

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		<input type="text" value="58555.39"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="68865.90"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="86281.83"/>	<input type="text" value="562634.61"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="155147.73"/>	<input type="text" value="621190.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="68865.90"/>	<input type="text" value="534908.17"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="86281.83"/>	<input type="text" value="86281.83"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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. 06/2004)

Page 3

Write or Type Committee Name

DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

Report Covering the Period: From: / / To: / /

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).....	83945.63	92198.07
(ii) Unitemized	2336.20	470436.54
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	86281.83	562634.61
(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)	86281.83	562634.61
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 Transfers (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))..... ▶	86281.83	562634.61
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	86281.83	562634.61

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) Allocated 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.....	68865.90	534908.17
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated 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)) ..	68865.90	534908.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	68865.90	534908.17

DETAILED SUMMARY PAGE
of Disbursements

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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)	86281.83	562634.61
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	86281.83	562634.61
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 (DC37PEOPLE)

A. Nola Brooker
 Full Name (Last, First, Middle Initial)
 Mailing Address 1551 UNIONPORT RD
 APT 5F
 City BRONX State NY Zip Code 10462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer District Council 37 Occupation Division Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11AI.16430
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction

B. Judith Burger-Arroyo
 Full Name (Last, First, Middle Initial)
 Mailing Address 1056 E37th St
 City Brooklyn State NY Zip Code 11210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer District Council 37, AFSCME Occupation Grievance Rep, Local President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2070.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11AI.16434
 Amount of Each Receipt this Period 345.00
 Memo Item
 Payroll Deduction

C. DISTRICT COUNCIL 37
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 2882 CHURCH STREET STATION
 CHURCH STREET STATION
 City NEW YORK State NY Zip Code 10007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530797.70

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11AI.16547
 Amount of Each Receipt this Period 80948.41
 Memo Item
 Unitemized

SUBTOTAL of Receipts This Page (optional).....▶	81343.41
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

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

Mailing Address 711 Amsterdam Ave
#22L

City New York State NY Zip Code 10025

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

Name of Employer District Council 37, AFSCME Occupation Assist Director - Research & Neg.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11AI.16458

Amount of Each Receipt this Period
50.00

Memo Item
 Payroll Deduction

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

Mailing Address 3731 Sandra Court

City Wantagh State NY Zip Code 11793

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

Name of Employer City of NY- health dept. Occupation City Laborer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11AI.16462

Amount of Each Receipt this Period
45.00

Memo Item
 Payroll Deduction

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

Mailing Address 91 Gotham Ave

City Elmont State NY Zip Code 11003

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

Name of Employer District Council 37 Occupation Asst Assoc Director of DC37

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
875.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11AI.16465

Amount of Each Receipt this Period
125.00

Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 220.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 17
	<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 (DC37PEOPLE)

A. Oliver Gray
 Full Name (Last, First, Middle Initial)
 Mailing Address 655 E. 14th Street
 City New York State NY Zip Code 10009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer District Council 37, AFSCME Occupation Associate Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11AI.16469
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction

B. Mr. Tyler Hemingway
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Sunglow Terrace
 City Middletown State NY Zip Code 10941
 FEC ID number of contributing federal political committee. **C**
 Name of Employer District Council 37 Occupation Asst Division Director - Hosp.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11AI.16471
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction

C. John Hyslop
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 Terrace Place
 City Brooklyn State NY Zip Code 11218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer District Council 37 Occupation Local President/Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1688.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11AI.16475
 Amount of Each Receipt this Period 750.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 10 OF 17
(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 (DC37PEOPLE)

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

Mailing Address 257-37 149th Ave

City State Zip Code
 Rosedale NY 11422

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

Name of Employer Occupation
 City of NY-Rent & Rehab Adm Local President

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11AI.16476

Amount of Each Receipt this Period
 40.00

Memo Item
 Payroll Deduction

Full Name (Last, First, Middle Initial)
B. Barbara Ingram-Edmonds

Mailing Address 34 douth Mill Rd

City State Zip Code
 West Winsor NJ 08550

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

Name of Employer Occupation
 District Council 37, AFSCME Director of Field Operators

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 700.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11AI.16477

Amount of Each Receipt this Period
 100.00

Memo Item
 Payroll Deduction

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

Mailing Address 861 Elda Lane

City State Zip Code
 Westbury NY 11590

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

Name of Employer Occupation
 DC 37 Director of PAL

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11AI.16479

Amount of Each Receipt this Period
 50.00

Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 190.00

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

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

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

FOR LINE NUMBER: PAGE 11 OF 17
(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 (DC37PEOPLE)

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

Mailing Address 115 Douglas Rd

City State Zip Code
 SI NY 10304

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

Name of Employer Occupation
 District Council 37, AFSCME HR Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 330.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11AI.16483

Amount of Each Receipt this Period
 50.00

Memo Item
 Payroll Deduction

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

Mailing Address 2205 2nd Ave

City State Zip Code
 New York NY 10029

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

Name of Employer Occupation
 NYC Health & Hospital Corp Rehabilitation Tech

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 227.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11AI.16494

Amount of Each Receipt this Period
 37.00

Memo Item
 Payroll Deduction

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

Mailing Address 80 East 110th St

City State Zip Code
 New York NY 10029

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

Name of Employer Occupation
 City of New York Admin Service CITY CUSTODIAL ASST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 08 / 31 / 2016
Transaction ID : SA11AI.16499

Amount of Each Receipt this Period
 75.00

Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 162.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 17
	<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 (DC37PEOPLE)

A. Deborah Pitts
 Full Name (Last, First, Middle Initial)
 Mailing Address 4286 Conashaugh Lks
 City Milford State PA Zip Code 18337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer District Council 37, AFSCME Occupation Grievance Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11AI.16506
 Amount of Each Receipt this Period 45.00
 Memo Item
 Payroll Deduction

