

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-Q37PEOPL

ADDRESS (number and street) PO BOX 2882
CHURCH STREET STATION
 Check if different than previously reported. (ACC)
NEW YORK NY 10008

2. **FEC IDENTIFICATION NUMBER** C00149211
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 08 01 2009 through 08 31 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Alvin Warshaviak

Signature of Treasurer Electronically Filed by Alvin Warshaviak Date 09 18 2009

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

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

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 8 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To:

| | |
|---|---|
| M | M |
| 0 | 8 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| | 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>0</td><td>9</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 9 | | 54656.50 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 9 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 50118.91 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 51786.34 | 405131.77 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 101905.25 | 459788.27 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 50118.91 | 408001.93 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 51786.34 | 51786.34 | | | | | | | | |
| 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

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

Report Covering the Period: From: To:

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A) | 1437.33 | 6676.99 |
| (ii) Unitemized | 50349.01 | 398454.78 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 51786.34 | 405131.77 |
| (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) | 51786.34 | 405131.77 |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 51786.34 | 405131.77 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 51786.34 | 405131.77 |

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..... | 0.00 | 0.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶ | 0.00 | 0.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | 50118.91 | 408001.93 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 0.00 |
| 24. Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 0.00 | 0.00 |
| 29. Other Disbursements..... | 0.00 | 0.00 |
| 30. Federal Election Activity (2 U.S.C 431(20)) | | |
| (a) Shared Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election 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)).. | 50118.91 | 408001.93 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 50118.91 | 408001.93 |

DETAILED SUMMARY PAGE
of Disbursements

| 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) | 51786.34 | 405131.77 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 51786.34 | 405131.77 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 0.00 | 0.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 0.00 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 / 13 |
| | <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)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

| | | | |
|---|---|---------------------------------------|---|
| A. | Full Name (Last, First, Middle Initial) Miriam Allen | | Date of Receipt |
| | Mailing Address 4322 Claredon Rd | | <input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/> |
| | City | State | Zip Code |
| | Brooklyn | NY | 11203 |
| FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> | Transaction ID: SA11AI.7798 |
| Name of Employer NYC Board of Higher Ed. State | | Occupation COLLEGE ADMIN 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 ▼ | <input type="text" value="57.69"/> |
| | | <input type="text" value="346.14"/> | Payroll Deduction |

| | | | |
|---|---|--|---|
| B. | Full Name (Last, First, Middle Initial) Judith Burger-Arroyo | | Date of Receipt |
| | Mailing Address 1056 E37th St | | <input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/> |
| | City | State | Zip Code |
| | Brooklyn | NY | 11210 |
| FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> | Transaction ID: SA11AI.7806 |
| Name of Employer District Council 37, AFSC-ME | | Occupation Grievance Rep, Local President | 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" value="200.00"/> |
| | | <input type="text" value="1700.00"/> | Payroll Deduction |

| | | | |
|---|---|-------------------------------------|---|
| C. | Full Name (Last, First, Middle Initial) Jason Canidate | | Date of Receipt |
| | Mailing Address 85 Tompkins Ave | | <input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/> |
| | City | State | Zip Code |
| | Brooklyn | NY | 11206 |
| FEC ID number of contributing federal political committee. | | <input type="text" value="C"/> | Transaction ID: SA11AI.7807 |
| Name of Employer NYC POLICE Dept. | | Occupation POLICE ADMIN 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 ▼ | <input type="text" value="30.00"/> |
| | | <input type="text" value="255.00"/> | Payroll Deduction |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="287.69"/> |
| 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 7 / 13 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

| | | |
|---|---|---|
| A. | Full Name (Last, First, Middle Initial) Oliver Gray | Date of Receipt MM / DD / YYYY 08 / 31 / 2009 |
| | Mailing Address 655 E. 14th Street | Transaction ID: SA11AI.7819 |
| | City State Zip Code New York NY 10009 | Amount of Each Receipt this Period 100.00 |
| | FEC ID number of contributing federal political committee. C | Payroll Deduction |
| Name of Employer District Council 37, AFSC-ME | Occupation Associate Director | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 700.00 | |

| | | |
|---|---|---|
| B. | Full Name (Last, First, Middle Initial) Barbara Ingram-Edmonds | Date of Receipt MM / DD / YYYY 08 / 31 / 2009 |
| | Mailing Address 34 douth Mill Rd | Transaction ID: SA11AI.7823 |
| | City State Zip Code West Winsor NJ 08550 | Amount of Each Receipt this Period 100.00 |
| | FEC ID number of contributing federal political committee. C | Payroll Deduction |
| Name of Employer District Council 37, AFSC-ME | Occupation Director of Field Operators | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 700.00 | |

