

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
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

ADDRESS (number and street) 1625 L STREET NW
 Check if different than previously reported. (ACC)
WASHINGTON DC 20036

2. **FEC IDENTIFICATION NUMBER** C00011114
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 _____ in the State of _____

5. Covering Period 03 01 2010 through 03 31 2010

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 WILLIAM LUCY
Signature of Treasurer Electronically Filed by WILLIAM LUCY Date 04 20 2010

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. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		923124.80
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	1368947.96									
(c) Total Receipts (from Line 19)	627548.26	1778915.32								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1996496.22	2702040.12								
7. Total Disbursements (from Line 31)	381611.00	1087154.90								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1614885.22	1614885.22								
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**

Write or Type Committee Name

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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)	21036.00	31099.62
(ii) Unitemized	597781.30	1635309.54
(iii) TOTAL (add Lines 11(a)(i) and (ii)	618817.30	1666409.16
(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)	618817.30	1666409.16
12. Transfers From Affiliated/Other Party Committees	8111.67	104170.75
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)	85.00	85.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	7000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	534.29	1250.41
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))	627548.26	1778915.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	627548.26	1778915.32

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	2115.20	9887.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	2115.20	9887.32
22. Transfers to Affiliated/Other Party Committees.....	500.00	513400.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	379000.00	459000.00
24. Independent Expenditure (use Schedule E)	0.00	100000.00
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	-4.20	4867.58
(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))	-4.20	4867.58
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 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))..	381611.00	1087154.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	381611.00	1087154.90

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 178

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)	618817.30	1666409.16
34. Total Contribution Refunds (from Line 28(d))	-4.20	4867.58
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	618821.50	1661541.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2115.20	9887.32
37. Offsets to Operating Expenditures (from Line 15, page 3)	85.00	85.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2030.20	9802.32

**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 6 / 178
	<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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial) JEFFREY SCOTT ABBE	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
Mailing Address P.O. Box 486	Transaction ID: SA11AI.153226
City State Zip Code Harold KY 41635	Amount of Each Receipt this Period 54.48
FEC ID number of contributing federal political committee. C	
Name of Employer AFSCME INT'L	Occupation ORGANIZER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 217.92

B.

Full Name (Last, First, Middle Initial) RICHARD ABELSON	Date of Receipt MM / DD / YYYY 03 / 09 / 2010
Mailing Address 4315 N. Lake Drive	Transaction ID: SA11AI.153890
City State Zip Code Shorewood WI 53211	Amount of Each Receipt this Period 42.00
FEC ID number of contributing federal political committee. C	
Name of Employer AFSCME WI CN 48	Occupation EXECUTIVE DIRECTOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.50

C.

Full Name (Last, First, Middle Initial) RICHARD ABELSON	Date of Receipt MM / DD / YYYY 03 / 22 / 2010
Mailing Address 4315 N. Lake Drive	Transaction ID: SA11AI.153891
City State Zip Code Shorewood WI 53211	Amount of Each Receipt this Period 42.00
FEC ID number of contributing federal political committee. C	
Name of Employer AFSCME WI CN 48	Occupation EXECUTIVE DIRECTOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.50

SUBTOTAL of Receipts This Page (optional)	▶	138.48
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 7 / 178
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) RICHARD ABELSON		Date of Receipt
	Mailing Address 4315 N. Lake Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2010
	City	State	Zip Code
	Shorewood	WI	53211
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153846
Name of Employer AFSCME WI CN 48		Occupation EXECUTIVE DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 326.25	<input type="text"/> 10.75

B.	Full Name (Last, First, Middle Initial) ADAM ACOSTA		Date of Receipt
	Mailing Address 66 La Perla		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 08 / 2010
	City	State	Zip Code
	Foothill Ranch	CA	92610
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153826
Name of Employer AFSCME CA CN 36		Occupation POLITICAL ACTION REPRESENTATIVE III	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 403.92	<input type="text"/> 67.32

C.	Full Name (Last, First, Middle Initial) ABIOLA AFOLAYAN		Date of Receipt
	Mailing Address 2341 Farlund Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 08 / 2010
	City	State	Zip Code
	St. Louis	MO	63031
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153829
Name of Employer AFSCME CA CN 36		Occupation STAFF REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	<input type="text"/> 50.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 128.07
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial) SHANA ALDERTON		Date of Receipt MM / DD / YYYY 03 / 16 / 2010
Mailing Address 710 Chippewa Square		Transaction ID: SA11AI.153701
City Marquette	State MI	Zip Code 48955
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.45
Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.93	

B.

Full Name (Last, First, Middle Initial) SHARON J. ALEXANDER		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
Mailing Address 12510 Chalford Lane		Transaction ID: SA11AI.153227
City Bowie	State MD	Zip Code 20715
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 36.81
Name of Employer AFSCME INT'L	Occupation EXECUTIVE OFFICE ASSISTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.86	

C.

Full Name (Last, First, Middle Initial) KENNETH L. ALLEN		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
Mailing Address 7935 SW Santolina Place		Transaction ID: SA11AI.153847
City Beaverton	State OR	Zip Code 97008-6272
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.00
Name of Employer AFSCME OR CN 75	Occupation EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	▶	86.26
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 9 / 178

(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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)

CAROL A ANDERSON

Mailing Address 303 Dias Drive

City

Fort Washington

State

MD

Zip Code

20744

FEC ID number of contributing federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, EDUCATION

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

247.45

Date of Receipt

M M / D D / Y Y Y Y
03 / 15 / 2010

Transaction ID: SA11AI.153126

Amount of Each Receipt this Period

49.49

B.

Full Name (Last, First, Middle Initial)

CAROL A ANDERSON

Mailing Address 303 Dias Drive

City

Fort Washington

State

MD

Zip Code

20744

FEC ID number of contributing federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, EDUCATION

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

296.94

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11AI.153229

Amount of Each Receipt this Period

49.49

C.

Full Name (Last, First, Middle Initial)

MICHAEL ANDREJCO

Mailing Address 5075 Pajabon Drive
#201

City

Harrisburg

State

PA

Zip Code

17111

FEC ID number of contributing federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

M M / D D / Y Y Y Y
03 / 12 / 2010

Transaction ID: SA11AI.153332

Amount of Each Receipt this Period

68.30

SUBTOTAL of Receipts This Page (optional)

167.28

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 / 178
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
 DAVID ANTLE

Mailing Address P.O. Box 1093

City State Zip Code
Moscow PA 18444

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

Name of Employer Occupation
 AFSCME PA CN 13 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **330.42**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 12 / 2010

Transaction ID: SA11AI.153333

Amount of Each Receipt this Period
110.14

B.

Full Name (Last, First, Middle Initial)
 MICHAEL L. ARTZ

Mailing Address 745 Irving Street, N.W.

City State Zip Code
Washington DC 20010

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

Name of Employer Occupation
 AFSCME INT'L ASSOCIATE TO GENERAL COUNSEL

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **231.60**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11AI.153230

Amount of Each Receipt this Period
38.60

C.

Full Name (Last, First, Middle Initial)
 RICHARD C. BADGER, II

Mailing Address P.O. Box 2825

City State Zip Code
Appleton WI 54912

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

Name of Employer Occupation
 AFSCME WI CN 40 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **315.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 03 / 2010

Transaction ID: SA11AI.153938

Amount of Each Receipt this Period
105.00

SUBTOTAL of Receipts This Page (optional) ► **253.74**

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 / 178
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
 RICHARD C. BADGER, II
 Mailing Address P.O. Box 2825
 City State Zip Code
 Appleton WI 54912
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 31 / 2010
Transaction ID: SA11AI.153971
 Amount of Each Receipt this Period
 105.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME WI CN 40 STAFF REPRESENTATIVE
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 420.00

B. Full Name (Last, First, Middle Initial)
 ANTHONY L. BAKKEN
 Mailing Address 500 E Parish Street
 City State Zip Code
 Prair Du Chien WI 53821
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 01 / 2010
Transaction ID: SA11AI.154062
 Amount of Each Receipt this Period
 50.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME WI CN 24/STATE OF WI STAFF REPRESENTATIVE
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

C. Full Name (Last, First, Middle Initial)
 ANTHONY L. BAKKEN
 Mailing Address 500 E Parish Street
 City State Zip Code
 Prair Du Chien WI 53821
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 15 / 2010
Transaction ID: SA11AI.154063
 Amount of Each Receipt this Period
 50.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME WI CN 24/STATE OF WI STAFF REPRESENTATIVE
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

SUBTOTAL of Receipts This Page (optional) ► 205.00
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 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) ANTHONY L. BAKKEN	Date of Receipt MM / DD / YYYY 03 / 29 / 2010
	Mailing Address 500 E Parish Street	Transaction ID: SA11AI.154064
	City State Zip Code Prair Du Chien WI 53821	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME WI CN 24/STATE OF WI STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

B.	Full Name (Last, First, Middle Initial) SUSAN BARKULIS	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 9051 Southwest Blvd. #P	Transaction ID: SA11AI.153231
	City State Zip Code Jefferson MO 65109	Amount of Each Receipt this Period 36.09
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME INT'L LEAD ORGANIZER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.54	

C.	Full Name (Last, First, Middle Initial) MARY ANNE BARNETT	Date of Receipt MM / DD / YYYY 03 / 15 / 2010
	Mailing Address 1155 Lakepointe	Transaction ID: SA11AI.153129
	City State Zip Code Grosse Pointe Park MI 48230	Amount of Each Receipt this Period 74.23
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME INT'L ASSISTANT DIRECTOR, ORGANIZING DVLPT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.03	

SUBTOTAL of Receipts This Page (optional)	165.32
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 13 / 178
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) MARY ANNE BARNETT		Date of Receipt
	Mailing Address 1155 Lakepointe		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 31 / 2010
	City	State	Zip Code
	Grosse Pointe Park	MI	48230
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer AFSCME INT'L		Occupation ASSISTANT DIRECTOR, ORGANIZING DVLPT	Transaction ID: SA11AI.153232
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 416.26	<input type="text"/> 74.23

B.	Full Name (Last, First, Middle Initial) MICHAEL D. BAUER		Date of Receipt
	Mailing Address 23 Valley Forge Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 04 / 2010
	City	State	Zip Code
	Elyria	OH	44035
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer AFSCME OH CN 8		Occupation STAFF REPRESENTATIVE	Transaction ID: SA11AI.153753
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 254.28	<input type="text"/> 84.76

C.	Full Name (Last, First, Middle Initial) PATRICIA BAUER		Date of Receipt
	Mailing Address 4031 Executive Park Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 12 / 2010
	City	State	Zip Code
	Harrisburg	PA	17111
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer AFSCME PA CN 13		Occupation STAFF REPRESENTATIVE	Transaction ID: SA11AI.153336
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 260.18	<input type="text"/> 90.82

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 249.81
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 / 178		
	<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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) HENRY BAYER	Date of Receipt MM / DD / YYYY 03 / 01 / 2010
	Mailing Address 1507 W. Chase Street	Transaction ID: SA11AI.155949
	City State Zip Code Chicago IL 60626-2125	Amount of Each Receipt this Period 113.90
	FEC ID number of contributing federal political committee. C	
	Name of Employer AFSCME IL CN 31 Occupation EXECUTIVE DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 283.80	

B.	Full Name (Last, First, Middle Initial) HENRY BAYER	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 1507 W. Chase Street	Transaction ID: SA11AI.153848
	City State Zip Code Chicago IL 60626-2125	Amount of Each Receipt this Period 28.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer AFSCME IL CN 31 Occupation EXECUTIVE DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 311.80	

C.	Full Name (Last, First, Middle Initial) MICHAEL BEGATTO	Date of Receipt MM / DD / YYYY 03 / 09 / 2010
	Mailing Address 301 Hedgerow Lane	Transaction ID: SA11AI.153896
	City State Zip Code Wilmington DE 19807	Amount of Each Receipt this Period 177.60
	FEC ID number of contributing federal political committee. C	
	Name of Employer AFSCME DE CN 81 Occupation EXECUTIVE DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 277.57	

SUBTOTAL of Receipts This Page (optional)	319.50
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 15 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) MARTIN BEIL		Date of Receipt MM / DD / YYYY 03 / 05 / 2010		
	Mailing Address 10363 Hudson Road		Transaction ID: SA11AI.154209		
	City Mazomanie	State WI	Zip Code 53560-9773	Amount of Each Receipt this Period 86.30	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME WI CN 24	Occupation EXECUTIVE DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 258.90			

B.	Full Name (Last, First, Middle Initial) CATHERINE S. BENCINI		Date of Receipt MM / DD / YYYY 03 / 01 / 2010		
	Mailing Address 1471 Seahorse Lane		Transaction ID: SA11AI.155953		
	City Carbondale	State IL	Zip Code 62901	Amount of Each Receipt this Period 258.40	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME IL CN 31/STATE OF IL	Occupation TELECOMMUNICATOR SPECIALIST			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 258.40			

C.	Full Name (Last, First, Middle Initial) CHARLES BENN		Date of Receipt MM / DD / YYYY 03 / 12 / 2010		
	Mailing Address 141 Eddington Avenue		Transaction ID: SA11AI.153337		
	City Harrisburg	State PA	Zip Code 17111-3520	Amount of Each Receipt this Period 93.48	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.44			

SUBTOTAL of Receipts This Page (optional)	438.18
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 / 178
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
 PAULA BENTLEY
 Mailing Address 3701 Oakview Drive
 City State Zip Code
 Orlando FL 32812
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 15 / 2010
Transaction ID: SA11AI.153131
 Amount of Each Receipt this Period
 94.58
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME INT'L AREA ORGANIZING DIRECTOR
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 472.90

B. Full Name (Last, First, Middle Initial)
 PAULA BENTLEY
 Mailing Address 3701 Oakview Drive
 City State Zip Code
 Orlando FL 32812
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 31 / 2010
Transaction ID: SA11AI.153234
 Amount of Each Receipt this Period
 94.58
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME INT'L AREA ORGANIZING DIRECTOR
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 567.48

C. Full Name (Last, First, Middle Initial)
 JACK BERNFELD
 Mailing Address 8033 Excelsior Drive
 Suite B
 City State Zip Code
 Madison WI 53717-1903
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 31 / 2010
Transaction ID: SA11AI.153974
 Amount of Each Receipt this Period
 55.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME WI CN 40 STAFF REPRESENTATIVE
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

SUBTOTAL of Receipts This Page (optional) ► **244.16**
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 17 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) WALTER BLAIR		Date of Receipt	
	Mailing Address 2223 Wintergreen Avenue		M M / D D / Y Y Y Y Y 03 / 31 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.153236
	District Heights	MD	20747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		39.86	
Name of Employer AFSCME INT'L		Occupation ASSISTANT DIRECTOR, ACCOUNTING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 239.16		

B.	Full Name (Last, First, Middle Initial) BARRY BOGARDE		Date of Receipt	
	Mailing Address 4303 Vermont Court		M M / D D / Y Y Y Y Y 03 / 12 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.153339
	Harrisburg	PA	17112-9512	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		106.28	
Name of Employer AFSCME PA CN 13		Occupation UNION REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 318.84		

C.	Full Name (Last, First, Middle Initial) BENJAMIN BORGES-HERNANDEZ		Date of Receipt	
	Mailing Address Paseo De Palma Real Buzon 185		M M / D D / Y Y Y Y Y 03 / 31 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.153238
	Juncos	PR	00777-0000	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		35.13	
Name of Employer AFSCME INT'L		Occupation LEAD ORGANIZER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.78		

SUBTOTAL of Receipts This Page (optional)	▶	181.27
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 18 / 178
	<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	

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) CAROL BOWSHIER	Date of Receipt MM / DD / YYYY 03 / 02 / 2010
	Mailing Address 159 East Main Street	Transaction ID: SA11AI.155251
	City State Zip Code Mt. Sterling OH 43143	Amount of Each Receipt this Period 72.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME OH LOC 11 OPERATIONS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	

B.	Full Name (Last, First, Middle Initial) CAROL BOWSHIER	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 159 East Main Street	Transaction ID: SA11AI.155274
	City State Zip Code Mt. Sterling OH 43143	Amount of Each Receipt this Period 72.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME OH LOC 11 OPERATIONS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 324.00	

C.	Full Name (Last, First, Middle Initial) WILLIAM BRENNER	Date of Receipt MM / DD / YYYY 03 / 12 / 2010
	Mailing Address 3300 Old Trail Road	Transaction ID: SA11AI.153341
	City State Zip Code York Haven PA 17370	Amount of Each Receipt this Period 72.96
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.88	

SUBTOTAL of Receipts This Page (optional)	216.96
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 19 / 178
	<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	

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) BILL BROCKMILLER		Date of Receipt MM / DD / YYYY 03 / 30 / 2010		
	Mailing Address 1418 10th Street #204		Transaction ID: SA11AI.154076		
	City Lacrosse	State WI	Zip Code 54601	Amount of Each Receipt this Period 30.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME WI CN 24/STATE OF WI	Occupation STAFF REPRESENTATIVE	Aggregate Year-to-Date 210.00		

B.	Full Name (Last, First, Middle Initial) CAROL L. BURNETT		Date of Receipt MM / DD / YYYY 03 / 15 / 2010		
	Mailing Address 1921 N. Westmoreland		Transaction ID: SA11AI.153136		
	City Arlington	State VA	Zip Code 22213	Amount of Each Receipt this Period 48.17	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME INT'L	Occupation MANAGER, ART & GRAPHIC DESIGN	Aggregate Year-to-Date 240.85		

C.	Full Name (Last, First, Middle Initial) CAROL L. BURNETT		Date of Receipt MM / DD / YYYY 03 / 31 / 2010		
	Mailing Address 1921 N. Westmoreland		Transaction ID: SA11AI.153239		
	City Arlington	State VA	Zip Code 22213	Amount of Each Receipt this Period 49.38	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME INT'L	Occupation MANAGER, ART & GRAPHIC DESIGN	Aggregate Year-to-Date 290.23		

SUBTOTAL of Receipts This Page (optional)	▶	127.55
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 20 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) DOUGLAS R. BURNETT	Date of Receipt
	Mailing Address 1625 L. Street NW	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 15 / 2010
	City State Zip Code Washington DC 20036	Transaction ID: SA11AI.153137
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 42.08
Name of Employer AFSCME INT'L	Occupation POLITICAL ACTION COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 210.40	

B.	Full Name (Last, First, Middle Initial) DOUGLAS R. BURNETT	Date of Receipt
	Mailing Address 1625 L. Street NW	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 31 / 2010
	City State Zip Code Washington DC 20036	Transaction ID: SA11AI.153240
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 42.08
Name of Employer AFSCME INT'L	Occupation POLITICAL ACTION COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 252.48	

C.	Full Name (Last, First, Middle Initial) ROBERT CALVIN	Date of Receipt
	Mailing Address 45 Church Road	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 12 / 2010
	City State Zip Code Mercer PA 16137-5911	Transaction ID: SA11AI.153343
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 68.30
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 204.90	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 152.46
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 178
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
RICHARD CAPONI

Mailing Address 4453 Stilley Road

City State Zip Code
Pittsburgh PA 15227

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

Name of Employer Occupation
AFSCME PA CN 13 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.42

Date of Receipt
MM / DD / YYYY
03 / 12 / 2010

Transaction ID: SA11AI.153344

Amount of Each Receipt this Period
110.14

B.

Full Name (Last, First, Middle Initial)
MARCOS CARDENAS

Mailing Address 6927 Amherst Street

City State Zip Code
San Diego CA 92109

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

Name of Employer Occupation
AFSCME CA CN 36 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 339.84

Date of Receipt
MM / DD / YYYY
03 / 08 / 2010

Transaction ID: SA11AI.153830

Amount of Each Receipt this Period
56.64

C.

Full Name (Last, First, Middle Initial)
JOYCE CARLSON

Mailing Address 911 Aldine Street

City State Zip Code
Saint Paul MN 55104

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

Name of Employer Occupation
AFSCME MN CN 5/CN14 BUSINESS REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.14

Date of Receipt
MM / DD / YYYY
03 / 12 / 2010

Transaction ID: SA11AI.155502

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **186.78**

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 22 / 178
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) ANTHONY CASO	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 9 Garden Court	Transaction ID: SA11AI.153851
	City State Zip Code Boston MA 02113-0000	Amount of Each Receipt this Period 41.67
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME MA CN 93 EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.21	

B.	Full Name (Last, First, Middle Initial) KARL E. CHILDRESS	Date of Receipt MM / DD / YYYY 03 / 15 / 2010
	Mailing Address 1605 E Street SE	Transaction ID: SA11AI.153140
	City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 43.23
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME INT'L MANAGER, APPLICATIONS DEVELOPMENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.15	

C.	Full Name (Last, First, Middle Initial) KARL E. CHILDRESS	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 1605 E Street SE	Transaction ID: SA11AI.153243
	City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 43.23
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME INT'L MANAGER, APPLICATIONS DEVELOPMENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 259.38	

SUBTOTAL of Receipts This Page (optional)	▶	128.13
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 23 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) JUDY K CHOW	Date of Receipt MM / DD / YYYY 03 / 04 / 2010
	Mailing Address 888 Mililani Street Suite 601	Transaction ID: SA11AI.153486
	City Honolulu State HI Zip Code 96813-2991	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) TRACEY CONATY	Date of Receipt MM / DD / YYYY 03 / 15 / 2010
	Mailing Address 1789 Lanier Place NW #42	Transaction ID: SA11AI.153142
	City Washington State DC Zip Code 20009	Amount of Each Receipt this Period 48.17
	FEC ID number of contributing federal political committee. C	
	Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, PUBLIC AFFAIRS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.85	

C.	Full Name (Last, First, Middle Initial) TRACEY CONATY	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 1789 Lanier Place NW #42	Transaction ID: SA11AI.153245
	City Washington State DC Zip Code 20009	Amount of Each Receipt this Period 48.17
	FEC ID number of contributing federal political committee. C	
	Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, PUBLIC AFFAIRS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 289.02	

SUBTOTAL of Receipts This Page (optional)	196.34
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 24 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
ROBERT COOPER

Mailing Address 931 South Walnut Street

City State Zip Code
West Chester PA 19382

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

Name of Employer Occupation
AFSCME PA CN 13 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.42

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 12 / 2010

Transaction ID: SA11AI.153347

Amount of Each Receipt this Period
110.14

B.

