221	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. <b>C</b>		Payroll Deduction	
Name of Employer Clerical Assistant	Occupation NYC Finance Administration		Aggregate Year-to-Date ▼ 220.00
Receipt For: Primary      General Other (specify) ▼			
Full Name (Last, First, Middle Initial) <b>B. Timothy Young</b>		Date of Receipt M / D / Y 10 / 31 / 2004	
Mailing Address 186-17 Foch Blvd.		Transaction ID: SA11A1.4777	
City St. Albans	State NY	Zip Code 11412	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. <b>C</b>		Payroll Deduction	
Name of Employer City Debris Remover	Occupation NYC Department of Transportation		Aggregate Year-to-Date ▼ 220.00
Receipt For: Primary      General Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) .....	40.00
TOTAL This Period (last page this line number only) .....	935.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<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  
  
Office Sought: House Senate President  
State: District  
Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB22.4792  
Date of Disbursement  
10 / 28 / 2004  
  
Amount of Each Disbursement this Period  
2000.00

Category/  
Type

Full Name (Last, First, Middle Initial)  
**B. 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  
  
Office Sought: House Senate President  
State: District  
Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB22.4793  
Date of Disbursement  
11 / 04 / 2004  
  
Amount of Each Disbursement this Period  
1724.19

Category/  
Type

SUBTOTAL of Disbursements This Page (optional) .....	▶	3724.19
TOTAL This Period (last page this line number only) .....	▶	3724.19