

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

Local 32BJ Service Employees International Union American Dream Political Action
Fund

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		277117.07
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	277117.07									
(c) Total Receipts (from Line 19)	217117.03	217117.03								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	494234.10	494234.10								
7. Total Disbursements (from Line 31)	18083.39	18083.39								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	476150.71	476150.71								
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

Local 32BJ Service Employees International Union American Dream Political Action Fund

Report Covering the Period: From: To:

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	520.00	520.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	198263.82	198263.82
(iii) TOTAL (add Lines 11(a)(i) and (ii)	198783.82	198783.82
(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)	198783.82	198783.82
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.)	18333.21	18333.21
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))	217117.03	217117.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	217117.03	217117.03

DETAILED SUMMARY PAGE

of Disbursements

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.....	0.00	0.00
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	300.84	300.84
(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))	300.84	300.84
29. Other Disbursements.....	17782.55	17782.55
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))..	18083.39	18083.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	18083.39	18083.39

DETAILED SUMMARY PAGE
of Disbursements

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)	198783.82	198783.82
34. Total Contribution Refunds (from Line 28(d))	300.84	300.84
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	198482.98	198482.98
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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 17
	<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)
Local 32BJ Service Employees International Union American Dream Political Action Fund

Full Name (Last, First, Middle Initial) A. Kyle E. Bragg		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006	
Mailing Address 67-15 A 192 St.		Transaction ID: C1607504	
City State Zip Code Fresh Meadows NY 11365	Amount of Each Receipt this Period 260.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Local 32BJ SEIU	Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		
		* Payroll Deduction: 20/WK	

Full Name (Last, First, Middle Initial) B. Michael P. Duffy		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006	
Mailing Address 204 West 88th St. Apt. 5E		Transaction ID: C1610806	
City State Zip Code New York NY 10024	Amount of Each Receipt this Period 260.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Local 32BJ SEIU	Occupation District Supervisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		
		* Payroll Deduction: 20/WK	

SUBTOTAL of Receipts This Page (optional) ▶	520.00
TOTAL This Period (last page this line number only) ▶	520.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 17
	<input 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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Local 32BJ Service Employees International Union American Dream Political Action Fund

A. Full Name (Last, First, Middle Initial) Building Service 32BJ Benefit Funds Mailing Address 101 Avenue of the Americas City State Zip Code New York NY 10013 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 7 / 2 0 0 6 Transaction ID: C1434760 Amount of Each Receipt this Period 1188.74
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2600.74		Deposit error.

B. Full Name (Last, First, Middle Initial) Building Service 32BJ Benefit Funds Mailing Address 101 Avenue of the Americas City State Zip Code New York NY 10013 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 7 / 2 0 0 6 Transaction ID: C1434761 Amount of Each Receipt this Period 680.00
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2600.74		Deposit error.

C. Full Name (Last, First, Middle Initial) Building Service 32BJ Benefit Funds Mailing Address 101 Avenue of the Americas City State Zip Code New York NY 10013 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 7 / 2 0 0 6 Transaction ID: C1434762 Amount of Each Receipt this Period 732.00
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2600.74		Deposit error.

SUBTOTAL of Receipts This Page (optional)	▶	2600.74
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 17
	<input 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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Local 32BJ Service Employees International Union American Dream Political Action Fund

A. Full Name (Last, First, Middle Initial) Local 32BJ SEIU		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 9 / 2 0 0 6	
Mailing Address 101 Avenue of the Americas		Transaction ID: C1434741	
City State Zip Code New York NY 10013	Amount of Each Receipt this Period 65.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 15732.47	

Deposit error.

B. Full Name (Last, First, Middle Initial) Local 32BJ SEIU		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 9 / 2 0 0 6	
Mailing Address 101 Avenue of the Americas		Transaction ID: C1434742	
City State Zip Code New York NY 10013	Amount of Each Receipt this Period 131.60		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 15732.47	

Deposit error.

C. Full Name (Last, First, Middle Initial) Local 32BJ SEIU		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 3 / 2 0 0 6	
Mailing Address 101 Avenue of the Americas		Transaction ID: C1434743	
City State Zip Code New York NY 10013	Amount of Each Receipt this Period 495.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 15732.47	

Deposit error.

