

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

ADDRESS (number and street) 125 Barclay Street Check if different than previously reported. (ACC) NEW YORK NY 10007

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00149211 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

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 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / Y Y Y Y Y Y in the State of (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 10 / 01 / 2017 through 10 / 31 / 2017

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

Type or Print Name of Treasurer

Signature of Treasurer Uddin, Maf, , , [Electronically Filed] Date 11 / 20 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

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

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		177253.16
(b) Cash on Hand at Beginning of Reporting Period.....	61222.65	
(c) Total Receipts (from Line 19)	58504.04	662146.30
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	119726.69	839399.46
7. Total Disbursements (from Line 31).....	61222.65	780895.42
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	58504.04	58504.04
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 (DC37PEOPLE)

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A).....	58025.94	76631.17
(ii) Unitemized	478.10	585515.13
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	58504.04	662146.30
(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)	58504.04	662146.30
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	58504.04	662146.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	58504.04	662146.30

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	61222.65	780895.42
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	61222.65	780895.42
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	61222.65	780895.42

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)	58504.04	662146.30
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	58504.04	662146.30
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 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Adams, Darryl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 70 Hillside Ave

City Freeport	State NY	Zip Code 11520
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DC37	Occupation (for Individual) Grievance Rep
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2017

Transaction ID : SA11AI.18093

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll Deduction

B. Adams, Jackie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 870 Riverdale Dr. #5a

City New York	State NY	Zip Code 10032
------------------	-------------	-------------------

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

Name of Employer (for Individual) DC 37	Occupation (for Individual) President of Local 299
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2017

Transaction ID : SA11AI.18094

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll Deduction

C. Akyenpong, Michelle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 115 Pond Way

City staten island	State NY	Zip Code 10303
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SSEU Local 371	Occupation (for Individual) Grievance Rep
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 462.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2017

Transaction ID : SA11AI.18096

Amount of Each Receipt this Period
 44.00

Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	84.00
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 7 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

A. Allen, Miriam, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4322 Claredon Rd
 City Brooklyn State NY Zip Code 11203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC Board of Higher Ed. State Occupation (for Individual) COLLEGE ADMIN ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.06

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18097
 Amount of Each Receipt this Period 38.46
 Memo Item
 Payroll Deduction

B. Bankhead, Sharon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1065 Dr.M.L.K. Jr. Blvd
 City Bronx State NY Zip Code 10452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) District Council 37 Occupation (for Individual) Council Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18099
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction

C. Barcant, Lorraine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4720 Cemer Blvd apt 1410
 City LIC State NY Zip Code 11109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC SCA Occupation (for Individual) Technical Inspector
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18100
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	108.46
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: (check only one)	PAGE 8 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Benjamin, Peggy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 545 w 126th st
 City NY State NY Zip Code 10027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) District Council 37, AFSCME Occupation (for Individual) Grievance Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18101
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction

B. Brown, Annette, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 Polar Rd
 City amityville State NY Zip Code 11701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC Transit Auth Occupation (for Individual) TA railcar tech -4
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18104
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction

C. Bruni, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 Brighton 3rd rd
 City Brooklyn State NY Zip Code 11235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC Department of Protection Occupation (for Individual) Construction Laborer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18105
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Burger-Arroyo, Judith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1056 E37th St
 City Brooklyn State NY Zip Code 11210
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) District Council 37, AFSCME Occupation (for Individual) Grievance Rep, Local President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2530.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18106
 Amount of Each Receipt this Period 230.00
 Memo Item
 Payroll Deduction

B. Caicedo, Carlos, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 593 Oak Terrace apt 3E
 City Bronx State NY Zip Code 10454
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NYC HHC Occupation (for Individual) Service Aide
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18107
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

C. Camero, Felix, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1175 Gerard Ave
 City Bronx State NY Zip Code 10452
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Dept of Social Services Occupation (for Individual) Eligibility specialist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18108
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	270.00
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 10 OF 34
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Casey, Cora, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49-57 Crown Street
 City Brooklyn State NY Zip Code 11221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC Housing Authority Occupation (for Individual) Secretary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18109
 Amount of Each Receipt this Period 24.00
 Memo Item

B. Charles, Carmen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 681 Palisade Ave
 City Teaneck State NJ Zip Code 07666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) District Council 37, AFSCME Occupation (for Individual) Local President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18111
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction

C. Crosland, Valerie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 684 Willoughby Ave. apt3
 City Brooklyn State NY Zip Code 11206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC Police Department Occupation (for Individual) Police Communication tech
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18113
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶ 69.00
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 11 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Custance, Thomas, , ,			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>31</td> <td></td> <td>2017</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		31		2017
M M M	/	D D D	/	Y Y Y Y Y Y									
10		31		2017									
Mailing Address 150-49a 20th Ave			Transaction ID : SA11Al.18114										
City Whitestone	State NY	Zip Code 11357	Amount of Each Receipt this Period <table border="1"> <tr> <td>25.00</td> </tr> </table>	25.00									
25.00													
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item <input type="checkbox"/> Payroll Deduction										
Name of Employer (for Individual) District Council 37, AFSCME		Occupation (for Individual) Grievance Rep											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>220.00</td> </tr> </table>	220.00										
220.00													

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Dean, Gary, , ,			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>31</td> <td></td> <td>2017</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		31		2017
M M M	/	D D D	/	Y Y Y Y Y Y									
10		31		2017									
Mailing Address 35 Gainsville Dr			Transaction ID : SA11Al.18117										
City Plainview	State NY	Zip Code 11803	Amount of Each Receipt this Period <table border="1"> <tr> <td>20.00</td> </tr> </table>	20.00									
20.00													
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item <input type="checkbox"/> Payroll Deduction										
Name of Employer (for Individual) DC37		Occupation (for Individual) H&S Staff											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>215.00</td> </tr> </table>	215.00										
215.00													

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Dechinea, Aggrey, , ,			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>31</td> <td></td> <td>2017</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		31		2017
M M M	/	D D D	/	Y Y Y Y Y Y									
10		31		2017									
Mailing Address 187-25 Keefeveille Ave			Transaction ID : SA11Al.18118										
City St Albans	State NY	Zip Code 11412	Amount of Each Receipt this Period <table border="1"> <tr> <td>20.00</td> </tr> </table>	20.00									
20.00													
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item <input type="checkbox"/> Payroll Deduction										
Name of Employer (for Individual) SSEU		Occupation (for Individual) Local 371staff											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>210.00</td> </tr> </table>	210.00										
210.00													

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1"> <tr> <td>65.00</td> </tr> </table>	65.00
65.00		
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: (check only one)	PAGE 12 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Dellavalle, Alfred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 Baldwin Drive
 City W Hempstead State NY Zip Code 11552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC dept of Social Services Occupation (for Individual) City Laborer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11Al.18119
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

B. DeMarco, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 83 Ramblewood Ave
 City Staten Island State NY Zip Code 10308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) District Council 37, AFSCME Occupation (for Individual) Grievance Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11Al.18120
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

C. Dickerson, Cuthbert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1969 Benedict Ave
 City Bronx State NY Zip Code 10462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) District Council 37 Occupation (for Individual) Grievance Rep
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11Al.18121
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. DISTRICT COUNCIL 37

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 2882 CHURCH STREET STATION
CHURCH STREET STATION

City NEW YORK State NY Zip Code 10007

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
618723.75

Date of Receipt
10 / 31 / 2017
Transaction ID : SA11AI.18207

Amount of Each Receipt this Period
54158.62

Memo Item

B. Dolan, Moira, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 711 Amsterdam Ave
#22L

City New York State NY Zip Code 10025

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt
10 / 31 / 2017
Transaction ID : SA11AI.18122

Amount of Each Receipt this Period
50.00

Memo Item
Payroll Deduction

C. Elias, Alexander, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28 Jennifer lande

City staten island State NY Zip Code 10306

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

Name of Employer (for Individual) Occupation (for Individual)
DC37 Staff council rep

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
423.28

Date of Receipt
10 / 31 / 2017
Transaction ID : SA11AI.18123

Amount of Each Receipt this Period
48.10

Memo Item
Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 54256.72

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: (check only one)	PAGE 14 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Fontano, Gennaro, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3731 Sandra Court
 City Wantagh State NY Zip Code 11793
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) City of NY- health dept. Occupation (for Individual) City Laborer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18124
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction

B. Frederick, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1730 Carroll st. apt a2
 City brooklyn State NY Zip Code 11213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) nyc dept of health Occupation (for Individual) public health adv
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18125
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

C. Garrido, Henry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 91 Gotham Ave
 City Elmont State NY Zip Code 11003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) District Council 37 Occupation (for Individual) Asst Assoc Director of DC37
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18127
 Amount of Each Receipt this Period 125.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00
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 15 OF 34
	(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"/> 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 (DC37PEOPLE)