Full Name (Last, First, Middle Initial)
BARBARA COUFAL

Mailing Address 10112 Parkwood Drive

City State Zip Code
Bethesda MD 20814

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

Name of Employer Occupation
AFSCME INT'L LEGISLATIVE AFFAIRS SPECIALIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 234.40

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 15 / 2010

Transaction ID: SA11AI.153143

Amount of Each Receipt this Period
46.88

C.

Full Name (Last, First, Middle Initial)
BARBARA COUFAL

Mailing Address 10112 Parkwood Drive

City State Zip Code
Bethesda MD 20814

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

Name of Employer Occupation
AFSCME INT'L LEGISLATIVE AFFAIRS SPECIALIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 282.25

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11AI.153246

Amount of Each Receipt this Period
47.85

SUBTOTAL of Receipts This Page (optional) ► **204.87**

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 25 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) CHRISTOPHER COWEN		Date of Receipt
	Mailing Address 47 Douglas Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 09 / 2010
	City	State	Zip Code
	Saint Paul	MN	55102
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.155298
Name of Employer AFSCME MN CN 5/CN14		Occupation BUSINESS REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 211.18	71.14

B.	Full Name (Last, First, Middle Initial) KATHERINE M. COX		Date of Receipt
	Mailing Address 2542B S. Walter Reed Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 15 / 2010
	City	State	Zip Code
	Arlington	VA	22206
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153144
Name of Employer AFSCME INT'L		Occupation ASSISTANT DIRECTOR, RESEARCH	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 228.15	45.63

C.	Full Name (Last, First, Middle Initial) KATHERINE M. COX		Date of Receipt
	Mailing Address 2542B S. Walter Reed Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2010
	City	State	Zip Code
	Arlington	VA	22206
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153247
Name of Employer AFSCME INT'L		Occupation ASSISTANT DIRECTOR, RESEARCH	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 273.78	45.63

SUBTOTAL of Receipts This Page (optional)	162.40
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 26 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) CHARLENE M. CUNNINGHAM	Date of Receipt MM / DD / YYYY 03 / 29 / 2010
	Mailing Address 920 E. 5th Avenue	Transaction ID: SA11AI.156589
	City State Zip Code Columbus OH 43201	Amount of Each Receipt this Period 31.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME OH LOC 4/COLUMBUS BUS DRIVER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.75	

B.	Full Name (Last, First, Middle Initial) WILLIAM DANDO	Date of Receipt MM / DD / YYYY 03 / 12 / 2010
	Mailing Address 6630 Huntingdon Street	Transaction ID: SA11AI.153349
	City State Zip Code Harrisburg PA 17111	Amount of Each Receipt this Period 78.54
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME PA CN 13 ASSOCIATE LEGISLATIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.62	

C.	Full Name (Last, First, Middle Initial) ROBERT A. DAVIS	Date of Receipt MM / DD / YYYY 03 / 04 / 2010
	Mailing Address 822 Bovee Lane	Transaction ID: SA11AI.153770
	City State Zip Code Powell OH 43065	Amount of Each Receipt this Period 84.76
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME OH CN 8 ASSOCIATE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 254.28	

SUBTOTAL of Receipts This Page (optional)	194.55
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 27 / 178
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) CONSTANCE DERR		Date of Receipt
	Mailing Address P.O. Box 116		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Maspeth	NY	11378
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.153145
Name of Employer AFSCME INT'L		Occupation REGIONAL DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 247.45	<input type="text"/> 49.49

B.	Full Name (Last, First, Middle Initial) CONSTANCE DERR		Date of Receipt
	Mailing Address P.O. Box 116		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Maspeth	NY	11378
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.153248
Name of Employer AFSCME INT'L		Occupation REGIONAL DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 296.94	<input type="text"/> 49.49

C.	Full Name (Last, First, Middle Initial) GREG DEVEREUX		Date of Receipt
	Mailing Address 3561 S.E. Kamilehe Point Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Shelton	WA	98584
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.154028
Name of Employer AFSCME WA CN 28		Occupation EXECUTIVE DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 388.00	<input type="text"/> 120.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 218.98
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial) GREG DEVEREUX		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
Mailing Address 3561 S.E. Kamilehe Point Road		Transaction ID: SA11AI.153852
City Shelton	State WA	Zip Code 98584
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.00
Name of Employer AFSCME WA CN 28	Occupation EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 402.00	

B.

Full Name (Last, First, Middle Initial) JASON DIBBLE		Date of Receipt MM / DD / YYYY 03 / 12 / 2010
Mailing Address 303 12th Street SE		Transaction ID: SA11AI.155541
City Austin	State MN	Zip Code 55912-4229
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer AFSCME MN CN 5/STATE OF MN	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

C.

Full Name (Last, First, Middle Initial) JASON DIBBLE		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
Mailing Address 303 12th Street SE		Transaction ID: SA11AI.155338
City Austin	State MN	Zip Code 55912-4229
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer AFSCME MN CN 5/STATE OF MN	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 470.00	

SUBTOTAL of Receipts This Page (optional)	▶	184.00
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 29 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) JEAN M. DIEDERICH	Date of Receipt MM / DD / YYYY 03 / 05 / 2010
	Mailing Address 4741 Grand Ave. So. No. 3	Transaction ID: SA11AI.155396
	City State Zip Code Minneapolis MN 55419-5443	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer AFSCME MN CN 5/HENNEPIN COUNTY Occupation CHILD SUPPORT OFFICER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 330.00	

B.	Full Name (Last, First, Middle Initial) KEVIN DOEING	Date of Receipt MM / DD / YYYY 03 / 12 / 2010
	Mailing Address 316 Quittie Park Dr.	Transaction ID: SA11AI.153354
	City State Zip Code Annville PA 17003	Amount of Each Receipt this Period 78.54
	FEC ID number of contributing federal political committee. C	
	Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 230.04	

C.	Full Name (Last, First, Middle Initial) THOMAS C. DRABICK, JR.	Date of Receipt MM / DD / YYYY 03 / 17 / 2010
	Mailing Address 982 Fortkort Drive	Transaction ID: SA11AI.153612
	City State Zip Code Reynoldsburg OH 43068	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer AFSCME OH LOC 4 Occupation DIRECTOR, LEGAL SERVICES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 240.00	

SUBTOTAL of Receipts This Page (optional)	228.54
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 30 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
PAMELA F. DUNCAN

Mailing Address 7282 Aplin Drive

City Reynoldsburg State OH Zip Code 43068

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

Name of Employer AFSCME OH LOC 4 Occupation EXECUTIVE ASSISTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt: MM / DD / YYYY
03 / 17 / 2010

Transaction ID: SA11AI.153613

Amount of Each Receipt this Period: 38.50

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

Mailing Address 5007 26th Ave., SE

City Lacey State WA Zip Code 98503

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

Name of Employer AFSCME WA CN 28 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: MM / DD / YYYY
03 / 24 / 2010

Transaction ID: SA11AI.154032

Amount of Each Receipt this Period: 90.00

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

Mailing Address 2257 Park Hill Avenue

City Baltimore State MD Zip Code 21211

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

Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.46

Date of Receipt: MM / DD / YYYY
03 / 05 / 2010

Transaction ID: SA11AI.153906

Amount of Each Receipt this Period: 141.64

SUBTOTAL of Receipts This Page (optional) ► **270.14**

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 31 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) MARY FALK		Date of Receipt																					
	Mailing Address 11236 Georgia Avenue N.		<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>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		3	1		2	0	1	0														
	City North Champlin State MN Zip Code 55316-3800		Transaction ID: SA11AI.155342																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00		60.00																						

B.	Full Name (Last, First, Middle Initial) STEPHAN FANTAUZZO		Date of Receipt																					
	Mailing Address 3840 N. Delaware Street		<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>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		1	5		2	0	1	0														
	City Indianapolis State IN Zip Code 46205		Transaction ID: SA11AI.153146																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer AFSCME INT'L Occupation REGIONAL DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 295.00		59.00																						

C.	Full Name (Last, First, Middle Initial) STEPHAN FANTAUZZO		Date of Receipt																					
	Mailing Address 3840 N. Delaware Street		<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>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		3	1		2	0	1	0														
	City Indianapolis State IN Zip Code 46205		Transaction ID: SA11AI.153249																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer AFSCME INT'L Occupation REGIONAL DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 354.00		59.00																						

SUBTOTAL of Receipts This Page (optional)	178.00
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 32 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) RICHARD M. FELLER	Date of Receipt MM / DD / YYYY 03 / 15 / 2010
	Mailing Address 4705 Butterworth Place, NW	Transaction ID: SA11AI.153147
	City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 53.67
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME INT'L ASSOCIATE DIRECTOR, POLITICAL ACTION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 268.35	

B.	Full Name (Last, First, Middle Initial) RICHARD M. FELLER	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 4705 Butterworth Place, NW	Transaction ID: SA11AI.153250
	City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 53.67
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME INT'L ASSOCIATE DIRECTOR, POLITICAL ACTION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 322.02	

C.	Full Name (Last, First, Middle Initial) CATHRYN FELLINGER	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 2271 Edmonton Road	Transaction ID: SA11AI.155277
	City State Zip Code Columbus OH 43229-4705	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME OH LOC 11 STAFF REPRESENTATIVE	
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)	157.34
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 33 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) JOHN J. FILAK, Jr.	Date of Receipt MM / DD / YYYY 03 / 04 / 2010
	Mailing Address 6160 Clingan Road	Transaction ID: SA11AI.153776
	City State Zip Code Poland OH 44514	Amount of Each Receipt this Period 84.76
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME OH CN 8 STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 254.28	

B.	Full Name (Last, First, Middle Initial) DAVID FILLMAN	Date of Receipt MM / DD / YYYY 03 / 12 / 2010
	Mailing Address 2520 Helen Street	Transaction ID: SA11AI.153359
	City State Zip Code Hatboro PA 19040	Amount of Each Receipt this Period 136.70
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME PA CN 13 EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 438.10	

C.	Full Name (Last, First, Middle Initial) DAVID FILLMAN	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 2520 Helen Street	Transaction ID: SA11AI.153855
	City State Zip Code Hatboro PA 19040	Amount of Each Receipt this Period 14.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME PA CN 13 EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 452.10	

SUBTOTAL of Receipts This Page (optional)	235.46
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 34 / 178
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
 MICHAEL E. FOX
 Mailing Address 3818 Sheffield Lane
 City Harrisburg State PA Zip Code 17110-3044
 Date of Receipt 03 / 12 / 2010
 Transaction ID: SA11AI.153360
 Amount of Each Receipt this Period 110.14
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation COUNCIL DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 470.42

B. Full Name (Last, First, Middle Initial)
 MICHAEL E. FOX
 Mailing Address 3818 Sheffield Lane
 City Harrisburg State PA Zip Code 17110-3044
 Date of Receipt 03 / 31 / 2010
 Transaction ID: SA11AI.153856
 Amount of Each Receipt this Period 70.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation COUNCIL DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.42

C. Full Name (Last, First, Middle Initial)
 AMY H. GALATIAN
 Mailing Address 10925 Southern Highlands Parkway
 City Las Vegas State NV Zip Code 89141
 Date of Receipt 03 / 31 / 2010
 Transaction ID: SA11AI.153251
 Amount of Each Receipt this Period 34.08
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation REGIONAL FIELD ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 204.48

SUBTOTAL of Receipts This Page (optional) ► **214.22**
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 35 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) ALBERT GARRETT		Date of Receipt
	Mailing Address 18491 Lauder		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 03 / 2010
	City	State	Zip Code
	Detroit	MI	48235-2738
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.153667
		Amount of Each Receipt this Period	
		<input type="text"/>	
		120.42	
Name of Employer AFSCME MI CN 25		Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 630.10	

B.	Full Name (Last, First, Middle Initial) ALBERT GARRETT		Date of Receipt
	Mailing Address 18491 Lauder		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 16 / 2010
	City	State	Zip Code
	Detroit	MI	48235-2738
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.153715
		Amount of Each Receipt this Period	
		<input type="text"/>	
		120.42	
Name of Employer AFSCME MI CN 25		Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 750.52	

C.	Full Name (Last, First, Middle Initial) ALBERT GARRETT		Date of Receipt
	Mailing Address 18491 Lauder		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2010
	City	State	Zip Code
	Detroit	MI	48235-2738
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.153857
		Amount of Each Receipt this Period	
		<input type="text"/>	
		14.00	
Name of Employer AFSCME MI CN 25		Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 764.52	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 178
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial) DAVID GASH		Date of Receipt MM / DD / YYYY 03 / 12 / 2010
Mailing Address 226 Hartley Road		Transaction ID: SA11AI.153364
City Hershey	State PA	Zip Code 17033
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 68.30
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.90	

B.

Full Name (Last, First, Middle Initial) RAGLAN GEORGE, Jr.		Date of Receipt MM / DD / YYYY 03 / 05 / 2010
Mailing Address 75 Varick Street Suite #1404		Transaction ID: SA11AI.153844
City New York	State NY	Zip Code 10013-9902
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 95.76
Name of Employer AFSCME NY CN 1707	Occupation EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 363.16	

C.

Full Name (Last, First, Middle Initial) RAGLAN GEORGE, Jr.		Date of Receipt MM / DD / YYYY 03 / 26 / 2010
Mailing Address 75 Varick Street Suite #1404		Transaction ID: SA11AI.153845
City New York	State NY	Zip Code 10013-9902
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 95.76
Name of Employer AFSCME NY CN 1707	Occupation EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 458.92	

SUBTOTAL of Receipts This Page (optional)	▶	259.82
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 37 / 178
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
RAGLAN GEORGE, Jr.

Mailing Address 75 Varick Street
Suite #1404

City State Zip Code
New York NY 10013-9902

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

Name of Employer Occupation
AFSCME NY CN 1707 EXECUTIVE DIRECTOR

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
472.92

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11AI.153858

Amount of Each Receipt this Period
14.00

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

Mailing Address 152 Upper Claar Rd.

City State Zip Code
Claysburg PA 16625

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

Name of Employer Occupation
AFSCME PA CN 13 STAFF REPRESENTATIVE

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.90

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 12 / 2010

Transaction ID: SA11AI.153365

Amount of Each Receipt this Period
68.30

C. Full Name (Last, First, Middle Initial)
DOROTHY L. GILLIAM

Mailing Address 1216 Waterford Drive

City State Zip Code
District Heights MD 20747

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

Name of Employer Occupation
AFSCME INT'L ADMINISTRATIVE ASSISTANT II

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
212.52

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11AI.153254

Amount of Each Receipt this Period
35.42

SUBTOTAL of Receipts This Page (optional) ► **117.72**

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 38 / 178
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
ALICE GOFF
 Mailing Address **8124 Alix Avenue**
 City **Los Angeles** State **CA** Zip Code **90001**
 Date of Receipt **03 / 08 / 2010**
Transaction ID: SA11AI.153832
 Amount of Each Receipt this Period **40.00**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **AFSCME CA CN 36** Occupation **BUSINESS REPRESENTATIVE**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **240.00**

B. Full Name (Last, First, Middle Initial)
MARK GOLDEN
 Mailing Address **74 Ice Pond Road**
 City **Levittown** State **PA** Zip Code **19057**
 Date of Receipt **03 / 12 / 2010**
Transaction ID: SA11AI.153366
 Amount of Each Receipt this Period **68.30**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **AFSCME PA CN 13** Occupation **STAFF REPRESENTATIVE**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **204.90**

C. Full Name (Last, First, Middle Initial)
RICHARD GOLLIN
 Mailing Address **900 Randolph Place**
 City **Union** State **NJ** Zip Code **07083-0000**
 Date of Receipt **03 / 05 / 2010**
Transaction ID: SA11AI.153907
 Amount of Each Receipt this Period **105.92**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **AFSCME NJ CN 52** Occupation **EXECUTIVE DIRECTOR**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **325.92**

SUBTOTAL of Receipts This Page (optional) ► **214.22**
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 39 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial) RICHARD GOLLIN		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
Mailing Address 900 Randolph Place		Transaction ID: SA11AI.153859
City Union	State NJ	Zip Code 07083-0000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer AFSCME NJ CN 52	Occupation EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.92	

B.

Full Name (Last, First, Middle Initial) RICHARD GOLLIN		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
Mailing Address 900 Randolph Place		Transaction ID: SA11AI.153908
City Union	State NJ	Zip Code 07083-0000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 105.92
Name of Employer AFSCME NJ CN 52	Occupation EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 441.84	

C.

Full Name (Last, First, Middle Initial) JAMES R. GOLLINGS, Jr.		Date of Receipt MM / DD / YYYY 03 / 17 / 2010
Mailing Address 40 Rathbone		Transaction ID: SA11AI.153618
City Columbus	State OH	Zip Code 43214
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.47
Name of Employer AFSCME OH LOC 4	Occupation FIELD REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.82	

SUBTOTAL of Receipts This Page (optional)	▶	154.39
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 40 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
MARY M. GOULDING

Mailing Address 2183 King James Drive

City State Zip Code
Green Bay WI 54311

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

Name of Employer: AFSCME WI CN 40 Occupation: SECRETARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.00

Date of Receipt: MM / DD / YYYY
03 / 01 / 2010

Transaction ID: SA11AI.154007

Amount of Each Receipt this Period: 39.00

B.

Full Name (Last, First, Middle Initial)
MARY M. GOULDING

Mailing Address 2183 King James Drive

City State Zip Code
Green Bay WI 54311

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

Name of Employer: AFSCME WI CN 40 Occupation: SECRETARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 303.00

Date of Receipt: MM / DD / YYYY
03 / 03 / 2010

Transaction ID: SA11AI.153949

Amount of Each Receipt this Period: 62.00

C.

Full Name (Last, First, Middle Initial)
MARY M. GOULDING

Mailing Address 2183 King James Drive

City State Zip Code
Green Bay WI 54311

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

Name of Employer: AFSCME WI CN 40 Occupation: SECRETARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt: MM / DD / YYYY
03 / 31 / 2010

Transaction ID: SA11AI.153982

Amount of Each Receipt this Period: 62.00

SUBTOTAL of Receipts This Page (optional) ► **163.00**

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 41 / 178
	<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	

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) STEPHEN M. GRAHAM		Date of Receipt
	Mailing Address 10105 Baltimore Avenue Apt. 3407		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 15 / 2010
	City	State	Zip Code
	College Park	MD	20740
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153154
Name of Employer AFSCME INT'L		Occupation ASSISTANT DIRECTOR, ACCOUNTING	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 216.15	<input type="text"/> 43.23

B.	Full Name (Last, First, Middle Initial) STEPHEN M. GRAHAM		Date of Receipt
	Mailing Address 10105 Baltimore Avenue Apt. 3407		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2010
	City	State	Zip Code
	College Park	MD	20740
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153257
Name of Employer AFSCME INT'L		Occupation ASSISTANT DIRECTOR, ACCOUNTING	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 259.38	<input type="text"/> 43.23

C.	Full Name (Last, First, Middle Initial) R. SEAN GRAYSON		Date of Receipt
	Mailing Address 10201 Galena Pointe Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 04 / 2010
	City	State	Zip Code
	Galena	OH	43021
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153777
Name of Employer AFSCME OH CN 8		Occupation GENERAL COUNSEL	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 309.54	<input type="text"/> 103.18

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 189.64
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 178
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
JONATHAN GREBNER

Mailing Address 840 Randolph Avenue

City State Zip Code
Saint Paul MN 55126

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

Name of Employer Occupation
AFSCME MN CN 5/CN14 POLITICAL DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 207.71

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 12 / 2010

Transaction ID: SA11AI.155588

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
RONALD J. GREEN

Mailing Address 531 Park Shadow Court

City State Zip Code
Baldwin Park CA 90706

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

Name of Employer Occupation
AFSCME CA CN 36/Local 3634 TRANSIT SUPERVISOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 10 / 2010

Transaction ID: SA11AI.153834

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
DANIEL GROVE

Mailing Address 131 Scanlon Dirve

City State Zip Code
Franklin PA 16323

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

Name of Employer Occupation
AFSCME PA CN 13 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 204.90

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 12 / 2010

Transaction ID: SA11AI.153368

Amount of Each Receipt this Period
68.30

SUBTOTAL of Receipts This Page (optional) ► **288.30**

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 43 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
YVONNE J. HARGROVE

Mailing Address 12832 Evansport PI

City State Zip Code
Woodbridge VA 22192

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

Name of Employer Occupation
AFSCME INT'L ADMINISTRATIVE ASSISTANT I

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.52

Date of Receipt
MM / DD / YYYY
03 / 31 / 2010

Transaction ID: SA11AI.153264

Amount of Each Receipt this Period
33.42

B.