| | | |
|---|---|---|
| C. | Full Name (Last, First, Middle Initial) Clifford Koppelman | Date of Receipt MM / DD / YYYY 08 / 31 / 2009 |
| | Mailing Address 1270 E 19 Street, #1J | Transaction ID: SA11AI.7828 |
| | City State Zip Code Brooklyn NY 11230 | Amount of Each Receipt this Period 50.00 |
| | FEC ID number of contributing federal political committee. C | Payroll Deduction |
| Name of Employer District Council 37, AFSC-ME | Occupation Grievance Representative | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 350.00 | |

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 250.00 |
| 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 8 / 13 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

| | | | | | |
|-----------|---|------------------------------------|---|---|--|
| A. | Full Name (Last, First, Middle Initial) Peter Leon | | Date of Receipt MM / DD / YYYY 08 / 31 / 2009 | | |
| | Mailing Address 183-55 Babylon Ave. | | Transaction ID: SA11AI.7831 | | |
| | City St. Albans | State NY | Zip Code 11412 | Amount of Each Receipt this Period 35.00 | |
| | FEC ID number of contributing federal political committee. C | | Payroll Deduction | | |
| | Name of Employer Local 420 AFSCME, AFI-CIO | Occupation Treasurer, Local 420 | Aggregate Year-to-Date 230.00 | | |

| | | | | | |
|-----------|---|-----------------------------------|---|---|--|
| B. | Full Name (Last, First, Middle Initial) Edwin Negron | | Date of Receipt MM / DD / YYYY 08 / 31 / 2009 | | |
| | Mailing Address 80 East 110th St | | Transaction ID: SA11AI.7835 | | |
| | City New York | State NY | Zip Code 10029 | Amount of Each Receipt this Period 50.00 | |
| | FEC ID number of contributing federal political committee. C | | Payroll Deduction | | |
| | Name of Employer City of New York Admin Service | Occupation CITY CUSTODIAL ASST | Aggregate Year-to-Date 425.00 | | |

| | | | | | |
|-----------|---|-----------------------------------|---|---|--|
| C. | Full Name (Last, First, Middle Initial) Ralph Pepe | | Date of Receipt MM / DD / YYYY 08 / 31 / 2009 | | |
| | Mailing Address 125 E.17th Street | | Transaction ID: SA11AI.7836 | | |
| | City New York | State NY | Zip Code 10003 | Amount of Each Receipt this Period 50.00 | |
| | FEC ID number of contributing federal political committee. C | | Payroll Deduction | | |
| | Name of Employer District Council 37, AFSCME | Occupation Real Estate Manager | Aggregate Year-to-Date 235.00 | | |

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 135.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 / 13 |
| | <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 | |

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NAME OF COMMITTEE (In Full)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

| | | | | | |
|---|---|--|---|---|--|
| A. | Full Name (Last, First, Middle Initial) Deborah Pitts | | Date of Receipt MM / DD / YYYY 08 / 31 / 2009 | | |
| | Mailing Address 4286 Conashaugh Lks | | Transaction ID: SA11AI.7838 | | |
| | City Milford | State PA | Zip Code 18337 | Amount of Each Receipt this Period 30.00 | |
| | FEC ID number of contributing federal political committee. C | | Payroll Deduction | | |
| | Name of Employer District Council 37, AFSC-ME | Occupation Grievance Representative | Aggregate Year-to-Date 220.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | |

| | | | | | |
|---|---|--|---|---|--|
| B. | Full Name (Last, First, Middle Initial) Walthene Primus | | Date of Receipt MM / DD / YYYY 08 / 31 / 2009 | | |
| | Mailing Address 137-29 Bedell Street | | Transaction ID: SA11AI.7840 | | |
| | City Springfield Grdns | State NY | Zip Code 11413 | Amount of Each Receipt this Period 60.00 | |
| | FEC ID number of contributing federal political committee. C | | Payroll Deduction | | |
| | Name of Employer District Council 37, AFSC-ME | Occupation Grievance Representative | Aggregate Year-to-Date 360.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | |

| | | | | | |
|---|---|----------------------------------|---|--|--|
| C. | Full Name (Last, First, Middle Initial) Lillian Roberts | | Date of Receipt MM / DD / YYYY 08 / 31 / 2009 | | |
| | Mailing Address 2373 Broadway | | Transaction ID: SA11AI.7844 | | |
| | City New York | State NY | Zip Code 10024 | Amount of Each Receipt this Period 275.00 | |
| | FEC ID number of contributing federal political committee. C | | Payroll Deduction | | |
| | Name of Employer District Council 37, AFSC-ME | Occupation Executive Director | Aggregate Year-to-Date 1925.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | |

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 365.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 13
(check only one)

| | | | |
|---|------------------------------|------------------------------|---|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.