B. Christopher Policano
 Full Name (Last, First, Middle Initial)
 Mailing Address 340 Haven Ave. apt 6f
 City New York State NY Zip Code 10033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DC 37 Occupation Director Comm.Dept.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11AI.16507
 Amount of Each Receipt this Period 125.00
 Memo Item
 Payroll Deduction

C. John Powers
 Full Name (Last, First, Middle Initial)
 Mailing Address 5 BRAKEMAN COURT
 City HIGHTSTOWN State NJ Zip Code 08520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Board of Education (BOE) Occupation CITY LABORER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11AI.16508
 Amount of Each Receipt this Period 60.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	230.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

A. Walthene Primus
 Full Name (Last, First, Middle Initial)
 Mailing Address 137-29 Bedell Street
 City Springfield Grdns State NY Zip Code 11413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer District Council 37, AFSCME Occupation Grievance Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11AI.16509
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction

B. Robin Roach
 Full Name (Last, First, Middle Initial)
 Mailing Address 135-25 Hoover Ave
 City Kew Gardens State NY Zip Code 11435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DC 37 Occupation General Counsel/Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11AI.16513
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction

C. Jose Robles
 Full Name (Last, First, Middle Initial)
 Mailing Address 65 Malcolm X Blvd. apt. 2B
 City New York State NY Zip Code 10026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NYC Health & Hospital Corp Occupation institutional aide
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 243.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11AI.16514
 Amount of Each Receipt this Period 37.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 127.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

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

Mailing Address 2 Mountain View Dr

City Thiells State NY Zip Code 10984

FEC ID number of contributing federal political committee. C

Name of Employer District Council 37 Local 1549 Occupation President Local 1549

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 875.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11AI.16515

Amount of Each Receipt this Period
 125.00

Memo Item
 Payroll Deduction

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

Mailing Address 1114 Knollwood Drive

City Tobyhanna State PA Zip Code 18466

FEC ID number of contributing federal political committee. C

Name of Employer District Council 37, AFSCME Occupation Grievance Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11AI.16519

Amount of Each Receipt this Period
 60.00

Memo Item
 Payroll Deduction

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

Mailing Address 23 Water Grant St

City Yonkers State NY Zip Code 10701

FEC ID number of contributing federal political committee. C

Name of Employer Board of Higher Ed. State Occupation INFO TECH SR. ASSOCIATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 318.08

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016
Transaction ID : SA11AI.16523

Amount of Each Receipt this Period
 39.76

Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	224.76
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 15 OF 17
(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 (DC37PEOPLE)

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

Mailing Address 38 Hull Street

City State Zip Code
Brooklyn NY 11233

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

Name of Employer Occupation
District Council 37 Asst Director Research Dept.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11AI.16527

Amount of Each Receipt this Period
50.00

Memo Item
 Payroll Deduction

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

Mailing Address 361 Mill Rd.

City State Zip Code
Staten Island NY 10306

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

Name of Employer Occupation
District Council 37, AFSCME Grievance Representative

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11AI.16530

Amount of Each Receipt this Period
50.00

Memo Item
 Payroll Deduction

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

Mailing Address 96 Wenlock Street

City State Zip Code
Staten Island NY 10303

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

Name of Employer Occupation
NY State Board of Higher Educa City Laborer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
08 / 31 / 2016
Transaction ID : SA11AI.16535

Amount of Each Receipt this Period
30.00

Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00

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

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

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

FOR LINE NUMBER: PAGE 16 OF 17
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

A. Barbara Watkins
Full Name (Last, First, Middle Initial)
Mailing Address 294 Osborn St
City Brooklyn State NY Zip Code 11212
FEC ID number of contributing federal political committee. C
Name of Employer NYC ADMINISTRATIVE SERVICES Occupation CITY CUSTODIAL ASST
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 360.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11AI.16537
Amount of Each Receipt this Period 60.00
 Memo Item
Payroll Deduction

B. Cheryl Whatley
Full Name (Last, First, Middle Initial)
Mailing Address 1199 E 53rd Street apt 3f
City Brooklyn State NY Zip Code 11234
FEC ID number of contributing federal political committee. C
Name of Employer NYC Dept of Health Occupation Jr Public Health Nurse
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 360.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11AI.16539
Amount of Each Receipt this Period 60.00
 Memo Item
Payroll Deduction

C. Mercedes Youman
Full Name (Last, First, Middle Initial)
Mailing Address 345 E 93rd St 16h
City NY State NY Zip Code 10128
FEC ID number of contributing federal political committee. C
Name of Employer NYC Health Dept. Occupation Public Health Nurse
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 700.00

Date of Receipt 08 / 31 / 2016
Transaction ID : SA11AI.16543
Amount of Each Receipt this Period 150.00
 Memo Item
Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... 270.00
TOTAL This Period (last page this line number only)..... 83945.63

**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)

<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 (DC37PEOPLE)

Full Name (Last, First, Middle Initial) A. AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED		Date of Disbursement MM / DD / YYYY 08 / 24 / 2016
Mailing Address 1625 L STREET NW		Transaction ID : SB22.16548
City WASHINGTON	State DC	
Zip Code 20036	Purpose of Disbursement Transfer	Amount of Each Disbursement this Period 68865.90
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Transaction ID : SB22.16548
City	State	
Zip Code	Purpose of Disbursement	Amount of Each Disbursement this Period
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Transaction ID : SB22.16548
City	State	
Zip Code	Purpose of Disbursement	Amount of Each Disbursement this Period
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	68865.90
TOTAL This Period (last page this line number only).....▶	68865.90