SUBTOTAL of Receipts This Page (optional) ▶	691.60
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 17
	<input 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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Local 32BJ Service Employees International Union American Dream Political Action Fund

Full Name (Last, First, Middle Initial) Local 32BJ SEIU		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 6	
Mailing Address 101 Avenue of the Americas		Transaction ID: C1434744	
City State Zip Code New York NY 10013	Amount of Each Receipt this Period 1327.68		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 15732.47	

Deposit error.

Full Name (Last, First, Middle Initial) Local 32BJ SEIU		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 2 / 2 0 0 6	
Mailing Address 101 Avenue of the Americas		Transaction ID: C1434745	
City State Zip Code New York NY 10013	Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 15732.47	

Deposit error.

Full Name (Last, First, Middle Initial) Local 32BJ SEIU		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 6 / 2 0 0 6	
Mailing Address 101 Avenue of the Americas		Transaction ID: C1434746	
City State Zip Code New York NY 10013	Amount of Each Receipt this Period 10541.35		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 15732.47	

Deposit error.

SUBTOTAL of Receipts This Page (optional) ▶	11929.03
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 17
	<input 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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Local 32BJ Service Employees International Union American Dream Political Action Fund

A. Full Name (Last, First, Middle Initial) Local 32BJ SEIU		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 1 / 2 0 0 6	
Mailing Address 101 Avenue of the Americas		Transaction ID: C1434747	
City State Zip Code New York NY 10013	Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 15732.47	

Deposit error.

B. Full Name (Last, First, Middle Initial) Local 32BJ SEIU		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 4 / 2 0 0 6	
Mailing Address 101 Avenue of the Americas		Transaction ID: C1434748	
City State Zip Code New York NY 10013	Amount of Each Receipt this Period 545.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 15732.47	

Deposit error.

C. Full Name (Last, First, Middle Initial) Local 32BJ SEIU		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 7 / 2 0 0 6	
Mailing Address 101 Avenue of the Americas		Transaction ID: C1434749	
City State Zip Code New York NY 10013	Amount of Each Receipt this Period 620.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 15732.47	

Deposit error.

SUBTOTAL of Receipts This Page (optional) ▶	1225.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 17
	<input 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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Local 32BJ Service Employees International Union American Dream Political Action Fund

Full Name (Last, First, Middle Initial) Local 32BJ SEIU		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2006	
Mailing Address 101 Avenue of the Americas		Transaction ID: C1434750	
City State Zip Code New York NY 10013	Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. C	Deposit error.		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 15732.47		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) Local 32BJ SEIU		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2006	
Mailing Address 101 Avenue of the Americas		Transaction ID: C1434751	
City State Zip Code New York NY 10013	Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. C	Deposit error.		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 15732.47		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) Local 32BJ SEIU		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 101 Avenue of the Americas		Transaction ID: C1434752	
City State Zip Code New York NY 10013	Amount of Each Receipt this Period 1085.00		
FEC ID number of contributing federal political committee. C	Deposit error.		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 15732.47		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1335.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 17
	<input 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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Local 32BJ Service Employees International Union American Dream Political Action Fund

A. Full Name (Last, First, Middle Initial) Local 32BJ SEIU		Date of Receipt M M / D D / Y Y Y Y Y 03 / 14 / 2006	
Mailing Address 101 Avenue of the Americas		Transaction ID: C1434753	
City State Zip Code New York NY 10013	Amount of Each Receipt this Period 366.45		
FEC ID number of contributing federal political committee. C		Deposit error.	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15732.47		

B. Full Name (Last, First, Middle Initial) Local 32BJ SEIU		Date of Receipt M M / D D / Y Y Y Y Y 03 / 21 / 2006	
Mailing Address 101 Avenue of the Americas		Transaction ID: C1434754	
City State Zip Code New York NY 10013	Amount of Each Receipt this Period 120.00		
FEC ID number of contributing federal political committee. C		Deposit error.	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15732.47		

C. Full Name (Last, First, Middle Initial) Local 32BJ SEIU		Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2006	
Mailing Address 101 Avenue of the Americas		Transaction ID: C1434755	
City State Zip Code New York NY 10013	Amount of Each Receipt this Period 65.39		
FEC ID number of contributing federal political committee. C		Deposit error.	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15732.47		

SUBTOTAL of Receipts This Page (optional) ▶	551.84
TOTAL This Period (last page this line number only) ▶	18333.21

**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)

PAGE 13 / 17

<input type="checkbox"/> 21b	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Local 32BJ Service Employees International Union American Dream Political Action Fund

Full Name (Last, First, Middle Initial)

A. Building Service 32BJ Benefit Funds

Mailing Address 101 Avenue of the Americas

City New York State NY Zip Code 10013

Purpose of Disbursement
Refund/Correction of deposit error.

