

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

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COMMISSION MAIL ROOM

1999 SEP 27 A 11:28

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full)		2. FEC IDENTIFICATION NUMBER
DC 37 AFSCME, PEOPLE P.O. BOX 2882 Church Street Station New York, NY 10008		C00149211
		3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 31

Twelfth day report preceding _____ (Type of Election)

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	8/1/99 through 8/31/99		
6. (a) Cash on Hand January 1, 1999			\$ 115,319.86
(b) Cash on Hand at Beginning of Reporting Period		\$ 49,853.33	
(c) Total Receipts (from Line 19)		\$ 55,539.24	\$ 428,060.98
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 105,392.57	\$ 543,380.84
7. Total Disbursements (from Line 30)		\$ 49,853.33	\$ 487,841.60
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 8(d))		\$ 55,539.24	\$ 55,539.24
9. Debts and Obligations Owed TO 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 20488 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		\$ -0-	

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

Type or Print Name of Treasurer	Alvin Warshawiak	
Signature of Treasurer	<i>Alvin Warshawiak</i>	Date
		9/20/99

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

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FEC FORM 3X
(revised 9/93)