

**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

1199 SERVICE EMPLOYEES INT'L UNION FEDERAL POLITICAL ACTION FUND

ADDRESS (number and street)

330 WEST 42ND STREET, 7TH FLOOR

☐Check if different
than previously
reported. (ACC)

NEW YORK

NY

10036

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00348540

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

11

07

2006

in the
State of

5. Covering Period

10

01

2006

through

11

27

2006

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

JENNIFER CUNNINGHAM

Signature of Treasurer

Electronically Filed by JENNIFER CUNNINGHAM

Date

12

05

2006

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

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

1199 SERVICE EMPLOYEES INT'L UNION FEDERAL POLITICAL ACTION FUND

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
1	1	2	7	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2006		362733.62
(b) Cash on Hand at Beginning of Reporting Period	138059.69	
(c) Total Receipts (from Line 19)	789036.50	4309403.72
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	927096.19	4672137.34
7. Total Disbursements (from Line 31)	285.00	3745326.15
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	926811.19	926811.19
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

1199 SERVICE EMPLOYEES INT'L UNION FEDERAL POLITICAL ACTION FUND

Report Covering the Period:

From:

M M
1 0D D
0 1Y Y Y Y
2 0 0 6

To:

M M
1 1D D
2 7Y Y Y Y
2 0 0 6

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	935.00	1388.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	788101.50	4308015.72
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	789036.50	4309403.72
(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) ➡	789036.50	4309403.72
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))	789036.50	4309403.72
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	789036.50	4309403.72

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)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		0.00	1524.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		0.00	1524.00
22. Transfers to Affiliated/Other Party Committees.....		0.00	3723967.47
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	-5684.15
(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	-5684.15
29. Other Disbursements.....		285.00	25518.83
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))..		285.00	3745326.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		285.00	3745326.15

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)	789036.50	4309403.72
34. Total Contribution Refunds (from Line 28(d))	0.00	-5684.15
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	789036.50	4315087.87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	1524.00
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	1524.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 6 / 14

<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)

1199 SERVICE EMPLOYEES INT'L UNION FEDERAL POLITICAL ACTION FUND

A. Full Name (Last, First, Middle Initial) LOUISE BAYER Mailing Address 84 WALNUT STREET City TEANECK State NJ Zip Code 07666-3931 FEC ID number of contributing federal political committee. C Name of Employer 1199 SEIU Occupation CHIEF FINANCIAL OFFICER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		Date of Receipt <table border="1"> <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>0</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.4972 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">25.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	0	6	25.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
1	0		0	1		2	0	0	6																							
25.00																																
B. Full Name (Last, First, Middle Initial) NUBIA BUITRAGO Mailing Address 37-31 73RD STREET APT. 9N City JACKSON HEIGHTS State NY Zip Code 11372 FEC ID number of contributing federal political committee. C Name of Employer PARTNERS IN CARE Occupation HOME HEALTH AIDE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 258.00		Date of Receipt <table border="1"> <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>0</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.4973 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">43.00</td> </tr> </table> PAYROLL DEDUCTION OF \$43 PER MONTH	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	0	6	43.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
1	0		0	1		2	0	0	6																							
43.00																																
C. Full Name (Last, First, Middle Initial) NUBIA BUITRAGO Mailing Address 37-31 73RD STREET APT. 9N City JACKSON HEIGHTS State NY Zip Code 11372 FEC ID number of contributing federal political committee. C Name of Employer PARTNERS IN CARE Occupation HOME HEALTH AIDE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 301.00		Date of Receipt <table border="1"> <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>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.4974 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">43.00</td> </tr> </table> PAYROLL DEDUCTION OF \$43 PER MONTH	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	1		2	0	0	6	43.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
1	1		0	1		2	0	0	6																							
43.00																																

SUBTOTAL of Receipts This Page (optional)

111.00

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:
(check only one)

PAGE 7 / 14

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

1199 SERVICE EMPLOYEES INT'L UNION FEDERAL POLITICAL ACTION FUND

A. Full Name (Last, First, Middle Initial) ENID ECKSTEIN		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 6
Mailing Address 26 BOYNTON STREET		Transaction ID: SA11A1.4975
City JAMAICA PLAIN	State MA	Zip Code 02130
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer 1199 SEIU	Occupation UNKNOWN	PAYROLL DEDUCTION OF \$40 PER MONTH
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

B. Full Name (Last, First, Middle Initial) ENID ECKSTEIN		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 26 BOYNTON STREET		Transaction ID: SA11A1.4976
City JAMAICA PLAIN	State MA	Zip Code 02130
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer 1199 SEIU	Occupation UNKNOWN	PAYROLL DEDUCTION OF \$40 PER MONTH
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

C. Full Name (Last, First, Middle Initial) EILEEN ENGLISH		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 6
Mailing Address 44 CEDAR ROAD		Transaction ID: SA11A1.4978
City CHEEKTOWAGA	State NY	Zip Code 14215-2912
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer 1199 SPECIAL PROJECTS	Occupation DELEGATE	PAYROLL DEDUCTION OF \$25 PER MONTH
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 14

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

1199 SERVICE EMPLOYEES INT'L UNION FEDERAL POLITICAL ACTION FUND

A.