A. Gray, Oliver, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 655 E. 14th Street

City New York	State NY	Zip Code 10009
------------------	-------------	-------------------

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

Name of Employer (for Individual) District Council 37, AFSCME	Occupation (for Individual) Associate Director
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 880.00

Date of Receipt
 10 / 31 / 2017
Transaction ID : SA11AI.18130

Amount of Each Receipt this Period
 100.00

Memo Item
 Payroll Deduction

B. Harris-Martinez, Keenya, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 810 henderson ave

City SI	State NY	Zip Code 10310
------------	-------------	-------------------

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

Name of Employer (for Individual) NYC empl retiremnt system	Occupation (for Individual) custom rep
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 10 / 31 / 2017
Transaction ID : SA11AI.18131

Amount of Each Receipt this Period
 40.00

Memo Item
 Payroll Deduction

C. Hemingway, Tyler, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 Sun glow Terrace

City Middletown	State NY	Zip Code 10941
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) District Council 37	Occupation (for Individual) Asst Division Director - Hosp.
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 440.00

Date of Receipt
 10 / 31 / 2017
Transaction ID : SA11AI.18133

Amount of Each Receipt this Period
 50.00

Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	190.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

A. Hernandez, Yolanda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 415 E 115th Street
 City NY State NY Zip Code 10029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HPD Occupation (for Individual) community coordinator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18135
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

B. Hooks, Teresa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9802 springfield blvd.
 City queen village State NY Zip Code 11428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bd. of Education Occupation (for Individual) community assoc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18136
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

C. Hyslop, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 Terrace Place
 City Brooklyn State NY Zip Code 11218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) District Council 37 Occupation (for Individual) Local President/Rep
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 6600.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18137
 Amount of Each Receipt this Period 750.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	790.00
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 17 OF 34
(check only one)

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

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

A. Iffill, Dennis, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 257-37 149th Ave

City Rosedale	State NY	Zip Code 11422
------------------	-------------	-------------------

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

Name of Employer (for Individual) City of NY-Rent & Rehab Adm	Occupation (for Individual) Local President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
10 / 31 / 2017
Transaction ID : SA11AI.18138

Amount of Each Receipt this Period
40.00

Memo Item
 Payroll Deduction

B. Ingram-Edmonds, Barbara, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 34 douth Mill Rd

City West Winsor	State NJ	Zip Code 08550
---------------------	-------------	-------------------

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

Name of Employer (for Individual) District Council 37, AFSCME	Occupation (for Individual) Director of Field Operators
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
880.00

Date of Receipt
10 / 31 / 2017
Transaction ID : SA11AI.18139

Amount of Each Receipt this Period
100.00

Memo Item
 Payroll Deduction

C. John, Jeremy, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 861 Elda Lane

City Westbury	State NY	Zip Code 11590
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DC 37	Occupation (for Individual) Director of PAL
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
440.00

Date of Receipt
10 / 31 / 2017
Transaction ID : SA11AI.18140

Amount of Each Receipt this Period
50.00

Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	190.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Johnson, Gerald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 Albermarle Rd
 City Brooklyn State NY Zip Code 11226
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) DC 37 Occupation (for Individual) Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11Al.18141
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

B. Johnson, Stephen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 87-24 115th street
 City richmond hill State NY Zip Code 11418
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) DC37 ED fund Occupation (for Individual) Education Dept staff
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11Al.18142
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

C. Joseph, Jahmila, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 626 Lincoln Place apt 1D
 City Brooklyn State NY Zip Code 11216
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) District Council 37 Occupation (for Individual) Assitant Associate Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11Al.18143
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶ 90.00
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 19 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Kadlub, amy, , ,			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>31</td> <td></td> <td>2017</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		31		2017
M M M	/	D D D	/	Y Y Y Y Y Y									
10		31		2017									
Mailing Address 115 Douglas Rd			Transaction ID : SA11Al.18144										
City SI	State NY	Zip Code 10304	Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table>	50.00									
50.00													
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>											
Name of Employer (for Individual) District Council 37, AFSCME		Payroll Deduction <input type="checkbox"/>											
Occupation (for Individual) HR Director													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>440.00</td> </tr> </table>		440.00									
440.00													

