

NATIONAL UNION OF HOSPITAL AND HEALTH CARE EMPLOYEES

AFSCME AFL-CIO

2015 AUG 31

1319 LOCUST STREET • PHILADELPHIA, PENNSYLVANIA 19107-5498 • 215-735-1300 • FAX 215-735-9878

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CHRIS WOODS Executive Vice President Executive Vice President

PETER GOULD

MARGUERITE STANFORD . Secretary-Treasurer

JOHN HUNDZYNSKI Vice President

SHEILA BENNETT Acting Vice President

August 25, 2015

Marlene Colucci **Reports Analysis Division Federal Election Commission** Washington, DC 20463

RE: #C00034066, Year-End Report (01/01/2015 - 06/30/2015)

Dear Ms. Colucci:

Please see the above-mentioned report and advise if there is anything further that is required.

Sincerely,

Marguerite Stanford, Treasure

United We Care

ADHS: OS: NI : OM: OOONO

FE6AN026

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

2015 AUG 31 AM 8: 22

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

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MEALTH CARE						
	13/19/140		<u> </u>			
Check if different than previously reported. (ACC)	PHILADE	ILPHIA.		PA I	1.9/07/-	
2. FEC IDENTIFICATION NUM	BER ▼	CITY A		STATE A	ZIP CODE ▲	
CO.D.034.06	<u>e</u>	3. IS THIS	NEW (N) OR	(A)	MENDED	
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)	(d) 30-Day POST-Elec Report for	Election on Genethe:	ention (12C) ention (12C) oral (30G)	Sep	in the State of Special (30S) in the State of Special (30S)	
5. Covering Period	121 30	[75] th	rough 06	1 30 '	2075	
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 MARGIERITE STANFORD MORRISON Signature of Treasurer Date OS 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	

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FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		
DISTRICT 11990, A	SUHHCE, POLITICAL	
Report Covering the Period: From:	Did Basis	To: 04 30 20.15
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1,		g en montrosampero ser curro que acomo que en se para se a que en menero regio, en eje mos e secon est ma matare estata con class quel aco acidido de describiros de la como de
(b) Cash on Hand at Beginning of Reporting Period	guerragina de separatique sera processique anagan anaga escupa escapa escapa en responsabilità de la companya Per companya escapa de la companya escapa de la companya escapa de la companya escapa escapa escapa escapa esca Per companya escapa escap	·
(c) Total Receipts (from Line 19)	som en er	properties and property of the second
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	parantipera de su prantipera primi esta anestrucciones antes estas estas estas estas estas estas estas estas e Estas estas est	gus e sengra o rege ann zog rennage e mongen e range en zog en zog e en zog en zog en zog en zog en zog en zog En zog en zo
7. Total Disbursements (from Line 31)	processing the state of the contract of the co	to the state of th
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	the control of the section of the control of the co	processing the second s
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	go marija pri	
This committee has qualified as a multic	andidate 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	

FE6AN026

SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

Excluding Loans

NAME OF COMMITTEE (In Full)

(Use separate schedule(s) for each numbered line) PAGE 3 OF 3

FOR LINE NUMBER: (check only one) 10

DISTRICT 1199C POLITICAL ACTION FUND						
	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):				
	DISTRICT 11990 POLITICAL ACTION FUND	Deposited in Error				
ı	Mailing Address	Funds disbursed, not				
ļ	City State Zip Code PHILADIEL PHIA PA 19187	available to repay.				
	Outstanding Balance Beginning This Period					
- [
	Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period				
١	District Control of the Control of t					
	Secured a construction of December and Decem	Indicate the Color of Color Color Color				
Ì	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):				
-	DISTRICT 11990 POLITICAL ACTION FUND	Deposited in evror.				
Ì	Mailing Address	Tunds dubursed, not				
ŀ	City State Zip Code					
	PHILADELPHIAS PA 19107	available for repayment				
l	Outstanding Balance Beginning This Period	_				
	57,000					
-	Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period				
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	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):				
1	DISTRICT 1199C POLITICAL ACRON FOND	Transferred from non-flat				
ſ	Mailing Address	account in error Contribution				
}	City State Zip Code	was excessive - Request for				
	Philadelphia PA 19107	refund made.				
١	Outstanding Balance Beginning This Period					
.	5.000.00					
1	Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period				
		5200 00				
	house beautiful made and local made and a military beautiful and beautiful beautiful and the advantage of the section of	Second second Securit Security was the second secon				
1)	SUBTOTALS This Period This Page (optional)	121,866,00				
2)	TOTALS This Period (last page this line number only)	121,864,08				
3)	TOTAL OUTSTANDING LOANS from Schedule C (last page only)					
4)	ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	and the second s				

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AFSCME, AFL-CIO 1319 Locust Street Philadelphia, PA 19107-5498

and Health Care Employees National Union of Hospital

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Address Correction Requested

26 AUG '15

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DATE PREPARED

PREPARER (3/2015)