Full Name (Last, First, Middle Initial)

AMY GLADSTEIN

Mailing Address 1707 DITMAS AVENUE

City

BROOKLYN

State

NY

Zip Code

11226

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNKNOWN

Occupation

UNKNOWN

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 6

Transaction ID: SA11A1.4979

Amount of Each Receipt this Period

250.00

PAYROLL DEDUCTION OF \$250
PER MONTH

B.

Full Name (Last, First, Middle Initial)

ROSEMARIE GLOVER

Mailing Address 2915 CLUTE ROAD

City

CORTLAND

State

NY

Zip Code

13045

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMMUNITY GENERAL HOSPITAL

Occupation

REGISTERED NURSE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

20.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 6

Transaction ID: SA11A1.4980

Amount of Each Receipt this Period

20.00

PAYROLL DEDUCTION OF \$20
PER MONTH

C.

Full Name (Last, First, Middle Initial)

ROSEMARIE GLOVER

Mailing Address 2915 CLUTE ROAD

City

CORTLAND

State

NY

Zip Code

13045

FEC ID number of contributing
federal political committee.

C

Name of Employer
COMMUNITY GENERAL HOSPITAL

Occupation

REGISTERED NURSE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 6

Transaction ID: SA11A1.4982

Amount of Each Receipt this Period

60.00

PAYROLL DEDUCTION OF \$60
PER MONTH

SUBTOTAL of Receipts This Page (optional)

330.00

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:
(check only one)

PAGE 9 / 14

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

1199 SERVICE EMPLOYEES INT'L UNION FEDERAL POLITICAL ACTION FUND

A. Full Name (Last, First, Middle Initial)
SHIRLEY KHINE

Mailing Address 515 W. 59TH STREET
APT. 6K

City State Zip Code
NEW YORK NY 10019-1033

FEC ID number of contributing
federal political committee.

C

Name of Employer
ROOSEVELT HOSPITAL

Occupation
TECHNICAL/PROFESSIONAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 6

Transaction ID: SA11A1.4984

Amount of Each Receipt this Period

24.00

PAYROLL DEDUCTION OF \$24
PER MONTH

B. Full Name (Last, First, Middle Initial)
DEBORAH KING

Mailing Address 270 NEWTOWN TPKE.

City State Zip Code
WESTPORT CT 06880-1021

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOSPITAL LEAGUE TRAINING

Occupation
UNKNOWN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 6

Transaction ID: SA11A1.4987

Amount of Each Receipt this Period

25.00

PAYROLL DEDUCTION OF \$25
PER MONTH

C. Full Name (Last, First, Middle Initial)
IVAN KOLODNY

Mailing Address 390 RIVERSIDE DRIVE APT. 2C

City State Zip Code
NEW YORK NY 10025

FEC ID number of contributing
federal political committee.

C

Name of Employer
NATIONAL BENEFIT FUND -
1199

Occupation
DBA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 6

Transaction ID: SA11A1.4989

Amount of Each Receipt this Period

25.00

PAYROLL DEDUCTION OF \$25
PER MONTH

SUBTOTAL of Receipts This Page (optional)

74.00

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 10 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

1199 SERVICE EMPLOYEES INT'L UNION FEDERAL POLITICAL ACTION FUND

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

DONALD MARTHAGE

Mailing Address 172 MITCHELL ROAD

City State Zip Code
 ROCHESTER NY 14626

FEC ID number of contributing federal political committee.

C

Name of Employer
1199 SEIU-NYS HLTH & HUMAN
SEROccupation
UNKNOWN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 1 / 2 0 0 6

Transaction ID: SA11A1.4991

Amount of Each Receipt this Period

25.00

PAYROLL DEDUCTION OF \$25
PER MONTH

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

STACEY MILLMAN

Mailing Address 289 MANNING BLVD.

City State Zip Code
 ALBANY NY 12206-1425

FEC ID number of contributing federal political committee.

C

Name of Employer
NATIONAL BENEFIT FUND-1199Occupation
COMMUNICATIONS DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 0 1 / 2 0 0 6

Transaction ID: SA11A1.4992

Amount of Each Receipt this Period

50.00

PAYROLL DEDUCTION OF \$50
PER MONTH

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

STACEY MILLMAN

Mailing Address 289 MANNING BLVD.

City State Zip Code
 ALBANY NY 12206-1425

FEC ID number of contributing federal political committee.