Full Name (Last, First, Middle Initial)
LOUIS HARRIS

Mailing Address 1516 172nd Street East

City State Zip Code
Spanaway WA 98387

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

Name of Employer Occupation
AFSCME CA CN 36 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 394.20

Date of Receipt
MM / DD / YYYY
03 / 08 / 2010

Transaction ID: SA11AI.153835

Amount of Each Receipt this Period
65.70

C.

Full Name (Last, First, Middle Initial)
MICHAEL D. HATCHER

Mailing Address P. O. Box 231

City State Zip Code
Monticello KY 42633

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

Name of Employer Occupation
AFSCME INT'L LEAD ORGANIZER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.54

Date of Receipt
MM / DD / YYYY
03 / 31 / 2010

Transaction ID: SA11AI.153267

Amount of Each Receipt this Period
38.09

SUBTOTAL of Receipts This Page (optional) ► **137.21**

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 44 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
JIMMIE HEARNS

Mailing Address 18509 Mendota

City State Zip Code
Detroit MI 48221

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

Name of Employer Occupation
AFSCME MI CN 25 STAFF REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 219.86

Date of Receipt
MM / DD / YYYY
03 / 16 / 2010

Transaction ID: SA11AI.153720

Amount of Each Receipt this Period
36.67

B.

Full Name (Last, First, Middle Initial)
PHILIP W. HELMS

Mailing Address 4108 Menton

City State Zip Code
Flint MI 48507

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

Name of Employer Occupation
AFSCME MI CN 25 EDITOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 277.55

Date of Receipt
MM / DD / YYYY
03 / 03 / 2010

Transaction ID: SA11AI.153673

Amount of Each Receipt this Period
55.51

C.

Full Name (Last, First, Middle Initial)
PHILIP W. HELMS

Mailing Address 4108 Menton

City State Zip Code
Flint MI 48507

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

Name of Employer Occupation
AFSCME MI CN 25 EDITOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 333.06

Date of Receipt
MM / DD / YYYY
03 / 16 / 2010

Transaction ID: SA11AI.153721

Amount of Each Receipt this Period
55.51

SUBTOTAL of Receipts This Page (optional) ► 147.69

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 45 / 178
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
SIDNEY L. HELSETH

Mailing Address 6554 Craig Avenue

City Inver Grove Hgts. State MN Zip Code 55076-1700

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

Name of Employer AFSCME MN CN 5/CN14 Occupation BUSINESS REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.12

Date of Receipt 03 / 09 / 2010

Transaction ID: SA11AI.155306

Amount of Each Receipt this Period 71.12

B.

Full Name (Last, First, Middle Initial)
DAVID J. HENDERSON

Mailing Address 2040 Spring Valley Road

City Pittsburgh State PA Zip Code 15243-1422

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.42

Date of Receipt 03 / 12 / 2010

Transaction ID: SA11AI.153371

Amount of Each Receipt this Period 110.14

C.

Full Name (Last, First, Middle Initial)
MARGARET HOAK

Mailing Address P.O. Box 264

City Warren State PA Zip Code 16365

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 204.90

Date of Receipt 03 / 12 / 2010

Transaction ID: SA11AI.153373

Amount of Each Receipt this Period 68.30

SUBTOTAL of Receipts This Page (optional) ► 249.56

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 46 / 178
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
KARLA HODGE

Mailing Address 1212 N. 14th Street

City Harrisburg State PA Zip Code 17103

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 204.90

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 12 / 2010

Transaction ID: SA11AI.153374

Amount of Each Receipt this Period
68.30

B.

Full Name (Last, First, Middle Initial)
DANNY J. HOMAN

Mailing Address 3000 Isabella

City Sioux City State IA Zip Code 51103-2134

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

Name of Employer AFSCME IA CN 61 Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 352.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 09 / 2010

Transaction ID: SA11AI.153892

Amount of Each Receipt this Period
80.00

C.

Full Name (Last, First, Middle Initial)
DANNY J. HOMAN

Mailing Address 3000 Isabella

City Sioux City State IA Zip Code 51103-2134

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

Name of Employer AFSCME IA CN 61 Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 408.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11AI.153862

Amount of Each Receipt this Period
56.00

SUBTOTAL of Receipts This Page (optional) ► 204.30

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 47 / 178
	<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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) CHRISTINE R. HOSKINS		Date of Receipt	
	Mailing Address 8306 James Street		M M / D D / Y Y Y Y Y 03 / 31 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.153269
	Upper Marlboro	MD	20772	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		36.15	
Name of Employer AFSCME INT'L		Occupation COORDINATOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 216.90		

B.	Full Name (Last, First, Middle Initial) CARLA INSINGA-MINSER		Date of Receipt	
	Mailing Address 4287 South Carolina Drive		M M / D D / Y Y Y Y Y 03 / 12 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.153375
	Blue Ridge	PA	17112	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		93.48	
Name of Employer AFSCME PA CN 13		Occupation ORGANIZING DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.44		

C.	Full Name (Last, First, Middle Initial) WILLIAM ISLER		Date of Receipt	
	Mailing Address 7708 Quest Lane		M M / D D / Y Y Y Y Y 03 / 31 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.153271
	Bowie	MD	20720	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		39.01	
Name of Employer AFSCME INT'L		Occupation ASST DIRECTOR, GENERAL SERVICES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 233.05		

SUBTOTAL of Receipts This Page (optional)	▶	168.64
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 48 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) EDWIN S. JAYNE		Date of Receipt
	Mailing Address 3304 Alabama Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 15 / 2010
	City	State	Zip Code
	Alexandria	VA	22305
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153168
Name of Employer AFSCME INT'L		Occupation ASSOCIATE DIRECTOR, LEGISLATION	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 268.35	<input type="text"/> 53.67

B.	Full Name (Last, First, Middle Initial) EDWIN S. JAYNE		Date of Receipt
	Mailing Address 3304 Alabama Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 31 / 2010
	City	State	Zip Code
	Alexandria	VA	22305
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153272
Name of Employer AFSCME INT'L		Occupation ASSOCIATE DIRECTOR, LEGISLATION	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 322.02	<input type="text"/> 53.67

C.	Full Name (Last, First, Middle Initial) PAMELA L. JENKINS		Date of Receipt
	Mailing Address 47604 Sandbank Square		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 15 / 2010
	City	State	Zip Code
	Sterling	VA	20165
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153169
Name of Employer AFSCME INT'L		Occupation EXECUTIVE OFFICE ASSISTANT	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 205.60	<input type="text"/> 41.12

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 148.46
TOTAL This Period (last page this line number only)	<input type="text"/>

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 49 / 178
	<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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) PAMELA L. JENKINS		Date of Receipt	
	Mailing Address 47604 Sandbank Square		M M / D D / Y Y Y Y Y 03 / 31 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.153273
	Sterling	VA	20165	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		41.12	
Name of Employer AFSCME INT'L		Occupation EXECUTIVE OFFICE ASSISTANT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 246.72		

B.	Full Name (Last, First, Middle Initial) FRANK X. JEREZ		Date of Receipt	
	Mailing Address 460 Center Street Apt. #3		M M / D D / Y Y Y Y Y 03 / 31 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.153274
	Nutley	NJ	07110-0000	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		37.07	
Name of Employer AFSCME INT'L		Occupation LEAD ORGANIZER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 217.47		

C.	Full Name (Last, First, Middle Initial) GEORGE T. JOHNSON		Date of Receipt	
	Mailing Address 3853 Fairfax Square		M M / D D / Y Y Y Y Y 03 / 15 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.153171
	Fairfax	VA	22031-4200	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		43.61	
Name of Employer AFSCME INT'L		Occupation AREA FIELD SERVICES DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 218.05		

SUBTOTAL of Receipts This Page (optional)	▶	121.80
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 50 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) GEORGE T. JOHNSON		Date of Receipt
	Mailing Address 3853 Fairfax Square		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2010
	City	State	Zip Code
	Fairfax	VA	22031-4200
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153275
Name of Employer AFSCME INT'L		Occupation AREA FIELD SERVICES DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 261.66	<input type="text"/> 43.61

B.	Full Name (Last, First, Middle Initial) JUDY A. JONES		Date of Receipt
	Mailing Address 115 S Oak Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 15 / 2010
	City	State	Zip Code
	Falls Church	VA	22046
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153172
Name of Employer AFSCME INT'L		Occupation ASSOC. DIRECTOR, INFORMATION SYSTEMS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 268.35	<input type="text"/> 53.67

C.	Full Name (Last, First, Middle Initial) JUDY A. JONES		Date of Receipt
	Mailing Address 115 S Oak Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2010
	City	State	Zip Code
	Falls Church	VA	22046
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153276
Name of Employer AFSCME INT'L		Occupation ASSOC. DIRECTOR, INFORMATION SYSTEMS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 322.02	<input type="text"/> 53.67

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 150.95
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
LISA HARRIS KELLY

Mailing Address 9800 Muirfield Drive

City State Zip Code
Upper Marlboro MD 20772

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

Name of Employer Occupation
AFSCME INT'L SENIOR SPEECH WRITER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 247.45

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 15 / 2010

Transaction ID: SA11AI.153174

Amount of Each Receipt this Period
49.49

B.

Full Name (Last, First, Middle Initial)
LISA HARRIS KELLY

Mailing Address 9800 Muirfield Drive

City State Zip Code
Upper Marlboro MD 20772

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

Name of Employer Occupation
AFSCME INT'L SENIOR SPEECH WRITER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 296.94

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11AI.153278

Amount of Each Receipt this Period
49.49

C.

Full Name (Last, First, Middle Initial)
JILL KIELBLOCK

Mailing Address 581 Gotzian Street

City State Zip Code
Saint Paul MN 55106

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

Name of Employer Occupation
AFSCME MN CN 5/CN14 BUSINESS REPRESENTATIVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 211.12

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 09 / 2010

Transaction ID: SA11AI.155309

Amount of Each Receipt this Period
71.12

SUBTOTAL of Receipts This Page (optional) ► **170.10**

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 52 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) JILL KIELBLOCK		Date of Receipt MM / DD / YYYY 03 / 12 / 2010		
	Mailing Address 581 Gotzian Street		Transaction ID: SA11AI.155655		
	City Saint Paul	State MN	Zip Code 55106	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME MN CN 5/CN14	Occupation BUSINESS REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 231.12			

B.	Full Name (Last, First, Middle Initial) GREGORY J. KING		Date of Receipt MM / DD / YYYY 03 / 15 / 2010		
	Mailing Address 147 W Linvale Street		Transaction ID: SA11AI.153176		
	City Baltimore	State MD	Zip Code 21217	Amount of Each Receipt this Period 53.67	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECTOR, PUBLIC AFFAIRS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 268.35			

C.	Full Name (Last, First, Middle Initial) GREGORY J. KING		Date of Receipt MM / DD / YYYY 03 / 31 / 2010		
	Mailing Address 147 W Linvale Street		Transaction ID: SA11AI.153279		
	City Baltimore	State MD	Zip Code 21217	Amount of Each Receipt this Period 53.67	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECTOR, PUBLIC AFFAIRS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 322.02			

SUBTOTAL of Receipts This Page (optional)	▶	127.34
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 53 / 178
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
R. MICHAEL KIRKPATRICK

Mailing Address 6131 Mifflin Avenue

City State Zip Code
Harrisburg PA 17111-4259

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

Name of Employer Occupation
AFSCME PA CN 13 DIRECTOR, GRIEVANCE DEPT.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.44

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 12 / 2010

Transaction ID: SA11AI.153377

Amount of Each Receipt this Period
93.48

B. Full Name (Last, First, Middle Initial)
CHRISTINE E. KISTNER

Mailing Address 501 High Street

City State Zip Code
Colfax WI 54730

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

Name of Employer Occupation
AFSCME WI CN 40 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11AI.153985

Amount of Each Receipt this Period
60.00

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

Mailing Address 4031 Executive Park Drive

City State Zip Code
Harrisburg PA 17111-1599

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

Name of Employer Occupation
AFSCME PA CN 13 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 272.46

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 12 / 2010

Transaction ID: SA11AI.153378

Amount of Each Receipt this Period
90.82

SUBTOTAL of Receipts This Page (optional) ▶ **244.30**

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 54 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial) CAROLYN KLINGLESMTIH		Date of Receipt MM / DD / YYYY 03 / 15 / 2010
Mailing Address 2812 Windsor Forest Drive		Transaction ID: SA11AI.153177
City Louisville	State KY	Zip Code 40272
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 44.80
Name of Employer AFSCME INT'L	Occupation AREA ORGANIZING DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.00	

B.

Full Name (Last, First, Middle Initial) CAROLYN KLINGLESMTIH		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
Mailing Address 2812 Windsor Forest Drive		Transaction ID: SA11AI.153280
City Louisville	State KY	Zip Code 40272
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.03
Name of Employer AFSCME INT'L	Occupation AREA ORGANIZING DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.03	

C.

Full Name (Last, First, Middle Initial) NANCY KNEPP		Date of Receipt MM / DD / YYYY 03 / 12 / 2010
Mailing Address 22 Edgewood Drive		Transaction ID: SA11AI.153379
City Mechanicsburg	State PA	Zip Code 17055
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 68.30
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.90	

SUBTOTAL of Receipts This Page (optional)	159.13
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 55 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) MARCIA R. KNOX	Date of Receipt MM / DD / YYYY 03 / 04 / 2010
	Mailing Address 1660 Newton Avenue	Transaction ID: SA11AI.153782
	City State Zip Code Dayton OH 45406-4110	Amount of Each Receipt this Period 86.01
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME OH CN 8 STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 268.03	

B.	Full Name (Last, First, Middle Initial) MARCIA R. KNOX	Date of Receipt MM / DD / YYYY 03 / 12 / 2010
	Mailing Address 1660 Newton Avenue	Transaction ID: SA11AI.153821
	City State Zip Code Dayton OH 45406-4110	Amount of Each Receipt this Period 5.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME OH CN 8 STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.03	

C.	Full Name (Last, First, Middle Initial) STEVE KOFFROTH	Date of Receipt MM / DD / YYYY 03 / 08 / 2010
	Mailing Address 17824 Autry Ct	Transaction ID: SA11AI.153836
	City State Zip Code Chino Hills CA 91709	Amount of Each Receipt this Period 62.40
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME CA CN 36 STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 374.40	

SUBTOTAL of Receipts This Page (optional)	153.41
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 56 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) STEVEN KREISBERG		Date of Receipt
	Mailing Address 9954 Whitewater Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 15 / 2010
	City	State	Zip Code
	Burke	VA	22015
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153178
Name of Employer AFSCME INT'L		Occupation ASSOCIATE DIRECTOR, RESEARCH	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 268.35	<input type="text"/> 53.67

B.	Full Name (Last, First, Middle Initial) STEVEN KREISBERG		Date of Receipt
	Mailing Address 9954 Whitewater Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 31 / 2010
	City	State	Zip Code
	Burke	VA	22015
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153281
Name of Employer AFSCME INT'L		Occupation ASSOCIATE DIRECTOR, RESEARCH	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 322.02	<input type="text"/> 53.67

C.	Full Name (Last, First, Middle Initial) BARBARA KREMP		Date of Receipt
	Mailing Address 302 Donnelly Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 12 / 2010
	City	State	Zip Code
	Aston	PA	19014
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153380
Name of Employer AFSCME PA CN 13		Occupation STAFF REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 204.90	<input type="text"/> 68.30

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 175.64
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 57 / 178		
	<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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) THOMAS E. KULIKOSKY		Date of Receipt MM / DD / YYYY 03 / 15 / 2010		
	Mailing Address 400 Old Dominion Avenue		Transaction ID: SA11AI.153179		
	City Herndon	State VA	Zip Code 20170	Amount of Each Receipt this Period 49.49	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 242.46		
	Name of Employer AFSCME INT'L		Occupation AUDITING MANAGER		

B.	Full Name (Last, First, Middle Initial) THOMAS E. KULIKOSKY		Date of Receipt MM / DD / YYYY 03 / 31 / 2010		
	Mailing Address 400 Old Dominion Avenue		Transaction ID: SA11AI.153282		
	City Herndon	State VA	Zip Code 20170	Amount of Each Receipt this Period 49.49	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 291.95		
	Name of Employer AFSCME INT'L		Occupation AUDITING MANAGER		

C.	Full Name (Last, First, Middle Initial) ELIZABETH LARSEN		Date of Receipt MM / DD / YYYY 03 / 24 / 2010		
	Mailing Address 900 Grant Street SW		Transaction ID: SA11AI.154043		
	City Tumwater	State WA	Zip Code 98512-6335	Amount of Each Receipt this Period 82.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 246.00		
	Name of Employer AFSCME WA CN 28		Occupation STAFF REPRESENTATIVE		

SUBTOTAL of Receipts This Page (optional)	180.98
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 58 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) ERIC N. LEHTO		Date of Receipt MM / DD / YYYY 03 / 09 / 2010		
	Mailing Address 2122 West 2nd Street Apt. #2		Transaction ID: SA11AI.155311		
	City Duluth	State MN	Zip Code 55086	Amount of Each Receipt this Period 103.22	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME MN CN 5/CN14	Occupation DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 309.66			

B.	Full Name (Last, First, Middle Initial) SUSAN T. LEVITAN		Date of Receipt MM / DD / YYYY 03 / 15 / 2010		
	Mailing Address 2650 Worrell Court		Transaction ID: SA11AI.153180		
	City Crofton	State MD	Zip Code 21114	Amount of Each Receipt this Period 42.08	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, POLITICAL ACTION			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.40			

C.	Full Name (Last, First, Middle Initial) SUSAN T. LEVITAN		Date of Receipt MM / DD / YYYY 03 / 31 / 2010		
	Mailing Address 2650 Worrell Court		Transaction ID: SA11AI.153283		
	City Crofton	State MD	Zip Code 21114	Amount of Each Receipt this Period 42.08	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, POLITICAL ACTION			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 252.48			

SUBTOTAL of Receipts This Page (optional)	187.38
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 59 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) DEBRA I. LEY	Date of Receipt MM / DD / YYYY 03 / 12 / 2010
	Mailing Address 4692 Wyngate Way	Transaction ID: SA11AI.155687
	City State Zip Code Forest Lake MN 55025	Amount of Each Receipt this Period 240.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME MN CN 5 STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	

B.	Full Name (Last, First, Middle Initial) DEBRA I. LEY	Date of Receipt MM / DD / YYYY 03 / 12 / 2010
	Mailing Address 4692 Wyngate Way	Transaction ID: SA11AI.155688
	City State Zip Code Forest Lake MN 55025	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME MN CN 5 STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 272.00	

C.	Full Name (Last, First, Middle Initial) MICHAEL LINDHOLT	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 2752 Randolph Street NE	Transaction ID: SA11AI.155359
	City State Zip Code Minneapolis MN 55418-2622	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME MN CN 5/STATE OF MN STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional)	▶	380.00
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 60 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
COREY LOCKARD

Mailing Address **P.O. Box 22**

City **Benton** State **PA** Zip Code **17814**

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

Name of Employer **AFSCME PA CN 13** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **204.90**

Date of Receipt **03 / 12 / 2010**

Transaction ID: SA11AI.153384

Amount of Each Receipt this Period **68.30**

B.

Full Name (Last, First, Middle Initial)
LISABETH LONG

Mailing Address **P.O. Box 82**

City **Falls Creek** State **PA** Zip Code **15840-0082**

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

Name of Employer **AFSCME PA CN 13** Occupation **EDUCATION DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.44**

Date of Receipt **03 / 12 / 2010**

Transaction ID: SA11AI.153385

Amount of Each Receipt this Period **93.48**

C.

Full Name (Last, First, Middle Initial)
SALVATORE LUCIANO

Mailing Address **947 Bunker Hill Road**

City **Watertown** State **CT** Zip Code **06795-3231**

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

Name of Employer **AFSCME CT CN 4** Occupation **EXECUTIVE DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **292.00**

Date of Receipt **03 / 31 / 2010**

Transaction ID: SA11AI.153863

Amount of Each Receipt this Period **14.00**

SUBTOTAL of Receipts This Page (optional) ► **175.78**

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 61 / 178
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial) WILLIAM LUCY		Date of Receipt MM / DD / YYYY 03 / 15 / 2010	
Mailing Address 1831 Sudbury Lane NW		Transaction ID: SA11AI.153181	
City Washington	State DC	Zip Code 20012-2202	Amount of Each Receipt this Period 133.06
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation SECRETARY TREASURER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 665.30		

B.

