

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

2. **FEC IDENTIFICATION NUMBER** C00149211
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 05 01 2011 through 05 31 2011

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 Maf Uddin
Signature of Treasurer Electronically Filed by Maf Uddin Date 06 20 2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

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

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		96129.65
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period	146004.39									
(c) Total Receipts (from Line 19)	96882.43	259906.90								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	242886.82	356036.55								
7. Total Disbursements (from Line 31)	146004.39	259154.12								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	96882.43	96882.43								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

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

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	1	1

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)	1408.22	3658.22
(ii) Unitemized	95474.21	256248.68
(iii) TOTAL (add Lines 11(a)(i) and (ii)	96882.43	259906.90
(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)	96882.43	259906.90
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	96882.43	259906.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	96882.43	259906.90

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	146004.39	259154.12
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	146004.39	259154.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	146004.39	259154.12

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)	96882.43	259906.90
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	96882.43	259906.90
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 / 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A.	Full Name (Last, First, Middle Initial) Miriam Allen	Date of Receipt MM / DD / YYYY 05 / 31 / 2011
	Mailing Address 4322 Claredon Rd	Transaction ID: SA11AI.9535
	City State Zip Code Brooklyn NY 11203	Amount of Each Receipt this Period 38.46
	FEC ID number of contributing federal political committee. C	Payroll Deduction
Name of Employer NYC Board of Higher Ed. State	Occupation COLLEGE ADMIN ASSISTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.53	

B.	Full Name (Last, First, Middle Initial) Judith Burger-Arroyo	Date of Receipt MM / DD / YYYY 05 / 31 / 2011
	Mailing Address 1056 E37th St	Transaction ID: SA11AI.9539
	City State Zip Code Brooklyn NY 11210	Amount of Each Receipt this Period 360.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction
Name of Employer District Council 37, AFSC-ME	Occupation Grievance Rep, Local President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1160.00	

C.	Full Name (Last, First, Middle Initial) Oliver Gray	Date of Receipt MM / DD / YYYY 05 / 30 / 2011
	Mailing Address 655 E. 14th Street	Transaction ID: SA11AI.9553
	City State Zip Code New York NY 10009	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	Payroll Deduction
Name of Employer District Council 37, AFSC-ME	Occupation Associate Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

SUBTOTAL of Receipts This Page (optional)	478.46
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 7 / 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Mr. Tyler Hemingway		Date of Receipt MM / DD / YYYY 05 / 31 / 2011
	Mailing Address 7 Sunglow Terrace		Transaction ID: SA11AI.9555
	City Middletown	State NY	Zip Code 10941
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
	Name of Employer District Council 37	Occupation Asst Division Director - Hosp.	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

B.	Full Name (Last, First, Middle Initial) Dennis Ifill		Date of Receipt MM / DD / YYYY 05 / 31 / 2011
	Mailing Address 257-37 149th Ave		Transaction ID: SA11AI.9557
	City Rosedale	State NY	Zip Code 11422
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
	Name of Employer City of NY-Rent & Rehab Adm	Occupation Local President	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) Barbara Ingram-Edmonds		Date of Receipt MM / DD / YYYY 05 / 31 / 2011
	Mailing Address 34 douth Mill Rd		Transaction ID: SA11AI.9558
	City West Winsor	State NJ	Zip Code 08550
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
	Name of Employer District Council 37, AFSC-ME	Occupation Director of Field Operators	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 440.00	

SUBTOTAL of Receipts This Page (optional)	▶	160.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Clifford Koppelman		Date of Receipt
	Mailing Address 1270 E 19 Street, #1J		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 31 / 2011
	City	State	Zip Code
	Brooklyn	NY	11230
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9565
Name of Employer District Council 37, AFSC-ME		Occupation Grievance Representative	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	<input type="text"/> 40.00
Payroll Deduction			