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D379

Date of Disbursement

03 / 01 / 2006

Amount of Each Disbursement this Period

1188.74

Full Name (Last, First, Middle Initial)

B. Building Service 32BJ Benefit Funds

Mailing Address 101 Avenue of the Americas

City New York State NY Zip Code 10013

Purpose of Disbursement
Refund/Correction of deposit error.

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D380

Date of Disbursement

03 / 08 / 2006

Amount of Each Disbursement this Period

680.00

Full Name (Last, First, Middle Initial)

C. Local 32BJ SEIU

Mailing Address 101 Avenue of the Americas

City New York State NY Zip Code 10013

Purpose of Disbursement
Refund/Correction of deposit error.

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D395

Date of Disbursement

01 / 05 / 2006

Amount of Each Disbursement this Period

246.73

SUBTOTAL of Disbursements This Page (optional) ►

2115.47

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Local 32BJ Service Employees International Union American Dream Political Action Fund

<p>A. Local 32BJ SEIU</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Local 32BJ SEIU</p> <p>Mailing Address 101 Avenue of the Americas</p> <p>City New York State NY Zip Code 10013</p> <p>Purpose of Disbursement Refund/Correction of deposit error.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: D385</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="65.00"/></p>
<p>Purpose of Disbursement Refund/Correction of deposit error.</p> <p>Candidate Name</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>001</p> <p>Category/Type</p>

<p>B. Local 32BJ SEIU</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Local 32BJ SEIU</p> <p>Mailing Address 101 Avenue of the Americas</p> <p>City New York State NY Zip Code 10013</p> <p>Purpose of Disbursement Refund/Correction of deposit error.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: D386</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="131.60"/></p>
<p>Purpose of Disbursement Refund/Correction of deposit error.</p> <p>Candidate Name</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>001</p> <p>Category/Type</p>

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<p>Purpose of Disbursement Refund/Correction of deposit error.</p> <p>Candidate Name</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>001</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ►

2019.28

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

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)

PAGE 15 / 17

<input type="checkbox"/> 21b	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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<p>A. Local 32BJ SEIU</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Local 32BJ SEIU</p> <p>Mailing Address 101 Avenue of the Americas</p> <p>City New York State NY Zip Code 10013</p> <p>Purpose of Disbursement Refund/Correction of deposit error.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: D388</p> <p>Date of Disbursement</p> <p><input type="text" value="02"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="60.00"/></p>
<p>Purpose of Disbursement Refund/Correction of deposit error.</p> <p>Candidate Name</p> <p>Category/Type <input type="text" value="001"/></p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

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<p>Purpose of Disbursement Refund/Correction of deposit error.</p> <p>Candidate Name</p> <p>Category/Type <input type="text" value="001"/></p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

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<p>Purpose of Disbursement Refund/Correction of deposit error.</p> <p>Candidate Name</p> <p>Category/Type <input type="text" value="001"/></p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="10661.35"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**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)

PAGE 16 / 17

<input type="checkbox"/> 21b	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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<p>Purpose of Disbursement Refund/Correction of deposit error.</p> <p>Candidate Name</p> <p>Category/Type <input type="text" value="001"/></p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

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<p>Purpose of Disbursement Refund/Correction of deposit error.</p> <p>Candidate Name</p> <p>Category/Type <input type="text" value="001"/></p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

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<p>Purpose of Disbursement Refund/Correction of deposit error.</p> <p>Candidate Name</p> <p>Category/Type <input type="text" value="001"/></p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="2866.45"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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ITEMIZED DISBURSEMENTS**

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PAGE 17 / 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
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Full Name (Last, First, Middle Initial)

A. Local 32BJ SEIU

Mailing Address 101 Avenue of the Americas

City State Zip Code
New York NY 10013

Purpose of Disbursement
Refund/Correction of deposit error.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D394

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)