Full Name (Last, First, Middle Initial) WILLIAM LUCY		Date of Receipt MM / DD / YYYY 03 / 31 / 2010	
Mailing Address 1831 Sudbury Lane NW		Transaction ID: SA11AI.153284	
City Washington	State DC	Zip Code 20012-2202	Amount of Each Receipt this Period 133.06
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation SECRETARY TREASURER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 798.36		

C.

Full Name (Last, First, Middle Initial) JOHN A. LYALL		Date of Receipt MM / DD / YYYY 03 / 04 / 2010	
Mailing Address 383 Ashmoore Circle East		Transaction ID: SA11AI.153785	
City Powell	State OH	Zip Code 43065	Amount of Each Receipt this Period 125.66
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH CN 8	Occupation PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 404.98		

SUBTOTAL of Receipts This Page (optional)	▶	391.78
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 62 / 178
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) JOHN A. LYALL	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 383 Ashmoore Circle East	Transaction ID: SA11AI.153864
	City State Zip Code Powell OH 43065	Amount of Each Receipt this Period 14.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME OH CN 8 PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 418.98	

B.	Full Name (Last, First, Middle Initial) ROBERTA LYNCH	Date of Receipt MM / DD / YYYY 03 / 01 / 2010
	Mailing Address 4650 N. Hermitage Street	Transaction ID: SA11AI.155951
	City State Zip Code Chicago IL 60640	Amount of Each Receipt this Period 102.52
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME IL CN 31 DEPUTY DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 233.04	

C.	Full Name (Last, First, Middle Initial) ROBERTA LYNCH	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 4650 N. Hermitage Street	Transaction ID: SA11AI.153865
	City State Zip Code Chicago IL 60640	Amount of Each Receipt this Period 14.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME IL CN 31 DEPUTY DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.04	

SUBTOTAL of Receipts This Page (optional)	▶	130.52
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 63 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) KATHRYN S. MALONE	Date of Receipt MM / DD / YYYY 03 / 17 / 2010
	Mailing Address 5185 Horseshoe Falls Drive	Transaction ID: SA11AI.153623
	City State Zip Code Dublin OH 43016	Amount of Each Receipt this Period 38.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME OH LOC 4 DIRECTOR, POLITICAL ACTION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.00	

B.	Full Name (Last, First, Middle Initial) LARRY MALONE	Date of Receipt MM / DD / YYYY 03 / 17 / 2010
	Mailing Address 5185 Horseshoe Falls Drive	Transaction ID: SA11AI.153624
	City State Zip Code Dublin OH 43016	Amount of Each Receipt this Period 38.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.00	

C.	Full Name (Last, First, Middle Initial) MICHAEL MANN	Date of Receipt MM / DD / YYYY 03 / 15 / 2010
	Mailing Address 15103 Hunter Mountain Lane	Transaction ID: SA11AI.153182
	City State Zip Code Silver Spring MD 20906	Amount of Each Receipt this Period 53.67
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME INT'L ASSISTANT DIRECTOR, AUDITING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 268.35	

SUBTOTAL of Receipts This Page (optional)	130.67
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 64 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial) MICHAEL MANN		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
Mailing Address 15103 Hunter Mountain Lane		Transaction ID: SA11AI.153285
City Silver Spring	State MD	Zip Code 20906
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 53.67
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, AUDITING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 322.02	

B.

Full Name (Last, First, Middle Initial) TED MANNA		Date of Receipt MM / DD / YYYY 03 / 12 / 2010
Mailing Address 510 45th Street		Transaction ID: SA11AI.153387
City Altoona	State PA	Zip Code 16601-9788
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 81.66
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.30	

C.

Full Name (Last, First, Middle Initial) LARA L. MANZIONE		Date of Receipt MM / DD / YYYY 03 / 15 / 2010
Mailing Address 1201 East West Hwy. Unit #432		Transaction ID: SA11AI.153183
City Silver Spring	State MD	Zip Code 20910
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 48.17
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, PUBLIC AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.12	

SUBTOTAL of Receipts This Page (optional)	▶	183.50
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 65 / 178
	<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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) LARA L. MANZIONE	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 1201 East West Hwy. Unit #432	Transaction ID: SA11AI.153286
	City State Zip Code Silver Spring MD 20910	Amount of Each Receipt this Period 48.17
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME INT'L ASSISTANT DIRECTOR, PUBLIC AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 284.29	

B.	Full Name (Last, First, Middle Initial) STEPHEN MARINCEL	Date of Receipt MM / DD / YYYY 03 / 09 / 2010
	Mailing Address 247 Kennard Street	Transaction ID: SA11AI.155313
	City State Zip Code Saint Paul MN 55106	Amount of Each Receipt this Period 71.12
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME MN CN 5/CN14 BUSINESS REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.12	

C.	Full Name (Last, First, Middle Initial) ALIXETTA M. MARLOW	Date of Receipt MM / DD / YYYY 03 / 17 / 2010
	Mailing Address 3937 Blueberry Hollow Road	Transaction ID: SA11AI.153625
	City State Zip Code Gahanna OH 43230	Amount of Each Receipt this Period 38.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME OH LOC 4 ADMINISTRATIVE ASSISTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.00	

SUBTOTAL of Receipts This Page (optional)	▶	157.79
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 66 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) GARY MARTIN		Date of Receipt
	Mailing Address 255 Trail East		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 17 / 2010
	City	State	Zip Code
	Pataskala	OH	43062
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.153626
		Amount of Each Receipt this Period	
		<input type="text"/> 40.00	
Name of Employer AFSCME OH LOC 4		Occupation ASSOCIATE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 240.00	

B.	Full Name (Last, First, Middle Initial) KIMBERLY A. MASSENGILL-BERNARDIN		Date of Receipt
	Mailing Address 8000 Brookpoint Place		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 04 / 2010
	City	State	Zip Code
	Westerville	OH	43081
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.153787
		Amount of Each Receipt this Period	
		<input type="text"/> 69.48	
Name of Employer AFSCME OH CN 8		Occupation ASSOCIATE COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 208.44	

C.	Full Name (Last, First, Middle Initial) CLYDE F. MAUK		Date of Receipt
	Mailing Address 5580 Spoonbill Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 17 / 2010
	City	State	Zip Code
	Huber Heights	OH	45424
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.153627
		Amount of Each Receipt this Period	
		<input type="text"/> 40.00	
Name of Employer AFSCME OH LOC 4		Occupation REGIONAL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 240.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 149.48
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 67 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) BOYD B. MCCAMISH		Date of Receipt
	Mailing Address 1004 Woodtown Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 15 / 2010
	City	State	Zip Code
	Gahanna	OH	43230
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153184
Name of Employer AFSCME INT'L		Occupation AREA ORGANIZING DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 210.40	<input type="text"/> 42.08

B.	Full Name (Last, First, Middle Initial) BOYD B. MCCAMISH		Date of Receipt
	Mailing Address 1004 Woodtown Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 31 / 2010
	City	State	Zip Code
	Gahanna	OH	43230
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153287
Name of Employer AFSCME INT'L		Occupation AREA ORGANIZING DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 252.48	<input type="text"/> 42.08

C.	Full Name (Last, First, Middle Initial) GARY MCCAULLEY		Date of Receipt
	Mailing Address 84 Mic Nan Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 12 / 2010
	City	State	Zip Code
	Londonberry	PA	17057
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153388
Name of Employer AFSCME PA CN 13		Occupation ASSISTANT DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 280.44	<input type="text"/> 93.48

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 177.64
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 68 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) JENNIFER A. MCCULLEY		Date of Receipt
	Mailing Address 509 Ashton Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2010
	City	State	Zip Code
	Fitchburg	WI	53593
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.153989
Name of Employer AFSCME WI CN 40		Occupation STAFF REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	<input type="text"/> 55.00

B.	Full Name (Last, First, Middle Initial) PETER M. MCLINDEN		Date of Receipt
	Mailing Address 935 Pamela Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 04 / 2010
	City	State	Zip Code
	Cincinnati	OH	45255
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.153790
Name of Employer AFSCME OH CN 8		Occupation ASSOCIATE COUNSEL	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 246.89	<input type="text"/> 84.76

C.	Full Name (Last, First, Middle Initial) ORAN MCMICHAEL		Date of Receipt
	Mailing Address 2777 Northtowne Lane Apt. #2088S		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 15 / 2010
	City	State	Zip Code
	Reno	NV	89512
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.153186
Name of Employer AFSCME INT'L		Occupation AREA FIELD SERVICES DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 218.05	<input type="text"/> 43.61

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 183.37
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 178
(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			

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
ORAN MCMICHAEL

Mailing Address 2777 Northtowne Lane
Apt. #2088S

City State Zip Code
Reno NV 89512

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

Name of Employer Occupation
AFSCME INT'L AREA FIELD SERVICES DIRECTOR

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 261.66

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11AI.153289

Amount of Each Receipt this Period
43.61

B.

Full Name (Last, First, Middle Initial)
EDWARD MCNEIL

Mailing Address 2546 Edison

City State Zip Code
Detroit MI 48206

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

Name of Employer Occupation
AFSCME MI CN 25 STAFF REPRESENTATIVE

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 209.55

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 03 / 2010

Transaction ID: SA11AI.153680

Amount of Each Receipt this Period
41.91

C.

Full Name (Last, First, Middle Initial)
EDWARD MCNEIL

Mailing Address 2546 Edison

City State Zip Code
Detroit MI 48206

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

Name of Employer Occupation
AFSCME MI CN 25 STAFF REPRESENTATIVE

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.46

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 16 / 2010

Transaction ID: SA11AI.153729

Amount of Each Receipt this Period
41.91

SUBTOTAL of Receipts This Page (optional) ▶ **127.43**

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 70 / 178
	<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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) JONATHAN D. MELEGRITO		Date of Receipt
	Mailing Address 1625 L. Street NW		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 31 / 2010
	City	State	Zip Code
	Washington	DC	20036
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153290
Name of Employer AFSCME INT'L		Occupation PUBLICATIONS ASSOCIATE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 217.92	<input type="text"/> 36.32

B.	Full Name (Last, First, Middle Initial) LAURIE MERTA		Date of Receipt
	Mailing Address 9829 59th Street, Court W		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 24 / 2010
	City	State	Zip Code
	Tacoma	WA	98467-1007
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.154046
Name of Employer AFSCME WA CN 28		Occupation CONVENTION FUNDRAISER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.00	<input type="text"/> 130.00

C.	Full Name (Last, First, Middle Initial) GLEN MIDDLETON		Date of Receipt
	Mailing Address 5108 Yellowwood Ave		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 08 / 2010
	City	State	Zip Code
	Baltimore	MD	21209-4611
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153904
Name of Employer AFSCME MD CN 67		Occupation EXECUTIVE DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 568.00	<input type="text"/> 180.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 346.32
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 178
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
GLEN MIDDLETON

Mailing Address 5108 Yellowwood Ave

City State Zip Code
Baltimore MD 21209-4611

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

Name of Employer Occupation
AFSCME MD CN 67 EXECUTIVE DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 582.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11AI.153866

Amount of Each Receipt this Period
14.00

B.

Full Name (Last, First, Middle Initial)
TIMOTHY MILLER

Mailing Address 2724 Pine Avenue

City State Zip Code
Altoona PA 16601

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

Name of Employer Occupation
AFSCME PA CN 13 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 204.90

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 12 / 2010

Transaction ID: SA11AI.153392

Amount of Each Receipt this Period
68.30

C.

Full Name (Last, First, Middle Initial)
HAROLD F. MITCHELL

Mailing Address 3999 Kensingwood Drive

City State Zip Code
Columbus OH 43230

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

Name of Employer Occupation
AFSCME OH CN 8 ASSISTANT ORGANIZING DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 335.22

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 04 / 2010

Transaction ID: SA11AI.153793

Amount of Each Receipt this Period
111.74

SUBTOTAL of Receipts This Page (optional) ► **194.04**

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 72 / 178
	<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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) HARRY MOBLEY		Date of Receipt MM / DD / YYYY 03 / 12 / 2010		
	Mailing Address 2635 Cranberry Circle		Transaction ID: SA11AI.153393		
	City Harrisburg	State PA	Zip Code 17110	Amount of Each Receipt this Period 68.30	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 204.90			

B.	Full Name (Last, First, Middle Initial) KAREN MOMBERGER		Date of Receipt MM / DD / YYYY 03 / 12 / 2010		
	Mailing Address 102 Manor Road		Transaction ID: SA11AI.153394		
	City New Kensington	State PA	Zip Code 15068	Amount of Each Receipt this Period 81.66	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 244.98			

C.	Full Name (Last, First, Middle Initial) RICHARD MORAWSKI		Date of Receipt MM / DD / YYYY 03 / 17 / 2010		
	Mailing Address 1606 Walnut Street 2nd Floor		Transaction ID: SA11AI.154061		
	City Philadelphia	State PA	Zip Code 19103	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME PA CN 47	Occupation STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

SUBTOTAL of Receipts This Page (optional)	▶	189.96
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 73 / 178
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
 JEANNE MORRIS
 Mailing Address 2315 Reddings Run Road
 City State Zip Code
 Home PA 15747
 Date of Receipt: 03 / 12 / 2010
Transaction ID: SA11AI.153396
 Amount of Each Receipt this Period: 72.96
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: AFSCME PA CN 13 Occupation: STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 218.88

B. Full Name (Last, First, Middle Initial)
 MICHELLE MULHERIN
 Mailing Address 2462 Cleveland Avenue
 City State Zip Code
 Reading PA 19609
 Date of Receipt: 03 / 12 / 2010
Transaction ID: SA11AI.153398
 Amount of Each Receipt this Period: 68.30
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: AFSCME PA CN 13 Occupation: STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 204.90

C. Full Name (Last, First, Middle Initial)
 STEVEN C. MULLEN
 Mailing Address 544 Clermont Drive
 City State Zip Code
 Harrisburg PA 17112
 Date of Receipt: 03 / 12 / 2010
Transaction ID: SA11AI.153399
 Amount of Each Receipt this Period: 74.84
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: AFSCME PA CN 13 Occupation: TRADES LABORER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 224.52

SUBTOTAL of Receipts This Page (optional) **216.10**
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 74 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
STEVEN L. MYERS

Mailing Address **696 Hull Road**

City **Mansfield** State **OH** Zip Code **44907**

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

Name of Employer **AFSCME OH LOC 4** Occupation **REGIONAL DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **03 / 17 / 2010**
Transaction ID: SA11AI.153635
 Amount of Each Receipt this Period **40.00**

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

Mailing Address **17635 Greenview**

City **Detroit** State **MI** Zip Code **48219-3588**

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

Name of Employer **AFSCME MI CN 25** Occupation **ADMINISTRATIVE DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **229.45**

Date of Receipt **03 / 16 / 2010**
Transaction ID: SA11AI.153731
 Amount of Each Receipt this Period **38.25**

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

Mailing Address **2648 Garfield Street, N.E.**

City **Minneapolis** State **MN** Zip Code **55418**

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

Name of Employer **AFSCME MN CN 5/CN14** Occupation **BUSINESS REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **211.18**

Date of Receipt **03 / 09 / 2010**
Transaction ID: SA11AI.155316
 Amount of Each Receipt this Period **71.14**

SUBTOTAL of Receipts This Page (optional) ► **149.39**

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 75 / 178
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

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

Mailing Address 2648 Garfield Street, N.E.

City State Zip Code
Minneapolis MN 55418

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

Name of Employer Occupation
AFSCME MN CN 5/CN14 BUSINESS REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 231.18

Date of Receipt
MM / DD / YYYY
03 / 12 / 2010

Transaction ID: SA11AI.155748

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
JESSE NEWCOMER, IV

Mailing Address 2109 Circle Road

City State Zip Code
Carlisle PA 17013

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

Name of Employer Occupation
AFSCME PA CN 13 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 219.24

Date of Receipt
MM / DD / YYYY
03 / 12 / 2010

Transaction ID: SA11AI.153400

Amount of Each Receipt this Period
73.08

C. Full Name (Last, First, Middle Initial)
JAMES B. NILAND

Mailing Address 2728 Pleasant Ave

City State Zip Code
Minneapolis MN 55408

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

Name of Employer Occupation
AFSCME MN CN 5/CN14 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2010

Transaction ID: SA11AI.155318

Amount of Each Receipt this Period
160.00

SUBTOTAL of Receipts This Page (optional) ► **253.08**

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 76 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) TRAVIS OHM		Date of Receipt	
	Mailing Address 8 Highland Road		M M / D D / Y Y Y Y Y 03 / 12 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.153401
	Seven Valleys	PA	17360	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		78.54	
Name of Employer AFSCME PA CN 13		Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 235.62		

B.	Full Name (Last, First, Middle Initial) RUSSELL K. OKATA		Date of Receipt	
	Mailing Address 1015 Wilder Avenue #203		M M / D D / Y Y Y Y Y 03 / 04 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.153512
	Honolulu	HI	96822-2655	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		100.00	
Name of Employer AFSCME HI LOC 152		Occupation EXECUTIVE DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

C.	Full Name (Last, First, Middle Initial) CURT A. OSTRANDER		Date of Receipt	
	Mailing Address 25 J. Braden Thompson Road		M M / D D / Y Y Y Y Y 03 / 15 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.153191
	Forestdale	MA	02644-0000	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		45.93	
Name of Employer AFSCME INT'L		Occupation INT'L UNION BARGAINING REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 229.65		

SUBTOTAL of Receipts This Page (optional)	▶	224.47
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 77 / 178
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial) CURT A. OSTRANDER		Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2010
Mailing Address 25 J. Braden Thompson Road		Transaction ID: SA11AI.153294
City Forestdale	State MA	Zip Code 02644-0000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.93
Name of Employer AFSCME INT'L	Occupation INT'L UNION BARGAINING REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.58	

B.

Full Name (Last, First, Middle Initial) GERALD OTTEN		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2010
Mailing Address 2905 Evergreen Way		Transaction ID: SA11AI.153192
City Ellicott City	State MD	Zip Code 21042
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.08
Name of Employer AFSCME INT'L	Occupation BENEFITS MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.40	

C.

Full Name (Last, First, Middle Initial) GERALD OTTEN		Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2010
Mailing Address 2905 Evergreen Way		Transaction ID: SA11AI.153295
City Ellicott City	State MD	Zip Code 21042
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.08
Name of Employer AFSCME INT'L	Occupation BENEFITS MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.48	

SUBTOTAL of Receipts This Page (optional)	▶	126.09
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 78 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) HAROLD A. PALMER		Date of Receipt MM / DD / YYYY 03 / 17 / 2010		
	Mailing Address 7565 Liddesdale Blvd.		Transaction ID: SA11AI.153637		
	City Blacklick	State OH	Zip Code 43004	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME OH LOC 4	Occupation REGIONAL DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

B.	Full Name (Last, First, Middle Initial) CHERYL PARISI		Date of Receipt MM / DD / YYYY 03 / 08 / 2010		
	Mailing Address 1932 Walcott Way		Transaction ID: SA11AI.153837		
	City Los Angeles	State CA	Zip Code 90039	Amount of Each Receipt this Period 70.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME CA CN 36	Occupation BUSINESS REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 420.00			

C.	Full Name (Last, First, Middle Initial) BARRY PEARCE		Date of Receipt MM / DD / YYYY 03 / 12 / 2010		
	Mailing Address 130 N. Wilson Street		Transaction ID: SA11AI.153403		
	City Bellefonte	State PA	Zip Code 16823	Amount of Each Receipt this Period 68.30	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 204.90			

SUBTOTAL of Receipts This Page (optional)	178.30
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 79 / 178
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
 JOANNE M. PELS

Mailing Address 6987 County 38 NW

City Walker State MN Zip Code 56484

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

Name of Employer AFSCME MN CN 5/CN14 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.22

Date of Receipt: 03 / 09 / 2010
Transaction ID: SA11AI.155319
 Amount of Each Receipt this Period: 81.74

B.

Full Name (Last, First, Middle Initial)
 JOANNE M. PELS

Mailing Address 6987 County 38 NW

City Walker State MN Zip Code 56484

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

Name of Employer AFSCME MN CN 5/CN14 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 279.22

Date of Receipt: 03 / 12 / 2010
Transaction ID: SA11AI.155780
 Amount of Each Receipt this Period: 34.00

C.

Full Name (Last, First, Middle Initial)
 JOANNE M. PELS

Mailing Address 6987 County 38 NW

City Walker State MN Zip Code 56484

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

Name of Employer AFSCME MN CN 5/CN14 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 299.22

Date of Receipt: 03 / 12 / 2010
Transaction ID: SA11AI.155781
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ► **135.74**

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 80 / 178
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
PAMELA PERILLO

Mailing Address 9270 Billingsley Road

City State Zip Code
White Plains MD 20695

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

Name of Employer Occupation
AFSCME INT'L ADMINISTRATIVE ASSISTANT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 200.52

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11AI.153296

Amount of Each Receipt this Period
33.42

B.