Full Name (Last, First, Middle Initial)
Paulette Sher

Mailing Address 381 Edgegrove Avenue

City State Zip Code
Staten Island NY 10312

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

Name of Employer Occupation
NYC Off Track Betting Betting Clerk

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 31 / 2009

Transaction ID: SA11AI.7846

Amount of Each Receipt this Period
60.00

Payroll Deduction

B.

Full Name (Last, First, Middle Initial)
Jose Sierra

Mailing Address 130 South Highland

City State Zip Code
Ossining NY 10562

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

Name of Employer Occupation
District Council 37, AFSC-ME Division Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 31 / 2009

Transaction ID: SA11AI.7847

Amount of Each Receipt this Period
50.00

Payroll Deduction

C.

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

Mailing Address 23 Water Grant St

City State Zip Code
Yonkers NY 10701

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 357.84

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 31 / 2009

Transaction ID: SA11AI.7850

Amount of Each Receipt this Period
59.64

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► **169.64**

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 11 / 13 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

| | | | |
|---|--|---|---|
| A. | Full Name (Last, First, Middle Initial) Dennis Sullivan | | Date of Receipt MM / DD / YYYY 08 / 31 / 2009 |
| | Mailing Address 94 Buckingham Rd. | | Transaction ID: SA11AI.7851 |
| | City Yonkers | State NY | Zip Code 10701 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50.00 |
| | Name of Employer District Council 37, AFSC-ME | Occupation Director of Research and Negotiations | Payroll Deduction |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 350.00 | |

| | | | |
|---|--|------------------------------------|---|
| B. | Full Name (Last, First, Middle Initial) Carol Thomas | | Date of Receipt MM / DD / YYYY 08 / 31 / 2009 |
| | Mailing Address PO Box 618 Old Chelsea Sta | | Transaction ID: SA11AI.7852 |
| | City NY | State NY | Zip Code 10113 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 60.00 |
| | Name of Employer District Council 37, AFSC-ME | Occupation Grievance Rep. | Payroll Deduction |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 360.00 | |

| | | | |
|---|--|--|---|
| C. | Full Name (Last, First, Middle Initial) James Tucciarelli | | Date of Receipt MM / DD / YYYY 08 / 31 / 2009 |
| | Mailing Address 361 Mill Rd. | | Transaction ID: SA11AI.7856 |
| | City Staten Island | State NY | Zip Code 10306 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50.00 |
| | Name of Employer District Council 37, AFSC-ME | Occupation Grievance Representative | Payroll Deduction |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 350.00 | |

| | | |
|--|---|--------|
| 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 12 / 13
(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)
 DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (D-C37PEOPL

A.

Full Name (Last, First, Middle Initial)
Barbara Watkins

Mailing Address 294 Osborn St

City State Zip Code
Brooklyn NY 11212

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

Name of Employer
NYC ADMINISTRATIVE SERVICES

Occupation
CITY CUSTODIAL ASST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 31 / 2009

Transaction ID: SA11AI.7861

Amount of Each Receipt this Period
30.00

Payroll Deduction

B.

Full Name (Last, First, Middle Initial)
Mercedes Youman

Mailing Address 345 E 93rd St
16h

City State Zip Code
NY NY 10128

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

Name of Employer
NYC Health Dept.

Occupation
Public Health Nurse

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 31 / 2009

Transaction ID: SA11AI.7866

Amount of Each Receipt this Period
40.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► **70.00**

TOTAL This Period (last page this line number only) ► **1437.33**

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

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 13

| | | | | | |
|------------------------------|--|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input checked="" type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - PEOPLE, QUALIFIED

Mailing Address 1625 L STREET NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
Transfer

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB22.7870

Date of Disbursement

08 / 18 / 2009

Amount of Each Disbursement this Period

50118.91

SUBTOTAL of Disbursements This Page (optional)

50118.91

TOTAL This Period (last page this line number only)

50118.91