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Knight, Madonna, , ,			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>31</td> <td></td> <td>2017</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		31		2017
M M M	/	D D D	/	Y Y Y Y Y Y									
10		31		2017									
Mailing Address 282 E 35th Street			Transaction ID : SA11Al.18145										
City Brooklyn	State NY	Zip Code 11203	Amount of Each Receipt this Period <table border="1"> <tr> <td>25.00</td> </tr> </table>	25.00									
25.00													
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>											
Name of Employer (for Individual) District Council 37, AFSCME		Payroll Deduction <input type="checkbox"/>											
Occupation (for Individual) Council Representative													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>220.00</td> </tr> </table>		220.00									
220.00													

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Kurun, Sabri, , ,			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>31</td> <td></td> <td>2017</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		31		2017
M M M	/	D D D	/	Y Y Y Y Y Y									
10		31		2017									
Mailing Address 1134 William Court			Transaction ID : SA11Al.18146										
City Brooklyn	State NY	Zip Code 11235	Amount of Each Receipt this Period <table border="1"> <tr> <td>25.00</td> </tr> </table>	25.00									
25.00													
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>											
Name of Employer (for Individual) District Council 37		Payroll Deduction <input type="checkbox"/>											
Occupation (for Individual) IT Programmer													
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>240.00</td> </tr> </table>		240.00									
240.00													

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1"> <tr> <td>100.00</td> </tr> </table>	100.00
100.00		
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: (check only one)	PAGE 20 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Lawrence, Eugene, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2017
Mailing Address 2760 Grand Concourse Apt 1B			Transaction ID : SA11Al.18147
City Bronx	State NY	Zip Code 10458	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item <input type="checkbox"/> Payroll Deduction
Name of Employer (for Individual) NYC Parks & Recreation Admin		Occupation (for Individual) Associate Park Service Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lovagelio-Miller, Rose, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2017
Mailing Address 3001 TIEMANN AVENUE			Transaction ID : SA11Al.18150
City BRONX	State NY	Zip Code 10469	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item <input type="checkbox"/> Payroll Deduction
Name of Employer (for Individual) DC37		Occupation (for Individual) Council Rep.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Matthews, Zachary, , ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2017
Mailing Address 464 Clinton Ave.			Transaction ID : SA11Al.18152
City Brooklyn	State NY	Zip Code 11238	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item <input type="checkbox"/> Payroll Deduction
Name of Employer (for Individual) NYC Dept of Transportation Adm		Occupation (for Individual) City Laborer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 220.00		

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 21 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. McCaskey, Cory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1235 Woodycrest Ave
 City Bronx State NY Zip Code 10452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC HHC Occupation (for Individual) Patient Care Assoc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11Al.18153
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction

B. Medina, Belinda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2205 2nd Ave
 City New York State NY Zip Code 10029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC Health & Hospital Corp Occupation (for Individual) Rehabilitation Tech
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 313.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11Al.18154
 Amount of Each Receipt this Period 33.00
 Memo Item
 Payroll Deduction

C. Miller, Terrence, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 417 Prospect Pl
 City Brooklyn State NY Zip Code 11238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC Police Department Occupation (for Individual) Senior Police Admin. Aide
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11Al.18156
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	78.00
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 22 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Milton, Iven, , , Jr.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 253 5th Ave.

City New Rochelle	State NY	Zip Code 10801
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NYC Fire Dept	Occupation (for Individual) Fire Protection Insp
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2017

Transaction ID : SA11AI.18157

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll Deduction

B. Murphy, Doris, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 725 FDR drive
10g

City New York	State NY	Zip Code 10009
------------------	-------------	-------------------

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

Name of Employer (for Individual) Local 371 SSEU	Occupation (for Individual) Case worker
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2017

Transaction ID : SA11AI.18158

Amount of Each Receipt this Period
 20.00

Memo Item
 Payroll Deduction

C. Negrón, Edwin, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 80 East 110th St

City New York	State NY	Zip Code 10029
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) City of New York Admin Service	Occupation (for Individual) CITY CUSTODIAL ASST
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2017

Transaction ID : SA11AI.18159

Amount of Each Receipt this Period
 50.00

Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 23 OF 34
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

A. Ortiz, Miguel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108-18 Ditmars blvd
 City E. Elmhurst State NY Zip Code 11369
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NYC HHC Occupation (for Individual) Dietary aide
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 220.00

Date of Receipt 10 / 31 / 2017
 Transaction ID : SA11AI.18160
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

B. Pennie, Edna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1295 5th Ave apt 11C
 City New York State NY Zip Code 10029
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NYC DEP Occupation (for Individual) Clerical Associate
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 220.00