Full Name (Last, First, Middle Initial)
RANDOLPH P. PERREIRA

Mailing Address 1044 Mokuhano Street

City State Zip Code
Honolulu HI 96825

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

Name of Employer Occupation
AFSCME HI LOC 152 EXECUTIVE DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 328.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 04 / 2010

Transaction ID: SA11AI.153516

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
RANDOLPH P. PERREIRA

Mailing Address 1044 Mokuhano Street

City State Zip Code
Honolulu HI 96825

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

Name of Employer Occupation
AFSCME HI LOC 152 EXECUTIVE DIRECTOR

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 342.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11AI.153872

Amount of Each Receipt this Period
14.00

SUBTOTAL of Receipts This Page (optional) ► **147.42**

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 81 / 178
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

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

Mailing Address 958 N. Harrison Street

City State Zip Code
Arlington VA 22205

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

Name of Employer Occupation
AFSCME INT'L ASSISTANT TO JUD. PANEL CHAIRPERSON

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.40

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 15 / 2010

Transaction ID: SA11AI.153194

Amount of Each Receipt this Period
40.08

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

Mailing Address 958 N. Harrison Street

City State Zip Code
Arlington VA 22205

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

Name of Employer Occupation
AFSCME INT'L ASSISTANT TO JUD. PANEL CHAIRPERSON

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.48

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11AI.153297

Amount of Each Receipt this Period
40.08

C. Full Name (Last, First, Middle Initial)
JANE ANN PETERSON

Mailing Address 2179 Shoreham Road

City State Zip Code
Upper Arlington OH 43220

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

Name of Employer Occupation
AFSCME OH LOC 4 ADMINISTRATIVE ASSISTANT

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 17 / 2010

Transaction ID: SA11AI.153638

Amount of Each Receipt this Period
38.50

SUBTOTAL of Receipts This Page (optional) ► **118.66**

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 82 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
LESLIE H. PETERSON

Mailing Address 2179 Shoreham Road

City Columbus State OH Zip Code 43220

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

Name of Employer AFSCME OH CN 8 Occupation ACCOUNTING SUPERVISOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 212.52

Date of Receipt 03 / 04 / 2010

Transaction ID: SA11AI.153796

Amount of Each Receipt this Period 70.84

B.

Full Name (Last, First, Middle Initial)
NICOLE R. POLLARD

Mailing Address 9404 Nicklaus Lane

City Laurel State MD Zip Code 20708

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

Name of Employer AFSCME INT'L Occupation ASSOCIATE GENERAL COUNSEL I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 271.55

Date of Receipt 03 / 15 / 2010

Transaction ID: SA11AI.153197

Amount of Each Receipt this Period 54.31

C.

Full Name (Last, First, Middle Initial)
NICOLE R. POLLARD

Mailing Address 9404 Nicklaus Lane

City Laurel State MD Zip Code 20708

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

Name of Employer AFSCME INT'L Occupation ASSOCIATE GENERAL COUNSEL I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.86

Date of Receipt 03 / 31 / 2010

Transaction ID: SA11AI.153300

Amount of Each Receipt this Period 54.31

SUBTOTAL of Receipts This Page (optional) ► 179.46

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 83 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

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

Mailing Address 11505 Circle Drive

City State Zip Code
Austin TX 78748

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

Name of Employer Occupation
AFSCME TX LOC 1624 VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2010

Transaction ID: SA11AI.153839

Amount of Each Receipt this Period
40.00

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

Mailing Address 11505 Circle Drive

City State Zip Code
Austin TX 78748

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

Name of Employer Occupation
AFSCME TX LOC 1624 VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
MM / DD / YYYY
03 / 29 / 2010

Transaction ID: SA11AI.153840

Amount of Each Receipt this Period
20.00

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

Mailing Address 11505 Circle Drive

City State Zip Code
Austin TX 78748

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

Name of Employer Occupation
AFSCME TX LOC 1624 VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2010

Transaction ID: SA11AI.153874

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **160.00**

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 84 / 178
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

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

Mailing Address 2410 Westbrook Drive

City Toledo State OH Zip Code 43613-3921

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

Name of Employer AFSCME OH CN 8 Occupation LEAD STAFF ORGANIZER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 254.28

Date of Receipt: 03 / 04 / 2010
Transaction ID: SA11AI.153798
 Amount of Each Receipt this Period: 84.76

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

Mailing Address P.O. Box 204

City Colerain State MN Zip Code 55722

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

Name of Employer AFSCME MN CN 65 Occupation EXECUTIVE DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.92

Date of Receipt: 03 / 12 / 2010
Transaction ID: SA11AI.153935
 Amount of Each Receipt this Period: 90.46

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

Mailing Address 8003 Alcoa Drive

City Fort Washington State MD Zip Code 20744

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

Name of Employer AFSCME INT'L Occupation ADMINISTRATIVE ASSISTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.52

Date of Receipt: 03 / 31 / 2010
Transaction ID: SA11AI.153302
 Amount of Each Receipt this Period: 33.42

SUBTOTAL of Receipts This Page (optional) ► 208.64

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 85 / 178
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
LLOYD L. RAINS
 Mailing Address **15829 Narraganset Oval**
 City **Middleburg Hts** State **OH** Zip Code **44130**
 Date of Receipt **03 / 17 / 2010**
Transaction ID: SA11AI.153639
 Amount of Each Receipt this Period **40.00**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **AFSCME OH LOC 4** Occupation **REGIONAL DIRECTOR**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **240.00**

B. Full Name (Last, First, Middle Initial)
PAMELA L. RAY
 Mailing Address **1625 L. Street NW**
 City **Washington** State **DC** Zip Code **20036**
 Date of Receipt **03 / 15 / 2010**
Transaction ID: SA11AI.153200
 Amount of Each Receipt this Period **42.44**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **AFSCME INT'L** Occupation **INT'L UNION REPRESENTATIVE**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **212.20**

C. Full Name (Last, First, Middle Initial)
PAMELA L. RAY
 Mailing Address **1625 L. Street NW**
 City **Washington** State **DC** Zip Code **20036**
 Date of Receipt **03 / 31 / 2010**
Transaction ID: SA11AI.153303
 Amount of Each Receipt this Period **42.44**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **AFSCME INT'L** Occupation **INT'L UNION REPRESENTATIVE**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **254.64**

SUBTOTAL of Receipts This Page (optional) ► **124.88**
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 86 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
ZOLLIE RAYNER

Mailing Address **P.O. Box 51**

City **Albion** State **PA** Zip Code **16401**

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

Name of Employer **AFSCME PA CN 13** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **204.90**

Date of Receipt **03 / 12 / 2010**

Transaction ID: SA11AI.153406

Amount of Each Receipt this Period **68.30**

B.

Full Name (Last, First, Middle Initial)
TERRY M. REED

Mailing Address **2737 Yellowoak Place**

City **Hilliard** State **OH** Zip Code **43026**

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

Name of Employer **AFSCME OH CN 8** Occupation **AREA FIELD SERVICES DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **286.86**

Date of Receipt **03 / 04 / 2010**

Transaction ID: SA11AI.153799

Amount of Each Receipt this Period **95.62**

C.

Full Name (Last, First, Middle Initial)
DEAN REYNOLDS, III

Mailing Address **1025 Delaware Avenue**

City **Crawford** State **PA** Zip Code **17740**

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

Name of Employer **AFSCME PA CN 13** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **204.90**

Date of Receipt **03 / 12 / 2010**

Transaction ID: SA11AI.153407

Amount of Each Receipt this Period **68.30**

SUBTOTAL of Receipts This Page (optional) ► **232.22**

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 87 / 178
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
 SHAWN E. RICHARDSON
 Mailing Address 6688 Markwood Street
 City State Zip Code
 Worthington OH 43085
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2010
Transaction ID: SA11AI.155191
 Amount of Each Receipt this Period
 40.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OHIO TRANSPORTATION TECHN
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

B. Full Name (Last, First, Middle Initial)
 MICHELLE RIDER
 Mailing Address 4031 Executive Park Drive
 City State Zip Code
 Harrisburg PA 17111
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 12 / 2010
Transaction ID: SA11AI.153409
 Amount of Each Receipt this Period
 83.46
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME PA CN 13 STAFF REPRESENTATIVE
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.38

C. Full Name (Last, First, Middle Initial)
 THOMAS J. RITCHIE, Sr.
 Mailing Address 1644 Spaulding Road
 City State Zip Code
 Dayton OH 45432
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 04 / 2010
Transaction ID: SA11AI.153801
 Amount of Each Receipt this Period
 96.87
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH CN 8 REGIONAL DIRECTOR
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 290.61

SUBTOTAL of Receipts This Page (optional) ► **220.33**
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 88 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
GLADYS RIVERA

Mailing Address **P.O. Box 1414**

City **Lancaster** State **PA** Zip Code **17608-1414**

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

Name of Employer **AFSCME PA CN 13/STATE OF PA** Occupation **INSPECTION SAFETY PROFESSOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **03 / 31 / 2010**

Transaction ID: SA11AI.153454

Amount of Each Receipt this Period **100.00**

B.

Full Name (Last, First, Middle Initial)
YVONNE T. ROBINSON

Mailing Address **501 Pulliam Street NW**

City **Atlanta** State **GA** Zip Code **30312**

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

Name of Employer **AFSCME INT'L** Occupation **AREA FIELD SERVICES DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **222.48**

Date of Receipt **03 / 31 / 2010**

Transaction ID: SA11AI.153304

Amount of Each Receipt this Period **37.08**

C.

Full Name (Last, First, Middle Initial)
LYNN ANN RODENHUIS

Mailing Address **9135 Cowenton Avenue**

City **Perry Hall** State **MD** Zip Code **21128**

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

Name of Employer **AFSCME INT'L** Occupation **AREA ORGANIZING DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **234.40**

Date of Receipt **03 / 15 / 2010**

Transaction ID: SA11AI.153202

Amount of Each Receipt this Period **46.88**

SUBTOTAL of Receipts This Page (optional) ► **183.96**

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 89 / 178
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
LYNN ANN RODENHUIS

Mailing Address 9135 Cowenton Avenue

City State Zip Code
Perry Hall MD 21128

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

Name of Employer Occupation
AFSCME INT'L AREA ORGANIZING DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 281.28

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11AI.153305

Amount of Each Receipt this Period
46.88

B.

Full Name (Last, First, Middle Initial)
LAWRENCE ROEHRIG

Mailing Address 13084 Lia Court

City State Zip Code
Lindon MI 48451

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

Name of Employer Occupation
AFSCME MI CN 25 EXECUTIVE DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 686.15

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 03 / 2010

Transaction ID: SA11AI.153687

Amount of Each Receipt this Period
109.23

C.

Full Name (Last, First, Middle Initial)
LAWRENCE ROEHRIG

Mailing Address 13084 Lia Court

City State Zip Code
Lindon MI 48451

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

Name of Employer Occupation
AFSCME MI CN 25 EXECUTIVE DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 795.38

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 16 / 2010

Transaction ID: SA11AI.153736

Amount of Each Receipt this Period
109.23

SUBTOTAL of Receipts This Page (optional) ► **265.34**

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 90 / 178

(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
LAWRENCE ROEHRIG

Mailing Address **13084 Lia Court**

City **Lindon** State **MI** Zip Code **48451**

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

Name of Employer **AFSCME MI CN 25** Occupation **EXECUTIVE DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **865.38**

Date of Receipt **03 / 31 / 2010**

Transaction ID: SA11AI.153877

Amount of Each Receipt this Period **70.00**

B.

Full Name (Last, First, Middle Initial)
CHARLES ROGINSKI

Mailing Address **6124 Crystal Valley Drive**

City **Galena** State **OH** Zip Code **43021**

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

Name of Employer **AFSCME OH LOC 4** Occupation **REGIONAL DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **03 / 17 / 2010**

Transaction ID: SA11AI.153640

Amount of Each Receipt this Period **40.00**

C.

Full Name (Last, First, Middle Initial)
JOSEPH K. ROWE

Mailing Address **34 Lakeside Drive**

City **Honesdale** State **PA** Zip Code **18431**

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

Name of Employer **AFSCME PA CN 13** Occupation **STAFF REPRESENTATIVE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.44**

Date of Receipt **03 / 12 / 2010**

Transaction ID: SA11AI.153410

Amount of Each Receipt this Period **93.48**

SUBTOTAL of Receipts This Page (optional) ► **203.48**

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 91 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) JOSEPH P. RUGOLA	Date of Receipt MM / DD / YYYY 03 / 08 / 2010
	Mailing Address 4771 Powderhorn Lane	Transaction ID: SA11AI.153582
	City State Zip Code Westerville OH 43081	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME OH LOC 4 EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 528.00	

B.	Full Name (Last, First, Middle Initial) JOSEPH P. RUGOLA	Date of Receipt MM / DD / YYYY 03 / 17 / 2010
	Mailing Address 4771 Powderhorn Lane	Transaction ID: SA11AI.153641
	City State Zip Code Westerville OH 43081	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME OH LOC 4 EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 628.00	

C.	Full Name (Last, First, Middle Initial) JOSEPH P. RUGOLA	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 4771 Powderhorn Lane	Transaction ID: SA11AI.153878
	City State Zip Code Westerville OH 43081	Amount of Each Receipt this Period 14.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME OH LOC 4 EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 642.00	

SUBTOTAL of Receipts This Page (optional)	214.00
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 92 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial) GEORGE SACHARIAN		Date of Receipt MM / DD / YYYY 03 / 12 / 2010
Mailing Address 126 S. Lynn Blvd.		Transaction ID: SA11AI.153411
City Upper Darby	State PA	Zip Code 19082
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 68.30
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.90	

B.

Full Name (Last, First, Middle Initial) WILLIAM SAMS		Date of Receipt MM / DD / YYYY 03 / 04 / 2010
Mailing Address 17 South Plains Road		Transaction ID: SA11AI.153803
City The Plains	State OH	Zip Code 45780
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 84.76
Name of Employer AFSCME OH CN 8	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.28	

C.

Full Name (Last, First, Middle Initial) MARIANNE SAUNDERS		Date of Receipt MM / DD / YYYY 03 / 12 / 2010
Mailing Address 48 Mullen Street		Transaction ID: SA11AI.153412
City Uniontown	State PA	Zip Code 15401-4060
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 68.30
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.90	

SUBTOTAL of Receipts This Page (optional)	221.36
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 93 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial) ALBERT SCHNAUFER		Date of Receipt MM / DD / YYYY 03 / 08 / 2010
Mailing Address 400 South Flower #65		Transaction ID: SA11AI.153838
City Orange	State CA	Zip Code 92868
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.24
Name of Employer AFSCME CA CN 36	Occupation BUSINESS REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 421.44	

B.

Full Name (Last, First, Middle Initial) MARY SCHWANGER		Date of Receipt MM / DD / YYYY 03 / 12 / 2010
Mailing Address 419 Valley Street		Transaction ID: SA11AI.153415
City Marysville	State PA	Zip Code 17053
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 110.14
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.42	

C.

Full Name (Last, First, Middle Initial) SHELLEY K. SEEBERG		Date of Receipt MM / DD / YYYY 03 / 15 / 2010
Mailing Address 13096 Charlston Way		Transaction ID: SA11AI.153204
City Rosemount	State MN	Zip Code 55068
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.44
Name of Employer AFSCME INT'L	Occupation AREA FIELD SERVICES DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.20	

SUBTOTAL of Receipts This Page (optional)	▶	222.82
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 94 / 178
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) SHELLEY K. SEEBERG		Date of Receipt
	Mailing Address 13096 Charlston Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2010
	City	State	Zip Code
	Rosemount	MN	55068
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153307
Name of Employer AFSCME INT'L		Occupation AREA FIELD SERVICES DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 284.64	<input type="text"/> 42.44

B.	Full Name (Last, First, Middle Initial) ELIOT A. SEIDE		Date of Receipt
	Mailing Address 300 Hardman Avenue South		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 09 / 2010
	City	State	Zip Code
	South St. Paul	MN	55075
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.155322
Name of Employer AFSCME MN CN 5/CN14		Occupation EXECUTIVE DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 306.46	<input type="text"/> 92.82

C.	Full Name (Last, First, Middle Initial) ELIOT A. SEIDE		Date of Receipt
	Mailing Address 300 Hardman Avenue South		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 12 / 2010
	City	State	Zip Code
	South St. Paul	MN	55075
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.155836
Name of Employer AFSCME MN CN 5/CN14		Occupation EXECUTIVE DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 326.46	<input type="text"/> 20.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 155.26
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 95 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial) ELIOT A. SEIDE		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
Mailing Address 300 Hardman Avenue South		Transaction ID: SA11AI.153880
City South St. Paul	State MN	Zip Code 55075
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.00
Name of Employer AFSCME MN CN 5/CN14	Occupation EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.46	

B.

Full Name (Last, First, Middle Initial) DOMINIC SGRO		Date of Receipt MM / DD / YYYY 03 / 12 / 2010
Mailing Address 144 Stormer Road		Transaction ID: SA11AI.153416
City Indiana	State PA	Zip Code 15701-0144
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 110.14
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.42	

C.

Full Name (Last, First, Middle Initial) TIMOTHY P. SHAFER		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
Mailing Address P. O. Box 322		Transaction ID: SA11AI.155289
City Waverly	State OH	Zip Code 45690
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer AFSCME OH LOC 11	Occupation STAFF REPRESENTATIVE	
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)	174.14
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 96 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
DONALD G. SHAFFER

Mailing Address R. D. #5, Box 82

City State Zip Code
Brookeville PA 15825-9501

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

Name of Employer Occupation
AFSCME PA CN 13 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 204.90

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 12 / 2010

Transaction ID: SA11AI.153417

Amount of Each Receipt this Period
68.30

B.

Full Name (Last, First, Middle Initial)
JASON T. SIDENER

Mailing Address 5583 Bantry Lane #1

City State Zip Code
Madison WI 53717

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

Name of Employer Occupation
AFSCME WI CN 40 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2010

Transaction ID: SA11AI.153996

Amount of Each Receipt this Period
55.00

C.

Full Name (Last, First, Middle Initial)
ROBERTA J. SKOK

Mailing Address 775 Township Road #2204

City State Zip Code
Perrysville OH 44864

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

Name of Employer Occupation
AFSCME OH CN 8 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 254.28

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 04 / 2010

Transaction ID: SA11AI.153807

Amount of Each Receipt this Period
84.76

SUBTOTAL of Receipts This Page (optional) ► 208.06

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 97 / 178
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
BETTY SMITH

Mailing Address 19292 Archer

City State Zip Code
Detroit MI 48219

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

Name of Employer
AFSCME MI CN 25

Occupation
ASSISTANT TO THE PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
203.94

Date of Receipt
M M / D D / Y Y Y Y
03 / 16 / 2010

Transaction ID: SA11AI.153741

Amount of Each Receipt this Period
33.99

B.

Full Name (Last, First, Middle Initial)
SHARON SOBER

Mailing Address 212 5th Street

City State Zip Code
Catawissa PA 17820

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

Name of Employer
AFSCME PA CN 13

Occupation
STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.42

Date of Receipt
M M / D D / Y Y Y Y
03 / 12 / 2010

Transaction ID: SA11AI.153420

Amount of Each Receipt this Period
110.14

C.

