

**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-037PEOPLE)

ADDRESS (number and street) **Check if different than previously reported. (ACC)**
 PO BOX 2882
 CHURCH STREET STATION
 NEW YORK NY 10007

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00149211 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
 (a) Quarterly Reports:
 April 15 Quarterly Report(Q1) Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 July 15 Quarterly Report(Q2) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 October 15 Quarterly Report(Q3) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (M13)
 January 31 Quarterly Report(YE) Election on in the State of
 July 31 Mid-Year Report(Non-election Year Only) (MY) (c) 12-Day PRE Election Report for the: Primary (12P) General (12G) Runoff (12R)
 Termination Report (TER) (d) 30-Day Post -Election Report for the: Convention (12C) Special (12S) General (30G) Runoff (30R) Special (30S)
 Election on in the State of

5. Covering Period 01 01 2002 through 01 31 2002

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 Warshaviak
 Signature of Treasurer Electronically Filed by Alvin Warshaviak Date 02 21 2002

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