B.	Full Name (Last, First, Middle Initial) Edwin Negron		Date of Receipt
	Mailing Address 80 East 110th St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 31 / 2011
	City	State	Zip Code
	New York	NY	10029
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9575
Name of Employer City of New York Admin Service		Occupation CITY CUSTODIAL ASST	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00	<input type="text"/> 75.00
Payroll Deduction			

C.	Full Name (Last, First, Middle Initial) Ralph Pepe		Date of Receipt
	Mailing Address 125 E.17th Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 31 / 2011
	City	State	Zip Code
	New York	NY	10003
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9578
Name of Employer District Council 37, AFSC-ME		Occupation Real Estate Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	<input type="text"/> 40.00
Payroll Deduction			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 155.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

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

A.

Full Name (Last, First, Middle Initial)
Walthene Primus

Mailing Address 137-29 Bedell Street

City Springfield Grdns State NY Zip Code 11413

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

Name of Employer District Council 37, AFSC-ME Occupation Grievance Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt MM / DD / YYYY 05 / 31 / 2011

Transaction ID: SA11AI.9582

Amount of Each Receipt this Period 40.00

Payroll Deduction

B.

Full Name (Last, First, Middle Initial)
Lillian Roberts

Mailing Address 2373 Broadway

City New York State NY Zip Code 10024

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1210.00

Date of Receipt MM / DD / YYYY 05 / 31 / 2011

Transaction ID: SA11AI.9587

Amount of Each Receipt this Period 220.00

Payroll Deduction

C.

Full Name (Last, First, Middle Initial)
Edward Rodriquez

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 District Council 37 Local 1549 Occupation President Local 1549

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt MM / DD / YYYY 05 / 31 / 2011

Transaction ID: SA11AI.9588

Amount of Each Receipt this Period 125.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► **385.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 12
(check only one)

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

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

A.

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

Mailing Address 130 South Highland

City State Zip Code
Ossining NY 10562

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 1 1

Transaction ID: SA11AI.9592

Amount of Each Receipt this Period
40.00

Payroll Deduction

B.

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

Mailing Address 23 Water Grant St

City State Zip Code
Yonkers NY 10701

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 218.68

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 1 1

Transaction ID: SA11AI.9596

Amount of Each Receipt this Period
39.76

Payroll Deduction

C.

Full Name (Last, First, Middle Initial)
Barbra Terrelonge

Mailing Address 38 Hull Street

City State Zip Code
Brooklyn NY 11233

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

Name of Employer District Council 37 Occupation Asst Director Research Dept.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 1 1

Transaction ID: SA11AI.9599

Amount of Each Receipt this Period
40.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► **119.76**

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:	PAGE 11 / 12
	(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 (D-C37PEOPL

A.

Full Name (Last, First, Middle Initial) James Tucciarelli		Date of Receipt MM / DD / YYYY 05 / 31 / 2011
Mailing Address 361 Mill Rd.		Transaction ID: SA11AI.9600
City Staten Island	State NY	Zip Code 10306
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00
Name of Employer District Council 37, AFSC-ME	Occupation Grievance Representative	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

B.

Full Name (Last, First, Middle Initial) Mercedes Youman		Date of Receipt MM / DD / YYYY 05 / 31 / 2011
Mailing Address 345 E 93rd St 16h		Transaction ID: SA11AI.9613
City NY	State NY	Zip Code 10128
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 60.00
Name of Employer NYC Health Dept.	Occupation Public Health Nurse	Payroll Deduction
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)	110.00
TOTAL This Period (last page this line number only)	1408.22

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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

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

Mailing Address 1625 L STREET NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement Transfer

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB22.9619

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - PEOPLE, QUALIFIED

Mailing Address 1625 L STREET NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement Transfer

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB22.9620

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - PEOPLE, QUALIFIED

Mailing Address 1625 L STREET NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement Transfer

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB22.9621

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

146004.39

TOTAL This Period (last page this line number only)

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