Full Name (Last, First, Middle Initial)
DARRIN SPANN

Mailing Address 6130 Springford Drive #C6

City State Zip Code
Harrisburg PA 17111

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

Name of Employer
AFSCME PA CN 13

Occupation
STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
272.46

Date of Receipt
M M / D D / Y Y Y Y
03 / 12 / 2010

Transaction ID: SA11AI.153421

Amount of Each Receipt this Period
90.82

SUBTOTAL of Receipts This Page (optional) ► **234.95**

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 98 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) BEVERLY J. SPETZ		Date of Receipt
	Mailing Address 112 Elmwood Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 17 / 2010
	City	State	Zip Code
	Delta	OH	43515
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153644
Name of Employer AFSCME OH LOC 4		Occupation ORGANIZER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.88	<input type="text"/> 38.48

B.	Full Name (Last, First, Middle Initial) KAMALA B. SRIKAR		Date of Receipt
	Mailing Address 9908 Colebrook Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 15 / 2010
	City	State	Zip Code
	Potomac	MD	20854
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153206
Name of Employer AFSCME INT'L		Occupation MANAGER, CONFERENCE & TRAVEL SERVICES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 217.34	<input type="text"/> 44.42

C.	Full Name (Last, First, Middle Initial) KAMALA B. SRIKAR		Date of Receipt
	Mailing Address 9908 Colebrook Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2010
	City	State	Zip Code
	Potomac	MD	20854
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153309
Name of Employer AFSCME INT'L		Occupation MANAGER, CONFERENCE & TRAVEL SERVICES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 261.76	<input type="text"/> 44.42

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 127.32
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 99 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) MARIANNE STEGER		Date of Receipt
	Mailing Address 2930 Woodson Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Hilliard	OH	43026-1925
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153810
Name of Employer AFSCME OH CN 8		Occupation DIRECTOR OF ADMINISTRATIVE SERVICES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 86.64
		<input type="text"/> 259.92	

B.	Full Name (Last, First, Middle Initial) MARSHALL K. STENERSEN		Date of Receipt
	Mailing Address 16 E 5th Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Duluth	MN	55805
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.155323
Name of Employer AFSCME MN CN 5/CN14		Occupation STAFF REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 68.40
		<input type="text"/> 203.04	

C.	Full Name (Last, First, Middle Initial) MARSHALL K. STENERSEN		Date of Receipt
	Mailing Address 16 E 5th Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Duluth	MN	55805
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.155877
Name of Employer AFSCME MN CN 5/CN14		Occupation STAFF REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 20.00
		<input type="text"/> 223.04	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 175.04
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 100 / 178
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
MITCHELL STILLE
 Mailing Address **4320 NW Second Avenue**
 City **Des Moines** State **IA** Zip Code **50313**
 Date of Receipt **03 / 09 / 2010**
Transaction ID: SA11AI.153894
 Amount of Each Receipt this Period **84.00**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **AFSCME IA CN 61** Occupation **STAFF REPRESENTATIVE**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date **252.00**

B. Full Name (Last, First, Middle Initial)
WILLIAM STOUFFER
 Mailing Address **29B - 2nd Street**
 City **North Irwin** State **PA** Zip Code **15642**
 Date of Receipt **03 / 12 / 2010**
Transaction ID: SA11AI.153422
 Amount of Each Receipt this Period **68.30**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **AFSCME PA CN 13** Occupation **STAFF REPRESENTATIVE**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date **204.90**

C. Full Name (Last, First, Middle Initial)
TIMOTHY J. STRECKER
 Mailing Address **1603 E Street, SE**
 City **Washington** State **DC** Zip Code **20003**
 Date of Receipt **03 / 15 / 2010**
Transaction ID: SA11AI.153209
 Amount of Each Receipt this Period **48.17**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **AFSCME INT'L** Occupation **PROJECT MANAGER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date **240.85**

SUBTOTAL of Receipts This Page (optional) ► **200.47**
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 101 / 178		
	<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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) TIMOTHY J. STRECKER		Date of Receipt																					
	Mailing Address 1603 E Street, SE		<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>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		3	1		2	0	1	0														
	City State Zip Code Washington DC 20003		Transaction ID: SA11AI.153312																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: AFSCME INT'L Occupation: PROJECT MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 289.02		<table border="1"> <tr> <td colspan="10">48.17</td> </tr> </table>		48.17																				
48.17																								

B.	Full Name (Last, First, Middle Initial) MARY E. SULLIVAN		Date of Receipt																					
	Mailing Address 61 Woodside Drive		<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>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	4		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	4		2	0	1	0														
	City State Zip Code Albany NY 12208-1157		Transaction ID: SA11AI.153841																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: AFSCME NY LOC 1000 Occupation: EXECUTIVE VICE PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00		<table border="1"> <tr> <td colspan="10">25.00</td> </tr> </table>		25.00																				
25.00																								

C.	Full Name (Last, First, Middle Initial) MARY E. SULLIVAN		Date of Receipt																					
	Mailing Address 61 Woodside Drive		<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>0</td><td>3</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	6		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		1	6		2	0	1	0														
	City State Zip Code Albany NY 12208-1157		Transaction ID: SA11AI.153842																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: AFSCME NY LOC 1000 Occupation: EXECUTIVE VICE PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		<table border="1"> <tr> <td colspan="10">25.00</td> </tr> </table>		25.00																				
25.00																								

SUBTOTAL of Receipts This Page (optional)	▶	<table border="1"><tr><td>98.17</td></tr></table>	98.17
98.17			
TOTAL This Period (last page this line number only)	▶	<table border="1"><tr><td> </td></tr></table>	

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

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

FOR LINE NUMBER: PAGE 102 / 178
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
 MARY E. SULLIVAN
 Mailing Address 61 Woodside Drive
 City Albany State NY Zip Code 12208-1157
 Date of Receipt 03 / 31 / 2010
 Transaction ID: SA11AI.153843
 Amount of Each Receipt this Period 25.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME NY LOC 1000 Occupation EXECUTIVE VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 375.00

B. Full Name (Last, First, Middle Initial)
 MARY E. SULLIVAN
 Mailing Address 61 Woodside Drive
 City Albany State NY Zip Code 12208-1157
 Date of Receipt 03 / 31 / 2010
 Transaction ID: SA11AI.153881
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME NY LOC 1000 Occupation EXECUTIVE VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 475.00

C. Full Name (Last, First, Middle Initial)
 YVONNE J. SYPHAX
 Mailing Address 1625 L. Street, NW
 City Washington State DC Zip Code 20036
 Date of Receipt 03 / 15 / 2010
 Transaction ID: SA11AI.153212
 Amount of Each Receipt this Period 45.63
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 228.15

SUBTOTAL of Receipts This Page (optional) ► **170.63**
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 103 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) YVONNE J. SYPHAX		Date of Receipt MM / DD / YYYY 03 / 31 / 2010		
	Mailing Address 1625 L. Street, NW		Transaction ID: SA11AI.153315		
	City Washington	State DC	Zip Code 20036	Amount of Each Receipt this Period 45.63	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 273.78			

B.	Full Name (Last, First, Middle Initial) JEFFREY M. TAGGART		Date of Receipt MM / DD / YYYY 03 / 15 / 2010		
	Mailing Address 12001 Market Street Unit 450		Transaction ID: SA11AI.153213		
	City Reston	State VA	Zip Code 20190	Amount of Each Receipt this Period 107.34	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECTOR, ACCOUNTING			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 536.70			

C.	Full Name (Last, First, Middle Initial) JEFFREY M. TAGGART		Date of Receipt MM / DD / YYYY 03 / 31 / 2010		
	Mailing Address 12001 Market Street Unit 450		Transaction ID: SA11AI.153316		
	City Reston	State VA	Zip Code 20190	Amount of Each Receipt this Period 107.34	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECTOR, ACCOUNTING			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 644.04			

SUBTOTAL of Receipts This Page (optional)	▶	260.31
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 104 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
MOHAMMED TEHRANI

Mailing Address 1424 Wakeforest Drive

City Gaithersburg State MD Zip Code 20879

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

Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 212.70

Date of Receipt: 03 / 15 / 2010
Transaction ID: SA11AI.153214
Amount of Each Receipt this Period: 43.23

B.

Full Name (Last, First, Middle Initial)
MOHAMMED TEHRANI

Mailing Address 1424 Wakeforest Drive

City Gaithersburg State MD Zip Code 20879

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

Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.93

Date of Receipt: 03 / 31 / 2010
Transaction ID: SA11AI.153317
Amount of Each Receipt this Period: 43.23

C.

Full Name (Last, First, Middle Initial)
ROBERT L. THOMPSON

Mailing Address 927 Gibbs Avenue, NE

City Canton State OH Zip Code 44705-1074

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

Name of Employer AFSCME OH CN 8 Occupation REGIONAL DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 254.28

Date of Receipt: 03 / 04 / 2010
Transaction ID: SA11AI.153815
Amount of Each Receipt this Period: 84.76

SUBTOTAL of Receipts This Page (optional) ► 171.22

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 105 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) JOHN THORSON		Date of Receipt MM / DD / YYYY 03 / 09 / 2010		
	Mailing Address 555 Selby Avenue		Transaction ID: SA11AI.155324		
	City Saint Paul	State MN	Zip Code 55102	Amount of Each Receipt this Period 71.14	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME MN CN 5/CN14	Occupation POLITICAL ACTION REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 211.18			

B.	Full Name (Last, First, Middle Initial) LEIGH TOMLINSON		Date of Receipt MM / DD / YYYY 03 / 16 / 2010		
	Mailing Address 930 Stag Thicket Lane		Transaction ID: SA11AI.153745		
	City Mason	State MI	Zip Code 48854-1400	Amount of Each Receipt this Period 39.10	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME MI CN 25	Occupation ACCTG. /HUMAN RESOURCE DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 234.60			

C.	Full Name (Last, First, Middle Initial) DOROTHY TOWNSEND		Date of Receipt MM / DD / YYYY 03 / 15 / 2010		
	Mailing Address 6837 SW 39th Drive		Transaction ID: SA11AI.153215		
	City Miramar	State FL	Zip Code 33023	Amount of Each Receipt this Period 44.42	
	FEC ID number of contributing federal political committee. C				
	Name of Employer AFSCME INT'L	Occupation AREA FIELD SERVICES DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 222.10			

SUBTOTAL of Receipts This Page (optional)	▶	154.66
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 106 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) DOROTHY TOWNSEND		Date of Receipt
	Mailing Address 6837 SW 39th Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 31 / 2010
	City	State	Zip Code
	Miramar	FL	33023
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153318
Name of Employer AFSCME INT'L		Occupation AREA FIELD SERVICES DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 266.52	44.42

B.	Full Name (Last, First, Middle Initial) KAREN VALENTINE		Date of Receipt
	Mailing Address 154 Stoney Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 09 / 2010
	City	State	Zip Code
	Dover	DE	19904
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153902
Name of Employer AFSCME DE CN 81		Occupation STAFF REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.82	134.87

C.	Full Name (Last, First, Middle Initial) DAVID WARRICK		Date of Receipt
	Mailing Address 2638 Jay Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 02 / 2010
	City	State	Zip Code
	Indianapolis	IN	46229
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153888
Name of Employer AFSCME IN CN 62		Occupation EXECUTIVE DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.00	60.00

SUBTOTAL of Receipts This Page (optional)	239.29
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 107 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) DAVID WARRICK		Date of Receipt
	Mailing Address 2638 Jay Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 30 / 2010
	City	State	Zip Code
	Indianapolis	IN	46229
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153889
Name of Employer AFSCME IN CN 62		Occupation EXECUTIVE DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	<input type="text"/> 30.00

B.	Full Name (Last, First, Middle Initial) DAVID WARRICK		Date of Receipt
	Mailing Address 2638 Jay Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2010
	City	State	Zip Code
	Indianapolis	IN	46229
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153884
Name of Employer AFSCME IN CN 62		Occupation EXECUTIVE DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 420.00	<input type="text"/> 70.00

C.	Full Name (Last, First, Middle Initial) FRANK W. WASHINGTON		Date of Receipt
	Mailing Address 1713 Crimson Place		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2010
	City	State	Zip Code
	Mitchellville	MD	20721
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153320
Name of Employer AFSCME INT'L		Occupation SPECIAL AIDE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.86	<input type="text"/> 36.81

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 136.81
TOTAL This Period (last page this line number only)	<input type="text"/>

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 108 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) JANA WEAVER	Date of Receipt MM / DD / YYYY 03 / 05 / 2010
	Mailing Address 451 London Road	Transaction ID: SA11AI.154217
	City State Zip Code Deerfield WI 53531	Amount of Each Receipt this Period 69.06
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME WI CN 24 ASSISTANT DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.18	

B.	Full Name (Last, First, Middle Initial) BRIAN V. WEEKS	Date of Receipt MM / DD / YYYY 03 / 15 / 2010
	Mailing Address 8033 Exceisior Drive Apt. A	Transaction ID: SA11AI.153218
	City State Zip Code Madison WI 53717	Amount of Each Receipt this Period 44.42
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME INT'L POLITICAL ACTION COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.10	

C.	Full Name (Last, First, Middle Initial) BRIAN V. WEEKS	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 8033 Exceisior Drive Apt. A	Transaction ID: SA11AI.153321
	City State Zip Code Madison WI 53717	Amount of Each Receipt this Period 44.42
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME INT'L POLITICAL ACTION COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.52	

SUBTOTAL of Receipts This Page (optional)	157.90
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 109 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
SUSAN R. WELSH

Mailing Address 4909 Rees Lane

City State Zip Code
Bowie MD 20715

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

Name of Employer Occupation
AFSCME INT'L ADVANTAGE COORDINATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.20

Date of Receipt
MM / DD / YYYY
03 / 15 / 2010

Transaction ID: SA11AI.153219

Amount of Each Receipt this Period
42.44

B. Full Name (Last, First, Middle Initial)
SUSAN R. WELSH

Mailing Address 4909 Rees Lane

City State Zip Code
Bowie MD 20715

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

Name of Employer Occupation
AFSCME INT'L ADVANTAGE COORDINATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 254.64

Date of Receipt
MM / DD / YYYY
03 / 31 / 2010

Transaction ID: SA11AI.153322

Amount of Each Receipt this Period
42.44

C. Full Name (Last, First, Middle Initial)
JOHN P. WESTMORELAND

Mailing Address 4678 West Road

City State Zip Code
Moose Lake MN 55767

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

Name of Employer Occupation
AFSCME MN CN 5/CN14 BUSINESS AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 214.56

Date of Receipt
MM / DD / YYYY
03 / 09 / 2010

Transaction ID: SA11AI.155326

Amount of Each Receipt this Period
72.28

SUBTOTAL of Receipts This Page (optional) ► **157.16**

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 110 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
JOHN P. WESTMORELAND

Mailing Address 4678 West Road

City State Zip Code
Moose Lake MN 55767

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

Name of Employer Occupation
AFSCME MN CN 5/CN14 BUSINESS AGENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 234.56

Date of Receipt
MM / DD / YYYY
03 / 12 / 2010

Transaction ID: SA11AI.155925

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
JAMES R. WESTON

Mailing Address 1495 Irvin-Shoots Road

City State Zip Code
Morral OH 43337

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

Name of Employer Occupation
AFSCME OH LOC 4 DIRECTOR, POLITICAL ACTION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 08 / 2010

Transaction ID: SA11AI.153590

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
JAMES R. WESTON

Mailing Address 1495 Irvin-Shoots Road

City State Zip Code
Morral OH 43337

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

Name of Employer Occupation
AFSCME OH LOC 4 DIRECTOR, POLITICAL ACTION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2010

Transaction ID: SA11AI.153649

Amount of Each Receipt this Period
50.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 / 178
	<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	

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) YVONNE F. WHEELER		Date of Receipt	
	Mailing Address 1625 L. Street, NW		M M / D D / Y Y Y Y Y 03 / 15 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.153220
	Washington	DC	20036	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		43.61	
Name of Employer AFSCME INT'L		Occupation AREA FIELD SERVICES DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 218.05		

B.	Full Name (Last, First, Middle Initial) YVONNE F. WHEELER		Date of Receipt	
	Mailing Address 1625 L. Street, NW		M M / D D / Y Y Y Y Y 03 / 31 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.153323
	Washington	DC	20036	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		43.61	
Name of Employer AFSCME INT'L		Occupation AREA FIELD SERVICES DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 261.66		

C.	Full Name (Last, First, Middle Initial) BRYCE WICKSTROM		Date of Receipt	
	Mailing Address 1267 Matilda Street		M M / D D / Y Y Y Y Y 03 / 31 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.155386
	St. Paul	MN	55117-4473	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		100.00	
Name of Employer AFSCME MN CN 5/STATE OF MN		Occupation RECORDING SECRETARY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional)	▶	187.22
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 112 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial) GUY WIEDERHOLD		Date of Receipt MM / DD / YYYY 03 / 12 / 2010
Mailing Address 906 Laurel Boulevard		Transaction ID: SA11AI.153431
City Pottsville	State PA	Zip Code 17901-2324
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 68.30	
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.90	

B.

Full Name (Last, First, Middle Initial) WILLIAM WILKINSON		Date of Receipt MM / DD / YYYY 03 / 15 / 2010
Mailing Address 5272 Bradgen Court		Transaction ID: SA11AI.153222
City Springfield	State VA	Zip Code 22151
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 48.17	
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, RESEARCH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.85	

C.

Full Name (Last, First, Middle Initial) WILLIAM WILKINSON		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
Mailing Address 5272 Bradgen Court		Transaction ID: SA11AI.153325
City Springfield	State VA	Zip Code 22151
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 48.17	
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, RESEARCH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 289.02	

SUBTOTAL of Receipts This Page (optional)	164.64
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 113 / 178
	<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	

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) MARION L. WILLIAMS	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 12904 Clearfield Drive	Transaction ID: SA11AI.153326
	City State Zip Code Bowie MD 20715	Amount of Each Receipt this Period 35.42
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME INT'L ADMINISTRATIVE ASSISTANT II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.52	

B.	Full Name (Last, First, Middle Initial) MICHAEL B. WILLIAMS	Date of Receipt MM / DD / YYYY 03 / 15 / 2010
	Mailing Address 6800 Fleetwood Rd. Apt. #1118	Transaction ID: SA11AI.153224
	City State Zip Code McLean VA 22101	Amount of Each Receipt this Period 43.08
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME INT'L SPECIAL ASST. TO SECY-TREASURER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.40	

C.	Full Name (Last, First, Middle Initial) MICHAEL B. WILLIAMS	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 6800 Fleetwood Rd. Apt. #1118	Transaction ID: SA11AI.153327
	City State Zip Code McLean VA 22101	Amount of Each Receipt this Period 43.08
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AFSCME INT'L SPECIAL ASST. TO SECY-TREASURER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 258.48	

SUBTOTAL of Receipts This Page (optional)	▶	121.58
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 114 / 178
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) SAUNDRA WILLIAMS		Date of Receipt
	Mailing Address 16218 Braile		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Detroit	MI	48219-4727
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153699
Name of Employer AFSCME MI CN 25		Occupation STAFF REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 206.25	<input type="text"/> 41.25

B.	Full Name (Last, First, Middle Initial) SAUNDRA WILLIAMS		Date of Receipt
	Mailing Address 16218 Braile		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Detroit	MI	48219-4727
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153748
Name of Employer AFSCME MI CN 25		Occupation STAFF REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 247.50	<input type="text"/> 41.25

C.	Full Name (Last, First, Middle Initial) ALLAN WINEY		Date of Receipt
	Mailing Address 765 Mount Airy Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Lewisburg	PA	17339
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.153432
Name of Employer AFSCME PA CN 13		Occupation ASSISTANT BUSINESS MANAGER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 303.84	<input type="text"/> 101.28

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 183.78
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 115 / 178
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial) MARY BETH WISHON		Date of Receipt MM / DD / YYYY 03 / 17 / 2010	
Mailing Address 5823 Mink Street		Transaction ID: SA11AI.153651	
City Pataskala	State OH	Zip Code 43062	Amount of Each Receipt this Period 38.50
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH LOC 4	Occupation FIELD REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.00		

B.

Full Name (Last, First, Middle Initial) KRISTIE WOLF-MALONEY		Date of Receipt MM / DD / YYYY 03 / 12 / 2010	
Mailing Address 4923C Haverford Road		Transaction ID: SA11AI.153433	
City Harrisburg	State PA	Zip Code 17109	Amount of Each Receipt this Period 68.30
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.90		

C.