Date of Receipt 10 / 31 / 2017
 Transaction ID : SA11AI.18163
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

C. Pennix, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 3rd Street
 City Edison State NJ Zip Code 08837
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) DC 37 Occupation (for Individual) IT Manager
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 266.00

Date of Receipt 10 / 31 / 2017
 Transaction ID : SA11AI.18164
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... 90.00
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 24 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

A. Perez, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 83-87C Woodhaven Blvd
 APT 2

City WOODHAVEN State NY Zip Code 11421

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

Name of Employer (for Individual) Health & Hospital Corp (HHC) Occupation (for Individual) HOUSEKEEPING AIDE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18165

Amount of Each Receipt this Period 30.00

Memo Item
 Payroll Deduction

B. Perry, Joseph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 105-23 132nd st.

City s. richmond hill State NY Zip Code 11419

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

Name of Employer (for Individual) NYS board of higher ed Occupation (for Individual) city Laborer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18166

Amount of Each Receipt this Period 20.00

Memo Item
 Payroll Deduction

C. Pitts, Deborah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4286 Conashaugh Lks

City Milford State PA Zip Code 18337

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

Name of Employer (for Individual) District Council 37, AFSCME Occupation (for Individual) Grievance Representative

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18205

Amount of Each Receipt this Period 30.00

Memo Item
 Payroll Deduction

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

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

80.00

**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 25 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Policano, Christopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 340 Haven Ave.
 apt 6f

City New York State NY Zip Code 10033

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

Name of Employer (for Individual) DC 37 Occupation (for Individual) Director Comm.Dept.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 10 / 31 / 2017
Transaction ID : SA11AI.18167

Amount of Each Receipt this Period
 125.00

Memo Item
 Payroll Deduction

B. Powers, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 BRAKEMAN COURT

City HIGHTSTOWN State NJ Zip Code 08520

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

Name of Employer (for Individual) Board of Education (BOE) Occupation (for Individual) CITY LABORER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 440.00

Date of Receipt
 10 / 31 / 2017
Transaction ID : SA11AI.18169

Amount of Each Receipt this Period
 40.00

Memo Item
 Payroll Deduction

C. Pyle, Terence, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1067 Eastern Pkwy
 1d

City Brooklyn State NY Zip Code 11213

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

Name of Employer (for Individual) DC37 Occupation (for Individual) Local 420 Staff

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 10 / 31 / 2017
Transaction ID : SA11AI.18170

Amount of Each Receipt this Period
 25.00

Memo Item
 Payroll Deduction

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

A. Roach, Robin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135-25 Hoover Ave
 City Kew Gardens State NY Zip Code 11435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DC 37 Occupation (for Individual) General Counsel/Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 880.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18172
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction

B. Rodriquez, Edward, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 Mountain View Dr
 City Thiells State NY Zip Code 10984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) District Council 37 Local 1549 Occupation (for Individual) President Local 1549
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18174
 Amount of Each Receipt this Period 100.00
 Memo Item
 Payroll Deduction

C. Roper, Alma, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 115-24 165th Street
 City Jamaica State NY Zip Code 11434
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) district Council 37 Occupation (for Individual) Representative
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18175
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	220.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 34
	<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 (DC37PEOPLE)

A. Sabater, Kathleen, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1566 Macombs Rd
 City Bronx State NY Zip Code 10452
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Dept. of Social Services Occupation (for Individual) Case Workers
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 220.00

Date of Receipt 10 / 31 / 2017
 Transaction ID : SA11Al.18176
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

B. Simmons, Kyle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1114 Knollwood Drive
 City Tobyhanna State PA Zip Code 18466
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) District Council 37, AFSCME Occupation (for Individual) Grievance Representative
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 440.00

Date of Receipt 10 / 31 / 2017
 Transaction ID : SA11Al.18178
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction

C. Smith, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O.BOX 199
 City BRONX State NY Zip Code 10451
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) City University of New York Occupation (for Individual) City Custodial Asst.
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 220.00

Date of Receipt 10 / 31 / 2017
 Transaction ID : SA11Al.18179
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... 80.00
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 28 OF 34
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Stein, Peter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 766 Broadway
 City Woodmere State NY Zip Code 15598
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) DC37 Occupation (for Individual) President local 508
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18181
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

B. Stevens, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 Water Grant St
 City Yonkers State NY Zip Code 10701
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Board of Higher Ed. State Occupation (for Individual) INFO TECH SR. ASSOCIATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 437.36