C

Name of Employer
NATIONAL BENEFIT FUND-1199Occupation
COMMUNICATIONS DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 1 / 2 0 0 6

Transaction ID: SA11A1.4994

Amount of Each Receipt this Period

50.00

PAYROLL DEDUCTION OF \$50
PER MONTH

SUBTOTAL of Receipts This Page (optional)

125.00

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 11 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

1199 SERVICE EMPLOYEES INT'L UNION FEDERAL POLITICAL ACTION FUND

A. Full Name (Last, First, Middle Initial)
STACEY MILLMAN

Mailing Address 289 MANNING BLVD.

City State Zip Code
ALBANY NY 12206-1425

FEC ID number of contributing
federal political committee.

C

Name of Employer
NATIONAL BENEFIT FUND-1199

Occupation
COMMUNICATIONS DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.4993

Amount of Each Receipt this Period

50.00

PAYROLL DEDUCTION OF \$50
PER MONTH

B. Full Name (Last, First, Middle Initial)
WILLIAM NICHOLS, Jr.

Mailing Address 8005 WINFIELD CIRCLE

City State Zip Code
ROME NY 13440

FEC ID number of contributing
federal political committee.

C

Name of Employer
1199 SPECIAL PROJECTS

Occupation
DELEGATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 6

Transaction ID: SA11A1.4995

Amount of Each Receipt this Period

45.00

PAYROLL DEDUCTION OF \$45
PER MONTH

C. Full Name (Last, First, Middle Initial)
WILLIAM NICHOLS, Jr.

Mailing Address 8005 WINFIELD CIRCLE

City State Zip Code
ROME NY 13440

FEC ID number of contributing
federal political committee.

C

Name of Employer
1199 SPECIAL PROJECTS

Occupation
DELEGATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 6

Transaction ID: SA11A1.4996

Amount of Each Receipt this Period

45.00

PAYROLL DEDUCTION OF \$45
PER MONTH

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 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

1199 SERVICE EMPLOYEES INT'L UNION FEDERAL POLITICAL ACTION FUND

A. Full Name (Last, First, Middle Initial) BYRON SMITH		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6	
Mailing Address 1878 ADAM CLAYTON POWELL JR APT. 27		Transaction ID: SA11A1.4998	
City NEW YORK	State NY	Amount of Each Receipt this Period 25.00	
Zip Code 10026-2834		PAYROLL DEDUCTION OF \$25 PER MONTH	
FEC ID number of contributing federal political committee. C			
Name of Employer 1199 SEIU	Occupation ORGANIZER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		
B. Full Name (Last, First, Middle Initial) JEFFREY VOGEL		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 6	
Mailing Address 4801 42ND STREET, APT 4D		Transaction ID: SA11A1.5000	
City SUNNYSIDE	State NY	Amount of Each Receipt this Period 25.00	
Zip Code 11104		PAYROLL DEDUCTION OF \$25	
FEC ID number of contributing federal political committee. C			
Name of Employer BETH ISRAEL MEDICAL CTR-P-ETRIE	Occupation TECHNICAL/PROFESSIONAL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00		

SUBTOTAL of Receipts This Page (optional)

50.00

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)

PAGE 13 / 14

<input type="checkbox"/> 21b	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)

1199 SERVICE EMPLOYEES INT'L UNION FEDERAL POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial)

A. 1199 & 32BJ/144 SEIU HOME CARE PAC

Mailing Address 310 W 43RD STREET

City NEW YORK State NY Zip Code 10036

Purpose of Disbursement
REFUND OF EMPLOYER REMIT IN ERROR

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4966

Date of Disbursement

/ /

Amount of Each Disbursement this Period

10.00

Full Name (Last, First, Middle Initial)

B. 1199 CREDIT UNION

Mailing Address 310 W 43 RD STREET

City NEW YORK State NY Zip Code 10036

Purpose of Disbursement
REFUND OF EMPLOYER REMIT IN ERROR

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4963

Date of Disbursement

/ /

Amount of Each Disbursement this Period

240.00

Full Name (Last, First, Middle Initial)

C. COMMERCE BANK

Mailing Address 1710 ROUTE 70 EAST

City CHERRY HILL State NJ Zip Code 08034

Purpose of Disbursement
BANK CHARGES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.4965

Date of Disbursement

/ /

Amount of Each Disbursement this Period

15.00

SUBTOTAL of Disbursements This Page (optional)

265.00

TOTAL This Period (last page this line number only)

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 14 / 14

<input type="checkbox"/> 21b	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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)

1199 SERVICE EMPLOYEES INT'L UNION FEDERAL POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial)

A. ANA ROSADO-MARCANO

Mailing Address

City

State

Zip Code

Purpose of Disbursement

REFUND OF REMIT IN ERROR

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: SB29.4969

Date of Disbursement

/ /

Amount of Each Disbursement this Period

20.00

SUBTOTAL of Disbursements This Page (optional)

20.00

TOTAL This Period (last page this line number only)

285.00