Full Name (Last, First, Middle Initial) BRUCE WYNGAARD		Date of Receipt MM / DD / YYYY 03 / 02 / 2010	
Mailing Address 1310 Hunter Avenue		Transaction ID: SA11AI.155269	
City Columbus	State OH	Zip Code 43201	Amount of Each Receipt this Period 66.20
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH LOC 11	Occupation OPERATIONS DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.70		

SUBTOTAL of Receipts This Page (optional)	▶	173.00
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 116 / 178
(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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

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

Mailing Address **1310 Hunter Avenue**

City **Columbus** State **OH** Zip Code **43201**

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

Name of Employer **AFSCME OH LOC 11** Occupation **OPERATIONS DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **297.90**

Date of Receipt **03 / 31 / 2010**
Transaction ID: SA11AI.155291
 Amount of Each Receipt this Period **66.20**

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

Mailing Address **1642 W. MLK Blvd**

City **Quicny** State **FL** Zip Code **32351**

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

Name of Employer **AFSCME FL CN 79** Occupation **PRESIDENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.68**

Date of Receipt **03 / 12 / 2010**
Transaction ID: SA11AI.153887
 Amount of Each Receipt this Period **77.56**

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

Mailing Address **1642 W. MLK Blvd**

City **Quicny** State **FL** Zip Code **32351**

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

Name of Employer **AFSCME FL CN 79** Occupation **PRESIDENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **274.68**

Date of Receipt **03 / 31 / 2010**
Transaction ID: SA11AI.153885
 Amount of Each Receipt this Period **14.00**

SUBTOTAL of Receipts This Page (optional) ► **157.76**

TOTAL This Period (last page this line number only) ► **21036.00**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 117 / 178
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) DISTRICT COUNCIL 37-AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2010
	Mailing Address 125 Barclay Street		Transaction ID: SA12.153112
	City New York	State NY	Zip Code 10007
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 8111.67
	Name of Employer	Occupation	Transfer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 104170.75	

SUBTOTAL of Receipts This Page (optional)	8111.67
TOTAL This Period (last page this line number only)	8111.67

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 118 / 178
(check only one)

<input type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input checked="" 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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
THE CAMPAIGN GROUP

Mailing Address 1600 Locust Street

City	State	Zip Code
Philadelphia	PA	19103

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
85.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	1	0

Transaction ID: SA15.153110

Amount of Each Receipt this Period
85.00

Refund

SUBTOTAL of Receipts This Page (optional)	▶	85.00
TOTAL This Period (last page this line number only)	▶	85.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 119 / 178
 (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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
AMALGAMATED BANK

Mailing Address 275 7th Avenue

City State Zip Code
New York NY 10001

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.41

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2010

Transaction ID: SA17.153111

Amount of Each Receipt this Period
534.29

Interest Income 3/31/10

SUBTOTAL of Receipts This Page (optional)	▶	534.29
TOTAL This Period (last page this line number only)	▶	534.29

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 checked="" 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 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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>A.</p> <p>Full Name (Last, First, Middle Initial) AMALGAMATED BANK</p> <p>Mailing Address 275 7th Avenue</p> <p>City New York State NY Zip Code 10001</p> <p>Purpose of Disbursement Bank Fees/Returned checks</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.153113</p> <p>Date of Disbursement 03 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p>001 Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) AMALGAMATED BANK</p> <p>Mailing Address 275 7th Avenue</p> <p>City New York State NY Zip Code 10001</p> <p>Purpose of Disbursement Bank Fees/Returned check</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.153114</p> <p>Date of Disbursement 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 10.00</p> <p>001 Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address P.O. Box 53852</p> <p>City Phoenix State AZ Zip Code 85072-3852</p> <p>Purpose of Disbursement Mechant Service Charges 3/15/10</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.153115</p> <p>Date of Disbursement 03 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 8.62</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

38.62

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 121 / 178

<input checked="" 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 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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	Transaction ID: SB21B.153116 Date of Disbursement																			
	Mailing Address P.O. Box 53852	<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>0</td><td>3</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	8		2	0	1	0												
	City Phoenix State AZ Zip Code 85072-3852	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Mechant Service Charges 3/18/10	<table border="1"><tr><td>2.59</td></tr></table>	2.59																		
2.59																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/ Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	Transaction ID: SB21B.153117 Date of Disbursement																			
	Mailing Address P.O. Box 53852	<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>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	1	0												
	City Phoenix State AZ Zip Code 85072-3852	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Mechant Service Charges 3/19/10	<table border="1"><tr><td>2.59</td></tr></table>	2.59																		
2.59																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/ Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) BART GROUP	Transaction ID: SB21B.153118 Date of Disbursement																			
	Mailing Address 171 Main Street	<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>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	4		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	4		2	0	1	0												
	City Port Washington State NY Zip Code 11050	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Mechant Service Charges 3/4/10	<table border="1"><tr><td>80.40</td></tr></table>	80.40																		
80.40																					
	Candidate Name	<table border="1"><tr><td>001</td></tr></table> Category/ Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>85.58</td></tr></table>	85.58
85.58		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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 122 / 178

<input checked="" 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 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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
DC TREASURER

Mailing Address P.O. Box 679

City Washington State DC Zip Code 20044-0679

Purpose of Disbursement
Income Taxes Paid

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.153121
Date of Disbursement

03 / 08 / 2010

Amount of Each Disbursement this Period

484.00

B.

Full Name (Last, First, Middle Initial)
US TREASURY

Mailing Address Internal Revenue Service Center

City Ogden State UT Zip Code 84201-0027

Purpose of Disbursement
Income Taxes Paid

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.153120
Date of Disbursement

03 / 08 / 2010

Amount of Each Disbursement this Period

1507.00

SUBTOTAL of Disbursements This Page (optional) ►

1991.00

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

2115.20

**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 123 / 178

<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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
AFSCME PEOPLE- Non Federal Account

Mailing Address 1625 L Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Tfr non-fed acct for non-fed activity

Candidate Name

008
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB22.153122

Date of Disbursement

03 / 09 / 2010

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

500.00

**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 124 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

Any Information copied from such Reports and Statements and 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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) AFL-CIO COPE PCC	Transaction ID: SB23.152937 Date of Disbursement 03 / 09 / 2010
	Mailing Address 815 16th Street NW	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20006	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) ALAN MOLLOHAN FOR CONGRESS COMMITTEE	Transaction ID: SB23.153067 Date of Disbursement 03 / 26 / 2010
	Mailing Address P.O. Box 1343	Amount of Each Disbursement this Period 4000.00
	City Fairmont State WV Zip Code 26554-1343	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 01 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) AMERICA WORKS COMMITTEE	Transaction ID: SB23.152941 Date of Disbursement 03 / 26 / 2010
	Mailing Address 607 14th Street NW Suite 800	Amount of Each Disbursement this Period 2500.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	▶	11500.00
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 125 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
AMERIPAC: THE FUND FOR A GREATER AMERICA

Transaction ID: SB23.152939

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	2		2	0	1	0

Mailing Address 607 14th Street NW
Suite 800

Amount of Each Disbursement this Period

5000.00

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contribution

011
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District: PAC

B.

Full Name (Last, First, Middle Initial)
ANDRE CARSON FOR CONGRESS

Transaction ID: SB23.153071

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	0

Mailing Address 2527 N. Alabama Street

Amount of Each Disbursement this Period

1000.00

City Indianapolis State IN Zip Code 46205

Purpose of Disbursement
Contribution

011
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IN District: 07

C.

Full Name (Last, First, Middle Initial)
ANDREWS FOR CONGRESS

Transaction ID: SB23.153016

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	0

Mailing Address P.O. Box 295

Amount of Each Disbursement this Period

2500.00

City Oaklyn State NJ Zip Code 08107

Purpose of Disbursement
Contribution

011
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NJ District: 01

SUBTOTAL of Disbursements This Page (optional)

8500.00

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 126 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

Any Information copied from such Reports and Statements and 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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial) A NEW DIRECTION PAC Mailing Address P.O. Box 4234 City Concord State NH Zip Code 03302 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PAC	Transaction ID: SB23.152935 Date of Disbursement 03 / 26 / 2010
	Amount of Each Disbursement this Period 1000.00 011 Category/Type
B. Full Name (Last, First, Middle Initial) ANNA ESHOO FOR CONGRESS Mailing Address 555 Bryant Street PMB 335 City Palo Alto State CA Zip Code 94301 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 14 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153074 Date of Disbursement 03 / 29 / 2010
	Amount of Each Disbursement this Period 1000.00 011 Category/Type
C. Full Name (Last, First, Middle Initial) ASIAN AMERICAN ACTION FUND Mailing Address 1100 17th Street NW Suite 902 City Washington State DC Zip Code 20036 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PAC	Transaction ID: SB23.152931 Date of Disbursement 03 / 08 / 2010
	Amount of Each Disbursement this Period 1000.00 011 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) BARBARA LEE FOR CONGRESS	Transaction ID: SB23.153044 Date of Disbursement 03 / 26 / 2010	
	Mailing Address 1736 Franklin Street Suite 550		
	City Oakland State CA Zip Code 94612	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 09	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) BECERRA FOR CONGRESS	Transaction ID: SB23.152991 Date of Disbursement 03 / 26 / 2010	
	Mailing Address P.O. Box 261060		
	City Los Angeles State CA Zip Code 90026	Amount of Each Disbursement this Period 2500.00	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 31	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) BENNET FOR COLORADO	Transaction ID: SB23.152956 Date of Disbursement 03 / 23 / 2010	
	Mailing Address P.O. Box 3078		
	City Denver State CO Zip Code 80201	Amount of Each Disbursement this Period 5000.00	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

8500.00

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 128 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)

BERA FOR CONGRESS

Mailing Address P.O. Box 582496

City Elk Grove State CA Zip Code 95758

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CA District: 03

Transaction ID: SB23.152973

Date of Disbursement

03 / 23 / 2010

Amount of Each Disbursement this Period

3000.00

B.

Full Name (Last, First, Middle Initial)

BERKLEY FOR CONGRESS

Mailing Address 7500 W. Lake Mead Blvd.
Box 9-306

City Las Vegas State NV Zip Code 89128

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NV District: 01

Transaction ID: SB23.153088

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

BERMAN FOR CONGRESS

Mailing Address 6380 Wilshire Blvd.
#1612

City Los Angeles State CA Zip Code 90048

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CA District: 28

Transaction ID: SB23.153077

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) BETTY SUTTON FOR CONGRESS	Transaction ID: SB23.153007 Date of Disbursement 03 / 26 / 2010	
	Mailing Address 1700 West Market #155		
	City Akron State OH Zip Code 44313	Amount of Each Disbursement this Period 5000.00	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 13	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) BETTY SUTTON FOR CONGRESS	Transaction ID: SB23.153046 Date of Disbursement 03 / 26 / 2010	
	Mailing Address 1700 West Market #155		
	City Akron State OH Zip Code 44313	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 13	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) BILL OWENS FOR CONGRESS	Transaction ID: SB23.152988 Date of Disbursement 03 / 26 / 2010	
	Mailing Address P.O. Box 1575		
	City Plattsburgh State NY Zip Code 12901	Amount of Each Disbursement this Period 2500.00	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	8500.00
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 130 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
BLUMENTHAL FOR SENATE

Mailing Address 777 Summmer Street

City State Zip Code
Stamford CT 06901

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President
State: CT District: 00

Disbursement For: 2010
 Primary General
 Other (specify) ▼
Convention

Transaction ID: SB23.152954
Date of Disbursement

03 / 23 / 2010

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
BOB BRADY FOR CONGRESS

Mailing Address P.O. Box 22471

City State Zip Code
Philadelphia PA 19110-2471

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President
State: PA District: 01

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23.153066
Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

3000.00

C.

Full Name (Last, First, Middle Initial)
BOB ETHERIDGE FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 28001

City State Zip Code
Raleigh NC 27611

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President
State: NC District: 02

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23.153037
Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

9000.00

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 131 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) BORN FIGHTING PAC	Transaction ID: SB23.152936 Date of Disbursement
	Mailing Address 426 C Street NE	<input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name	<input type="text" value="1000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	011 Category/ Type

B.	Full Name (Last, First, Middle Initial) BOYD FOR CONGRESS	Transaction ID: SB23.153070 Date of Disbursement
	Mailing Address P.O. Box 15703	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City Tallahassee State FL Zip Code 32317-5703	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name	<input type="text" value="5000.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

C.	Full Name (Last, First, Middle Initial) BRAD MILLER CONGRESSIONAL CAMPAIGN	Transaction ID: SB23.153083 Date of Disbursement
	Mailing Address P.O. Box 10322	<input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City Raleigh State NC Zip Code 27605	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name	<input type="text" value="1000.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 13 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="7000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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 type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) BRALEY FOR CONGRESS Mailing Address P.O. Box 390 City Waterloo State IA Zip Code 50704 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 01 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153081 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 1 0 Amount of Each Disbursement this Period 1000.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) BRIAN HIGGINS FOR CONGRESS Mailing Address P.O. Box 28 City Buffalo State NY Zip Code 14220 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 27 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153093 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 1 0 Amount of Each Disbursement this Period 1000.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) BRIDGE PAC Mailing Address 499 S. Capitol Street SW Suite 412 City Washington State DC Zip Code 20003 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PAC	Transaction ID: SB23.152945 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 1 0 Amount of Each Disbursement this Period 5000.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	7000.00
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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
BUTTERFIELD FOR CONGRESS

Mailing Address P.O. Box 2571

City Wilson State NC Zip Code 27894

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NC District: 01

Transaction ID: SB23.153082

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
CAPUANO FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 440305

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: MA District: 08

Transaction ID: SB23.153036

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
CEDRIC RICHMOND FOR CONGRESS

Mailing Address 1631 Elysian Fields Avenue

City New Orleans State LA Zip Code 70117

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: LA District: 02

Transaction ID: SB23.153060

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ►

4500.00

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 135 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) CLAY, JR. FOR CONGRESS	Transaction ID: SB23.153059 Date of Disbursement 03 / 26 / 2010
	Mailing Address P.O. Box 4544	Amount of Each Disbursement this Period 2500.00
	City Saint Louis State MO Zip Code 63108	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT CHRIS MURPHY	Transaction ID: SB23.153000 Date of Disbursement 03 / 26 / 2010
	Mailing Address P.O. Box 127	Amount of Each Disbursement this Period 5000.00
	City Cheshire State CT Zip Code 06410	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT GARY L. ACKERMAN	Transaction ID: SB23.153023 Date of Disbursement 03 / 26 / 2010
	Mailing Address P.O. Box 95	Amount of Each Disbursement this Period 1000.00
	City Flushing Meadows State NY Zip Code 11365	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

8500.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>A. Full Name (Last, First, Middle Initial) COMMITTEE TO RE-ELECT LINDA SANCHEZ</p> <p>Mailing Address P.O. Box 6162</p> <p>City Lakewood State CA Zip Code 90714</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 39</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.152993 Date of Disbursement 03 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) COMMITTEE TO RE-ELECT LORETTA SANCHEZ</p> <p>Mailing Address 604 S. Harbor Blvd.</p> <p>City Santa Ana State CA Zip Code 92704</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 47</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.153003 Date of Disbursement 03 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) COMMITTEE TO RE-ELECT NYDIA M. VELAZQUEZ</p> <p>Mailing Address 315 Inspiration Lane</p> <p>City Gaithersburg State MD Zip Code 20878</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 12</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.153090 Date of Disbursement 03 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

8500.00

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 137 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial) CONGRESSIONAL BLACK CAUCUS - PAC <hr/> Mailing Address 227 Massachusetts Avenue NW <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PAC	Transaction ID: SB23.152951 Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2010
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PAC
B. Full Name (Last, First, Middle Initial) COURTNEY FOR CONGRESS <hr/> Mailing Address P.O. Box 1372 <hr/> City Vernon State CT Zip Code 06066 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153004 Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2010
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) CROWLEY FOR CONGRESS <hr/> Mailing Address 84-56 Grand Avenue <hr/> City Elmhurst State NY Zip Code 11373 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 07 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153024 Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

11000.00

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 138 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) CUMMINGS FOR CONGRESS	Transaction ID: SB23.153021 Date of Disbursement 03 / 26 / 2010	
	Mailing Address 2901 Druid Park Drive Suite 203		
	City Baltimore State MD Zip Code 21215	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) DAN SEALS FOR CONGRESS	Transaction ID: SB23.152977 Date of Disbursement 03 / 23 / 2010	
	Mailing Address P.O. Box 584		
	City Wilmette State IL Zip Code 60091	Amount of Each Disbursement this Period 5000.00	
	Purpose of Disbursement Contribution - (Debt) Candidate Name	011 Category/ Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) DAVE WU FOR CONGRESS	Transaction ID: SB23.152981 Date of Disbursement 03 / 26 / 2010	
	Mailing Address 818 SW 3rd Avenue #1182		
	City Portland State OR Zip Code 97204	Amount of Each Disbursement this Period 500.00	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

6500.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>A. Full Name (Last, First, Middle Initial) DAVE WU FOR CONGRESS</p> <p>Mailing Address 818 SW 3rd Avenue #1182</p> <p>City Portland State OR Zip Code 97204</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.153020 Date of Disbursement 03 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) DAVID PRICE FOR CONGRESS COMMITTEE</p> <p>Mailing Address P.O. Box 1986</p> <p>City Raleigh State NC Zip Code 27602</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 04</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.153102 Date of Disbursement 03 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) DAVID SCOTT FOR CONGRESS</p> <p>Mailing Address 225 Peachtree Street NE</p> <p>City Atlanta State GA Zip Code 30303</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 13</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.153080 Date of Disbursement 03 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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 140 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>A. Full Name (Last, First, Middle Initial) DEBBIE WASSERMAN SCHULTZ FOR CONGRESS</p> <p>Mailing Address P.O. Box 71147</p> <p>City Washington State DC Zip Code 20024</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 20</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.153006 Date of Disbursement 03 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) DEFAZIO FOR CONGRESS</p> <p>Mailing Address P.O. Box 1316</p> <p>City Springfield State OR Zip Code 97477</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 04</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.153027 Date of Disbursement 03 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) DELBENE FOR CONGRESS</p> <p>Mailing Address P.O. Box 1406</p> <p>City Bellevue State WA Zip Code 98009</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.152974 Date of Disbursement 03 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

9000.00

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 141 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial) DEMOCRATS WIN SEATS PAC <hr/> Mailing Address 1071 Twin Branch Lane <hr/> City Weston State FL Zip Code 33326 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PAC	Transaction ID: SB23.152940 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	Category/Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) DIANA DEGETTE FOR US CONGRESS <hr/> Mailing Address P.O. Box 61337 <hr/> City Denver State CO Zip Code 80206-8337 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 01 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153097 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) DINGELL FOR CONGRESS <hr/> Mailing Address 19855 W. Outer Drive Suite 103A-E <hr/> City Dearborn State MI Zip Code 48124-0000 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 15 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153013 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1500.00
	Category/Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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 142 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial) DONNA CHRISTENSEN CAMPAIGN <hr/> Mailing Address P.O. Box 5197 <hr/> City Christiansted State VI Zip Code 00823 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VI District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153042 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) DONNELLY FOR CONGRESS COMMITTEE <hr/> Mailing Address P.O. Box 1961 <hr/> City South Bend State IN Zip Code 46634 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.152998 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) DOYLE FOR CONGRESS COMMITTEE <hr/> Mailing Address P.O. Box 17426 <hr/> City Pittsburgh State PA Zip Code 15235 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 14 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153069 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 4000.00
	011 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

10000.00

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 143 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>A. Full Name (Last, First, Middle Initial) DUTCH RUPPERSBERGER FOR CONGRESS COMMITTEE</p> <p>Mailing Address 22 West Padonia Road Suite C-141</p> <p>City Timonium State MD Zip Code 21093</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.152980 Date of Disbursement 03 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) EARL POMEROY FOR CONGRESS</p> <p>Mailing Address P.O. Box 9336</p> <p>City Fargo State ND Zip Code 58106</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 01</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.153001 Date of Disbursement 03 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) ELLIOTT FOR CONGRESS</p> <p>Mailing Address 124 W. Capitol Suite 1630</p> <p>City Little Rock State AR Zip Code 72201</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.152978 Date of Disbursement 03 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ►

11000.00

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 144 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) ELLSWORTH FOR INDIANA	Transaction ID: SB23.152962 Date of Disbursement 03 / 29 / 2010
	Mailing Address P.O. Box 62	Amount of Each Disbursement this Period 5000.00
	City Evansville State IN Zip Code 47708	011 Category/ Type
	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 08	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) ENGEL FOR CONGRESS	Transaction ID: SB23.153025 Date of Disbursement 03 / 26 / 2010
	Mailing Address 462 California Road	Amount of Each Disbursement this Period 1000.00
	City Bronxville State NY Zip Code 10708	011 Category/ Type
	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 17	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) FATTAH FOR CONGRESS	Transaction ID: SB23.153041 Date of Disbursement 03 / 26 / 2010
	Mailing Address 3900 Ford Road Suite 12-O	Amount of Each Disbursement this Period 1000.00
	City Philadelphia State PA Zip Code 19131	011 Category/ Type
	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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 145 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
FEINGOLD SENATE COMMITTEE

Mailing Address P.O. Box 620062

City Middleton State WI Zip Code 53562

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

State: WI District: 00

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23.152958
Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

3000.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF BENNIE THOMPSON

Mailing Address 236 Massachusetts Avenue NE
Suite 508

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

State: MS District: 02

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23.152984
Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
FRIENDS OF CAROLYN MCCARTHY

Mailing Address P.O. Box 190

City Mineola State NY Zip Code 11501

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

State: NY District: 04

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB23.153089
Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

5000.00

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 146 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) FRIENDS OF CHARLIE WILSON Mailing Address 252 West Main Street City Saint Clairsville State OH Zip Code 43950 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 06 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153018 Date of Disbursement 03 / 29 / 2010 Amount of Each Disbursement this Period 2500.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) FRIENDS OF CHARLIE WILSON Mailing Address 252 West Main Street City Saint Clairsville State OH Zip Code 43950 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153094 Date of Disbursement 03 / 29 / 2010 Amount of Each Disbursement this Period 1000.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) FRIENDS OF CONGRESSMAN GEORGE MILLER Mailing Address P.O. Box 5864 City Concord State CA Zip Code 94524 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 07 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.152989 Date of Disbursement 03 / 26 / 2010 Amount of Each Disbursement this Period 2500.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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 147 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) FRIENDS OF FARR	Transaction ID: SB23.153075 Date of Disbursement																			
	Mailing Address P.O. Box 122	<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>0</td><td>3</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	9		2	0	1	0												
	City Monterey State CA Zip Code 93942	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution Candidate Name	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 17	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					

B.	Full Name (Last, First, Middle Initial) FRIENDS OF LOIS CAPPs	Transaction ID: SB23.153076 Date of Disbursement																			
	Mailing Address P.O. Box 23940	<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>0</td><td>3</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	9		2	0	1	0												
	City Santa Barbara State CA Zip Code 93121	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution Candidate Name	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 23	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					

C.	Full Name (Last, First, Middle Initial) FRIENDS OF MAURICE HINCHEY	Transaction ID: SB23.153092 Date of Disbursement																			
	Mailing Address P.O. Box 4497	<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>0</td><td>3</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	9		2	0	1	0												
	City Kingston State NY Zip Code 12402	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution Candidate Name	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 22	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>3000.00</td></tr></table>	3000.00
3000.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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 148 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
FRIENDS OF MAZIE HIRONO