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18182
 Amount of Each Receipt this Period 39.76
 Memo Item
 Payroll Deduction

C. Sykes, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 90 SCHENCK AVENUE APT.1A
 City GREAT NECK State NY Zip Code 11021
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) DC37 Occupation (for Individual) DC 37 COUNCIL STAFF EMP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18184
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	109.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Terrelonge, Barbra, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 Hull Street
 City Brooklyn State NY Zip Code 11233
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) District Council 37 Occupation (for Individual) Asst Director Research Dept.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 31 / 2017
 Transaction ID : SA11AI.18185
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction

B. Trester, Michele, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9952 66th Road apt 9k
 City Queens State NY Zip Code 11374
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) DC 37 Occupation (for Individual) Asst Dir Research dept.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
 Transaction ID : SA11AI.18186
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction

C. Tucciarelli, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 361 Mill Rd.
 City Staten Island State NY Zip Code 10306
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) District Council 37, AFSCME Occupation (for Individual) Grievance Representative
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 31 / 2017
 Transaction ID : SA11AI.18187
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll Deduction

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

A. Tucker, Esther, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 934 Lincoln Station
 City New York State NY Zip Code 10037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) District Council 37, AFSCME Occupation (for Individual) Grievance Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18188
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

B. Uddin, Maf, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 161-17 85th Ave
 City Jamiaca Hills State NY Zip Code 11432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) District Council 37, AFSCME Occupation (for Individual) Treasurer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18189
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll Deduction

C. Vasquez, Cesar, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 969
 City New York State NY Zip Code 10029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NYC Board of Education Occupation (for Individual) Community Associate
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18191
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	65.00
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 31 OF 34
	(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

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

A. Velasquez, Martin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 96 Wenlock Street

City Staten Island	State NY	Zip Code 10303
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NY State Board of Higher Educa	Occupation (for Individual) City Laborer
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 330.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2017

Transaction ID : SA11AI.18192

Amount of Each Receipt this Period
 30.00

Memo Item
 Payroll Deduction

B. Washington, Leon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 744 Vermont Street

City Brooklyn	State NY	Zip Code 11207
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) kingsboro comm, college	Occupation (for Individual) City Laborer
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2017

Transaction ID : SA11AI.18195

Amount of Each Receipt this Period
 40.00

Memo Item
 Payroll Deduction

C. Watkins, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 294 Osborn St

City Brooklyn	State NY	Zip Code 11212
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NYC ADMINISTRATIVE SERVICES	Occupation (for Individual) CITY CUSTODIAL ASST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 440.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2017

Transaction ID : SA11AI.18196

Amount of Each Receipt this Period
 40.00

Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 OF 34
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Whatley, Cheryl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1199 E 53rd Street
 apt 3f

City Brooklyn State NY Zip Code 11234

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

Name of Employer (for Individual) NYC Dept of Health Occupation (for Individual) Jr Public Health Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18198

Amount of Each Receipt this Period 40.00

Memo Item
 Payroll Deduction

B. Wilgenkamp, Chris, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2415 wolson Ave

City Bronx State NY Zip Code 10469

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

Name of Employer (for Individual) District Council 37, AFSCME Occupation (for Individual) Asst Divison Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18199

Amount of Each Receipt this Period 25.00

Memo Item
 Payroll Deduction

C. Williams, Wanda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 Roy Lane

City Highland State NY Zip Code 12528

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

Name of Employer (for Individual) District Council 37, AFSCME Occupation (for Individual) Director of Political Action & Legisla

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2017
Transaction ID : SA11AI.18200

Amount of Each Receipt this Period 25.00

Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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 33 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Youman, Mercedes, , ,

Mailing Address 345 E 93rd St
 16h

City NY State NY Zip Code 10128

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

Name of Employer (for Individual) NYC Health Dept. Occupation (for Individual) Public Health Nurse

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2017

Transaction ID : SA11AL18201

Amount of Each Receipt this Period
 100.00

Memo Item
 Payroll Deduction

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	58025.94

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED

Mailing Address 1625 L STREET NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement Transfer

Candidate Name

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

Date of Disbursement: 10 / 25 / 2017

FEC Identification Number: C C00011114
Transaction ID : SB22.18208
Amount of Each Disbursement this Period: 61222.65

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	61222.65
TOTAL This Period (last page this line number only).....▶	61222.65