

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

Nov 26 1 08 PM '93

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (Print)
Arthur Tibaldi
DC 37 AFSCME, PEOPLE
P.O. BOX 2882
Church Street Station
New York, NY 10008

(has previously reported)

2. FEC IDENTIFICATION NUMBER
C 00149211

3. This committee qualified as a multicandidate committee **DURING THIS** Reporting Period on date: _____

4. TYPE OF REPORT

(a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 20

*twenty day report preceding _____ (Type or Print)
 election on _____ in the State of _____
 Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 10/1/93 through 10/31/93		
6. (a) Cash on Hand January 1, 1993		\$ 74,287.44
(b) Cash on Hand at Beginning of Reporting Period	\$ 39,301.35	
(c) Total Receipts (from Line 19)	\$ 49,182.31	\$ 428,466.65
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 88,483.66	\$ 502,754.09
7. Total Disbursements (from Line 30)	\$ 39,308.85	\$ 453,579.28
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 49,174.81	\$ 49,174.81
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -0-	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -0-	

For further information contact:
 Federal Election Commission
 999 E Street, NW
 Washington, DC 20463
 Toll Free 800-424-9538
 Local 202-376-3129

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
Arthur Tibaldi

Signature of Treasurer: *Arthur Tibaldi* Date: **11/19/93**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 6437g

2 3 0 3 8 6 8 0 3 2 8

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

Revised 11/81

NAME OF COMMITTEE		REPORT COVERING PERIOD	
DC37 PEOPLE, AFSCME		FROM 10/1/93	TO: 10/31/93
		COLUMN A	COLUMN B
		Total This Period	Calendar Year
I. Receipts			
11	Contributions (other than loans) From:		
a.	Individuals/Persons Other Than Political Committees		
i.	Itemized (use Schedule A)	-0-	-0-
ii.	Unitemized	49,182.31	428,466.65
iii.	Total (add i and ii) ▶	49,182.31	428,466.65
b.	Political Party Committees	-0-	-0-
c.	Other Political Committees (such as PACs)	-0-	-0-
d.	Total Contributions (add a iii, b and c) ▶	49,182.31	
12.	Transfers From Affiliated/Other Party Committees	-0-	-0-
13.	All Loans Received	-0-	-0-
14.	Loan Repayments Received	-0-	-0-
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	-0-	-0-
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	-0-	-0-
17.	Other Federal Receipts (Dividends, Interest, etc.)	-0-	-0-
18.	Transfers from Nonfederal Account to Joint Activity	-0-	-0-
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ▶	49,182.31	428,466.65
20.	Total Federal Receipts (subtract line 18 from line 19) ▶	49,182.31	428,466.65
II. Disbursements			
21.	Operating Expenditures:		
a.	Shared Federal/Non-Federal Activity (from Schedule H4)		
i.	Federal Share	-0-	-0-
ii.	Non-Federal Share	-0-	-0-
b.	Other Federal Operating Expenditures	-0-	-0-
c.	Total Operating Expenditures (Add a i, a ii, and b) ▶	-0-	-0-
22.	Transfers to Affiliated/Other Party Committees	39,301.35	453,454.78
23.	Contributions to Federal Candidates/Committees and Other Political Committees	-0-	-0-
24.	Independent Expenditures (use Schedule E)	-0-	-0-
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	-0-	-0-
26.	Loan Repayments Made	-0-	-0-
27.	Loans Made	-0-	-0-
28.	Refunds of Contributions To:		
a.	Individuals/Persons Other Than Political Committees	7.50	124.50
b.	Political Party Committees	-0-	-0-
c.	Other Political Committees (such as PACs)	-0-	-0-
d.	Total Contribution Refunds (Add a, b and c) ▶	7.50	124.50
29.	Other Disbursements	-0-	-0-
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ▶	39,308.85	453,579.28
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) ▶	39,308.85	453,579.28
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans) (from line 11d)	49,182.31	428,466.65
33.	Total Contribution Refunds (from line 28d)	7.50	124.50
34.	Net Contributions (other than loans) (subtract line 33 from 32)	49,174.81	428,342.15
35.	Total Federal Operating Expenditures (add 21 a, and 21 b) ▶	-0-	-0-
36.	Offsets to Operating Expenditures (from line 15)	-0-	-0-
37.	Net Operating Expenditures (subtract line 36 from 35) ▶	-0-	-0-

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate continuation sheets for each category of the Detailed Summary Report. **Page 1 of 1**
FORM NO. 10MB-4
21

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 any other purpose, including identifying the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full):
 > DC 37 PEOPLE, AFSCME

9 3 3 3 0 8 3 3 0

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
AFSCME, PEOPLE 1625 I Street Washington, DC 20036	<u>Transfer</u> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/19/93	\$ 39,301.35
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (options II)	\$ 39,301.35
TOTAL This Period (last page only)	\$ 39,301.35

**Federal Election Commission
 ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	DATE OF RECEIPT
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED <i>11-22-93</i>
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT
<input type="checkbox"/> Received from the Senate Office of Public Records	DATE OF RECEIPT
<input type="checkbox"/> Other (Specify):	POSTMARKED
	and/or DATE OF RECEIPT

JM
 PREPARER

11-26-93
 DATE PREPARED

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