Mailing Address P.O. Box 677

City Honolulu State HI Zip Code 96809

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: HI District: 02

Transaction ID: SB23.152983
Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
FRIENDS OF ROSA DELAURO

Mailing Address 12 Trumbull Street

City New Haven State CT Zip Code 06511

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CT District: 03

Transaction ID: SB23.152995
Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)
FRIENDS OF STEVE POUAGNET

Mailing Address 100 S. Sunrise Way
Suite A #194

City Palm Springs State CA Zip Code 92262

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CA District: 45

Transaction ID: SB23.152972
Date of Disbursement

03 / 23 / 2010

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional) ▶

6500.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial) FRIENDS OF TARRYL CLARK <hr/> Mailing Address P.O. Box 489 <hr/> City Saint Cloud State MN Zip Code 56302 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153009 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00
	011 Category/Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) GARAMENDI FOR CONGRESS <hr/> Mailing Address 1661 Botelho Drive Suite 100 <hr/> City Walnut Creek State CA Zip Code 94596 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153101 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	011 Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) GREEN MOUNTAIN PAC <hr/> Mailing Address P.O. Box 1142 <hr/> City Montpelier State VT Zip Code 05601 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.152946 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	011 Category/Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

10000.00

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 150 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) GWEN PAC	Transaction ID: SB23.152933 Date of Disbursement 03 / 26 / 2010
	Mailing Address 1831 Bay Street SE	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: PAC	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) HALTER FOR US SENATE	Transaction ID: SB23.152952 Date of Disbursement 03 / 02 / 2010
	Mailing Address 902 W. 2nd Street Suite 3	Amount of Each Disbursement this Period 5000.00
	City Little Rock State AR Zip Code 72201	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) HANABUSA 2010	Transaction ID: SB23.152965 Date of Disbursement 03 / 05 / 2010
	Mailing Address P.O. Box 1416	Amount of Each Disbursement this Period 5000.00
	City Honolulu State HI Zip Code 96806	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General

SUBTOTAL of Disbursements This Page (optional) ►

11000.00

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 151 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) HASTINGS FOR CONGRESS		Transaction ID: SB23.153033		
	Mailing Address P.O. Box 100277		Date of Disbursement MM / DD / YYYY 03 / 26 / 2010		
	City Fort Lauderdale	State FL	Zip Code 33310	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Contribution		011 Category/ Type		
Candidate Name					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: FL District: 23					
B.	Full Name (Last, First, Middle Initial) HILLIARD FOR CONGRESS		Transaction ID: SB23.153068		
	Mailing Address P.O. Box 12804		Date of Disbursement MM / DD / YYYY 03 / 26 / 2010		
	City Birmingham	State AL	Zip Code 35202	Amount of Each Disbursement this Period 4000.00	
	Purpose of Disbursement Contribution		011 Category/ Type		
Candidate Name					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: AL District: 07					
C.	Full Name (Last, First, Middle Initial) HOUSE BACK PAC		Transaction ID: SB23.152949		
	Mailing Address P.O. Box 30344		Date of Disbursement MM / DD / YYYY 03 / 29 / 2010		
	City Bethesda	State MD	Zip Code 20824	Amount of Each Disbursement this Period 5000.00	
	Purpose of Disbursement Contribution		011 Category/ Type		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼			
State: District: PAC					

SUBTOTAL of Disbursements This Page (optional) ▶

10000.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial) ISRAEL FOR CONGRESS <hr/> Mailing Address P.O. Box 777 <hr/> City State Zip Code Deer Park NY 11729 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153054 Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2010
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) JACKIE FOR CONGRESS <hr/> Mailing Address P.O. Box 112 <hr/> City State Zip Code Burlingame CA 94011 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 12 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153073 Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) JANE DYER FOR CONGRESS <hr/> Mailing Address P.O. Box 1000 <hr/> City State Zip Code Easley SC 29641 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 03 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.152967 Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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 153 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial) JIM COSTA FOR CONGRESS <hr/> Mailing Address 2037 West Bullard Suite 355 <hr/> City Fresno State CA Zip Code 93711-1200 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 20 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153030 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) JOHN BOCCIERI FOR CONGRESS <hr/> Mailing Address P.O. Box 3016 <hr/> City Alliance State OH Zip Code 44601 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.152997 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) JOHN CALLAHAN FOR CONGRESS <hr/> Mailing Address P.O. Box 1386 <hr/> City Bethlehem State PA Zip Code 18016 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 15 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153008 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

8500.00

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 154 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) JOHN CARNEY FOR CONGRESS	Transaction ID: SB23.153005 Date of Disbursement
	Mailing Address P.O. Box 2162	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City Wilmington State DE Zip Code 19899-2162	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name	<input type="text" value="5000.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DE District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) JOHN HALL FOR CONGRESS	Transaction ID: SB23.153055 Date of Disbursement
	Mailing Address P.O. Box 469	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City Beacon State NY Zip Code 12508	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name	<input type="text" value="2000.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) JOHN LEWIS FOR CONGRESS	Transaction ID: SB23.153056 Date of Disbursement
	Mailing Address P.O. Box 2323	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City Atlanta State GA Zip Code 30301	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name	<input type="text" value="2000.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

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 155 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) JOHN SALAZAR FOR CONGRESS	Transaction ID: SB23.153051 Date of Disbursement
	Mailing Address P.O. Box 534	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City Pueblo State CO Zip Code 81002	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name	<input type="text" value="1500.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) JOHN SARBANES FOR CONGRESS	Transaction ID: SB23.153052 Date of Disbursement
	Mailing Address P.O. Box 6854	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City Baltimore State MD Zip Code 21285	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name	<input type="text" value="2000.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) KAPTUR FOR CONGRESS	Transaction ID: SB23.153040 Date of Disbursement
	Mailing Address P.O. Box 899	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City Toledo State OH Zip Code 43697	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name	<input type="text" value="1000.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 09	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

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 156 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) KAPTUR FOR CONGRESS	Transaction ID: SB23.153095 Date of Disbursement 03 / 29 / 2010
	Mailing Address P.O. Box 899	Amount of Each Disbursement this Period 1000.00
	City Toledo State OH Zip Code 43697	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 09	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) KEEP NICK RAHALL IN CONGRESS COMMITTEE	Transaction ID: SB23.153104 Date of Disbursement 03 / 29 / 2010
	Mailing Address P.O. Box 64	Amount of Each Disbursement this Period 3000.00
	City Beckley State WV Zip Code 25801-0000	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) KILDEE FOR CONGRESS	Transaction ID: SB23.153098 Date of Disbursement 03 / 29 / 2010
	Mailing Address P.O. Box 317	Amount of Each Disbursement this Period 1500.00
	City Flint State MI Zip Code 48501-0000	
	Purpose of Disbursement Contribution Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

5500.00

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 157 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
KILPATRICK FOR UNITED STATES CONGRESS

Transaction ID: SB23.153022

Date of Disbursement

Mailing Address P.O. Box 32175

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	0

City State Zip Code
Detroit MI 48232-0000

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: MI District: 13

B.

Full Name (Last, First, Middle Initial)
KLEIN FOR CONGRESS

Transaction ID: SB23.153015

Date of Disbursement

Mailing Address 21301 Powerline Road
Suite 204

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	1	0

City State Zip Code
Boca Raton FL 33433

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: FL District: 22

C.

Full Name (Last, First, Middle Initial)
KOSMAS FOR CONGRESS

Transaction ID: SB23.152996

Date of Disbursement

Mailing Address 920 3rd Avenue

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	0

City State Zip Code
New Smyrna Beach FL 32170

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: FL District: 24

SUBTOTAL of Disbursements This Page (optional) ►

6000.00

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 158 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
LAURA RICHARDSON FOR CONGRESS

Mailing Address 1212 S. Victory Blvd.

City Burbank State CA Zip Code 91502

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CA District: 37

Transaction ID: SB23.153079

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
LEAHY FOR U.S. SENATOR COMMITTEE

Mailing Address P.O. Box 1042

City Montpelier State VT Zip Code 05601

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: VT District: 00

Transaction ID: SB23.152961

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)
LENTZ FOR CONGRESS

Mailing Address P.O. Box 1846

City Media State PA Zip Code 19063

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: PA District: 07

Transaction ID: SB23.152975

Date of Disbursement

03 / 23 / 2010

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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 160 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

<p>A. Full Name (Last, First, Middle Initial) LORI EDWARDS CAMPAIGN COMMITTEE</p> <p>Mailing Address P.O. Box 280</p> <p>City Eagle Lake State FL Zip Code 33839</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 12</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.153064 Date of Disbursement 03 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) LOUISE SLAUGHTER RE-ELECTION COMMITTEE</p> <p>Mailing Address P.O. Box 730</p> <p>City Honeoye State NY Zip Code 14471</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 28</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.152999 Date of Disbursement 03 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) MALONEY FOR CONGRESS</p> <p>Mailing Address 24 East 93rd Street Suite 1B</p> <p>City New York State NY Zip Code 10128</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 14</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.153011 Date of Disbursement 03 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ►

9000.00

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 161 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) MARK CRITZ FOR CONGRESS	Transaction ID: SB23.153106 Date of Disbursement 03 / 30 / 2010	
	Mailing Address 657 Main Street Suite 110		
	City Johnstown State PA Zip Code 15901	Amount of Each Disbursement this Period 5000.00	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 12	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General	
B.	Full Name (Last, First, Middle Initial) MARKEY FOR CONGRESS	Transaction ID: SB23.152994 Date of Disbursement 03 / 26 / 2010	
	Mailing Address P.O. Box 1333		
	City Fort Collins State CO Zip Code 80522-1333	Amount of Each Disbursement this Period 2500.00	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) MATSUI FOR CONGRESS	Transaction ID: SB23.153026 Date of Disbursement 03 / 26 / 2010	
	Mailing Address 122 C Street NW Suite 505		
	City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

8500.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
MCCOLLUM FOR CONGRESS

Mailing Address P.O. Box 14131

City State Zip Code
Saint Paul MN 55114

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: MN District: 04

Transaction ID: SB23.153099
Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)
MEL WATT FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 36831

City State Zip Code
Charlotte NC 28236

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NC District: 12

Transaction ID: SB23.153038
Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
MICHAUD FOR CONGRESS

Mailing Address 213 Lisbon Street

City State Zip Code
Lewiston ME 04240

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: ME District: 02

Transaction ID: SB23.153045
Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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 163 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial) MOORE FOR CONGRESS <hr/> Mailing Address P.O. Box 16646 <hr/> City Milwaukee State WI Zip Code 53216 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 04 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153028 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 1 0	
	Amount of Each Disbursement this Period 1000.00	
	011 Category/ Type	
	Full Name (Last, First, Middle Initial) MOORE FOR CONGRESS <hr/> Mailing Address P.O. Box 16646 <hr/> City Milwaukee State WI Zip Code 53216 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 04 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153105 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 1 0
Amount of Each Disbursement this Period 2000.00		
011 Category/ Type	Full Name (Last, First, Middle Initial) NAPOLITANO FOR CONGRESS <hr/> Mailing Address 555 Capitol Mall Suite 1425 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 38 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153032 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 1 0
Amount of Each Disbursement this Period 1000.00		
011 Category/ Type		

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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 164 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)
NEW YORK JOBS PAC

Mailing Address P.O. Box 763

City State Zip Code
Deer Park NY 11729

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

PAC

Transaction ID: SB23.152947
Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)
NITA LOWEY FOR CONGRESS

Mailing Address P.O. Box 271

City State Zip Code
White Plains NY 10605

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 18

Transaction ID: SB23.153091
Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
NORM DICKS FOR CONGRESS

Mailing Address P.O. Box 1663

City State Zip Code
Tacoma WA 98401

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: WA District: 06

Transaction ID: SB23.153100
Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

5500.00

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 166 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial) PALLONE FOR CONGRESS <hr/> Mailing Address P.O. Box 3176 <hr/> City Long Branch State NJ Zip Code 07740 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153084 Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) PASCRELL FOR CONGRESS INC. <hr/> Mailing Address P.O. Box 640 <hr/> City Totowa State NJ Zip Code 07511 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 08 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153085 Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) PASTOR FOR ARIZONA COMMITTEE <hr/> Mailing Address P.O. Box 1978 <hr/> City Phoenix State AZ Zip Code 85001-1978 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 04 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153072 Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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 167 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
PATRICK MURPHY FOR CONGRESS

Mailing Address P.O. Box 868

City Levittown State PA Zip Code 19058-0868

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: PA District: 08

Transaction ID: SB23.153002

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
PATRICK MURPHY FOR CONGRESS

Mailing Address P.O. Box 868

City Levittown State PA Zip Code 19058-0868

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: PA District: 08

Transaction ID: SB23.153063

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

3000.00

C. Full Name (Last, First, Middle Initial)
PAULA BROOKS FOR CONGRESS

Mailing Address 550 E. Walnut Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: OH District: 12

Transaction ID: SB23.153065

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional) ►

11000.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial) PAUL TONKO FOR CONGRESS <hr/> Mailing Address 911 Central Avenue #221 <hr/> City Albany State NY Zip Code 12206-1350 <hr/> Purpose of Disbursement Contribution Candidate Name	Transaction ID: SB23.152987 Date of Disbursement 03 / 26 / 2010 <hr/> Amount of Each Disbursement this Period 2500.00
B. Full Name (Last, First, Middle Initial) PENNSYLVANIANS FOR KANJORSKI <hr/> Mailing Address 126 South Franklin Street <hr/> City Wilkes Barre State PA Zip Code 18701 <hr/> Purpose of Disbursement Contribution Candidate Name	Transaction ID: SB23.153049 Date of Disbursement 03 / 26 / 2010 <hr/> Amount of Each Disbursement this Period 1500.00
C. Full Name (Last, First, Middle Initial) PERLMUTTER FOR CONGRESS <hr/> Mailing Address 3440 Youngfield Street #264 <hr/> City Wheat Ridge State CO Zip Code 80033 <hr/> Purpose of Disbursement Contribution Candidate Name	Transaction ID: SB23.153062 Date of Disbursement 03 / 26 / 2010 <hr/> Amount of Each Disbursement this Period 3000.00

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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 169 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. PETE STARK RE-ELECTION COMMITTEE

Full Name (Last, First, Middle Initial)

PETE STARK RE-ELECTION COMMITTEE

Mailing Address P.O. Box 8331

City State Zip Code
Freemont CA 94537

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CA District: 13

Transaction ID: SB23.153029

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

B. PIKE FOR CONGRESS

Full Name (Last, First, Middle Initial)

PIKE FOR CONGRESS

Mailing Address P.O. Box 467

City State Zip Code
Ardmore PA 19003

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: PA District: 06

Transaction ID: SB23.152969

Date of Disbursement

03 / 23 / 2010

Amount of Each Disbursement this Period

2500.00

C. RAJ FOR CONGRESS

Full Name (Last, First, Middle Initial)

RAJ FOR CONGRESS

Mailing Address P.O. Box 780971

City State Zip Code
Wichita KS 67278

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: KS District: 04

Transaction ID: SB23.152971

Date of Disbursement

03 / 23 / 2010

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional) ►

6500.00

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 170 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. RE-ELECT CONGRESSMAN KUCINICH COMMITTEE

Full Name (Last, First, Middle Initial)

RE-ELECT CONGRESSMAN KUCINICH COMMITTEE

Mailing Address P.O. Box 110475

City Cleveland State OH Zip Code 44111

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: OH District: 10

Transaction ID: SB23.153058

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

2000.00

B. RICHARD NEAL FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

RICHARD NEAL FOR CONGRESS COMMITTEE

Mailing Address 76 Magnolia Terrace

City Springfield State MA Zip Code 01108

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: MA District: 02

Transaction ID: SB23.153035

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

C. ROB MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ROB MILLER FOR CONGRESS

Mailing Address 219 Scott's Street

City Beaufort State SC Zip Code 29902

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: SC District: 02

Transaction ID: SB23.152968

Date of Disbursement

03 / 23 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

4000.00

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 172 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) SCHIFF FOR CONGRESS Mailing Address 15 S. Raymond Avenue Suite 204 City Pasadena State CA Zip Code 91105 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 29 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153078 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 1 0 Amount of Each Disbursement this Period 1000.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) SCOTT FOR CONGRESS Mailing Address P.O. Box 251 City Newport News State VA Zip Code 23607 Purpose of Disbursement Contribution - voided ck from prior report Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 03 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153109 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 1 0 Amount of Each Disbursement this Period -1000.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) SCOTT MURPHY FOR CONGRESS Mailing Address 615 Glen Street City Glens Falls State NY Zip Code 12801 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153017 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 1 0 Amount of Each Disbursement this Period 2500.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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 173 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) SECURE PAC	Transaction ID: SB23.152942 Date of Disbursement
	Mailing Address P.O. Box 675	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City Bolton State MS Zip Code 39041	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name	<input type="text" value="2500.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: PAC	<input type="text" value="011"/> Category/Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) SHERMAN FOR CONGRESS	Transaction ID: SB23.153031 Date of Disbursement
	Mailing Address 4570 Van Nuys Blvd. #270	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City Sherman Oaks State CA Zip Code 91403	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name	<input type="text" value="1000.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 27	<input type="text" value="011"/> Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) SIREs FOR CONGRESS	Transaction ID: SB23.153039 Date of Disbursement
	Mailing Address P.O. Box 300	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City West New York State NJ Zip Code 07093	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name	<input type="text" value="1000.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	<input type="text" value="011"/> Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 174 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial) SNOWE FOR SENATE <hr/> Mailing Address P.O. Box 2012 <hr/> City Portland State ME Zip Code 04104 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 00 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.152959 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) SPRATT FOR CONGRESS COMMITTEE <hr/> Mailing Address P.O. Box 10986 <hr/> City Rock Hill State SC Zip Code 29731 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 05 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153050 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 1500.00
	011 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) STEVE ROTHMAN FOR NEW JERSEY INC. <hr/> Mailing Address P.O. Box 714 <hr/> City Hackensack State NJ Zip Code 07602 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 09 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.153086 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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 175 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) STUPAK FOR CONGRESS	Transaction ID: SB23.153053 Date of Disbursement
	Mailing Address P.O. Box 156	<input type="text" value="03"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Menominee State MI Zip Code 49858	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name	<input type="text" value="2000.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		011 Category/ Type

B.	Full Name (Last, First, Middle Initial) TAKING THE HILL PAC	Transaction ID: SB23.152932 Date of Disbursement
	Mailing Address 499 South Capitol Street SW Suite 404	<input type="text" value="03"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name	<input type="text" value="1000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
		PAC
		011 Category/ Type

C.	Full Name (Last, First, Middle Initial) TEXANS FOR HENRY CUELLAR CONGRESSIONAL CAMPAIGN	Transaction ID: SB23.153014 Date of Disbursement
	Mailing Address 1519 Washington Street Suite 200	<input type="text" value="03"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Laredo State TX Zip Code 78042	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name	<input type="text" value="2000.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 28	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		011 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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 176 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.	Full Name (Last, First, Middle Initial) THE COMMITTEE TO RE-ELECT CONGRESSMAN HANK JOHNSON	Transaction ID: SB23.153047 Date of Disbursement 03 / 26 / 2010	
	Mailing Address 6440 Old Hillandale Drive Suite 262		
	City Lithonia State GA Zip Code 30058	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) THE MESABI FUND	Transaction ID: SB23.152944 Date of Disbursement 03 / 26 / 2010	
	Mailing Address P.O. Box 7853		
	City Washington State DC Zip Code 20044-7853	Amount of Each Disbursement this Period 5000.00	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PAC	
C.	Full Name (Last, First, Middle Initial) THE NIKI TSONGAS COMMITTEE	Transaction ID: SB23.153103 Date of Disbursement 03 / 29 / 2010	
	Mailing Address P.O. Box 1454		
	City Lowell State MA Zip Code 01853	Amount of Each Disbursement this Period 3000.00	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

9000.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
TIM WALZ FOR US CONGRESS

Mailing Address P.O. Box 938

City Mankato State MN Zip Code 56002

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: MN District: 01

Transaction ID: SB23.152982
Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

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

Mailing Address P.O. Box 752

City Des Moines State IA Zip Code 50311

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District: PAC

Transaction ID: SB23.152950
Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
TOM WHITE FOR CONGRESS

Mailing Address P.O. Box 241555

City Omaha State NE Zip Code 68124-1555

Purpose of Disbursement Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NE District: 02

Transaction ID: SB23.152976
Date of Disbursement

03 / 23 / 2010

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional) ▶

9000.00

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 178 / 178

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)

WELCH FOR CONGRESS

Mailing Address P.O. Box 1086

City Montpelier State VT Zip Code 05601

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: VT District: 00

Transaction ID: SB23.153096

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

YARMUTH FOR CONGRESS

Mailing Address 1815 Brownsboro Road

City Louisville State KY Zip Code 40206

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: KY District: 03

Transaction ID: SB23.153034

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

379000.00