

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) PO BOX 2882
CHURCH STREET STATION
 Check if different than previously reported. (ACC)
NEW YORK NY 10008

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 11 28 2006 through 12 31 2006

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 01 31 2007

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

**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
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	2

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		78398.30
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	44815.95									
(c) Total Receipts (from Line 19)	79535.48	511927.23								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	124351.43	590325.53								
7. Total Disbursements (from Line 31)	44815.95	510790.05								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	79535.48	79535.48								
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
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	2347.00	6828.00
(i) Itemized (use Schedule A)	77188.48	505099.23
(ii) Unitemized	79535.48	511927.23
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	79535.48	511927.23
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))	79535.48	511927.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	79535.48	511927.23

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	44815.95	510790.05
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))..	44815.95	510790.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	44815.95	510790.05

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)	79535.48	511927.23
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	79535.48	511927.23
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 / 20
	<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)
Ms Gloria Acevedo

Mailing Address 452 Bolton Ave

City State Zip Code
Bronx NY 10473

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 ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5793

Amount of Each Receipt this Period
40.00

Payroll deduction

B. Full Name (Last, First, Middle Initial)
Donald Afflick

Mailing Address 2267 Virgil Pl.

City State Zip Code
Bronx NY 10473

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 ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5794

Amount of Each Receipt this Period
110.00

Payroll deduction

C. Full Name (Last, First, Middle Initial)
Leonard Allen

Mailing Address 512 Powell Street

City State Zip Code
Brooklyn NY 11212

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

Name of Employer District Council 37 Occupation Grievance Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5795

Amount of Each Receipt this Period
20.00

Payroll deduction

SUBTOTAL of Receipts This Page (optional)	▶	170.00
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 7 / 20
	<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) Frederick Bigger Mailing Address 447 Monroe Street City State Zip Code Brooklyn NY 11221 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6 Transaction ID: SA11A1.5798 Amount of Each Receipt this Period 72.00 Payroll Deduction
Name of Employer Occupation NYC Transit Authority Computer Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 208.00		

B. Full Name (Last, First, Middle Initial) Cora Casey Mailing Address 49-57 Crown Street City State Zip Code Brooklyn NY 11221 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6 Transaction ID: SA11A1.5797 Amount of Each Receipt this Period 40.00
Name of Employer Occupation NYC Housing Authority Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		

C. Full Name (Last, First, Middle Initial) Rosa Cuadrado-Nahal Mailing Address 430 W. 125th Street City State Zip Code New York NY 10027 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6 Transaction ID: SA11A1.5799 Amount of Each Receipt this Period 40.00 Payroll Deduction
Name of Employer Occupation NYC Police Department Police Communication Tech Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional)	152.00
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 8 / 20
	<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) Michael DeMarco Mailing Address 83 Ramblewood Ave City Staten Island State NY Zip Code 10308 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.5800 Amount of Each Receipt this Period <table border="1"> <tr> <td>40.00</td> </tr> </table> Payroll Deduction	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	6	40.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		3	1		2	0	0	6														
40.00																							
Name of Employer District Council 37 Occupation Grievance Representative Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																				
250.00																							

B. Full Name (Last, First, Middle Initial) Colleen Detroy Mailing Address 5101 39th St apt. b21 City Woodside State NY Zip Code 11104 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.5801 Amount of Each Receipt this Period <table border="1"> <tr> <td>40.00</td> </tr> </table> Payroll Deduction	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	6	40.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		3	1		2	0	0	6														
40.00																							
Name of Employer District Council 37, AFSC-ME Occupation Administrative Assistant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>230.00</td> </tr> </table>	230.00																				
230.00																							

C. Full Name (Last, First, Middle Initial) Lenora Gates Mailing Address 112-23 196th St. City St. Albans State NY Zip Code 11412 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.5802 Amount of Each Receipt this Period <table border="1"> <tr> <td>40.00</td> </tr> </table> Payroll Deduction	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	6	40.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		3	1		2	0	0	6														
40.00																							
Name of Employer DC 37, Local 1549 Occupation Vice President, Local 1549 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>260.00</td> </tr> </table>	260.00																				
260.00																							

SUBTOTAL of Receipts This Page (optional)	120.00
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 9 / 20
	<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)
Oliver Gray

Mailing Address 655 E. 14th Street

City State Zip Code
New York NY 10009

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5803

Amount of Each Receipt this Period
160.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Norbert Harry

Mailing Address 282 E35th Street

City State Zip Code
Brooklyn NY 11203

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

Name of Employer District Council 37 Occupation Assistant Division Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5804

Amount of Each Receipt this Period
80.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Anderson Hyland

Mailing Address 751 E. 89th St #5

City State Zip Code
brooklyn NY 11236

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

Name of Employer DC 37, Local 420 Occupation Local 420 staff

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5805

Amount of Each Receipt this Period
40.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	280.00
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 10 / 20
	<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)
Barbara Kairson

Mailing Address 43 Hamilton Terrence

City State Zip Code
New York NY 10031

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

Name of Employer District Council 37, AFSC-ME Occupation Director of DC 37 Education Fund

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5806

Amount of Each Receipt this Period
40.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Madonna Knight

Mailing Address 282 E 35th Street

City State Zip Code
Brooklyn NY 11203

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5807

Amount of Each Receipt this Period
40.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Clifford Koppelman

Mailing Address 1270 E 19 Street, #1J

City State Zip Code
Brooklyn NY 11230

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 ▼ 520.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5808

Amount of Each Receipt this Period
80.00

Payroll Deduction

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 20
	<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"/>	<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)
Eugene Lawrence

Mailing Address 2760 Grand Concourse
Apt 1B

City State Zip Code
Bronx NY 10458

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

Name of Employer NYC Parks & Recreation Ad-min
Occupation Associate Park Service Worker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5809

Amount of Each Receipt this Period
40.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Peter Leon

Mailing Address 183-55 Babylon Ave.

City State Zip Code
St. Albans NY 11412

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

Name of Employer District Council 37, Local 420
Occupation Local 420 Staff

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5810

Amount of Each Receipt this Period
60.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Degna Levister

Mailing Address 423 Atlantic Avenue
apt. 4M

City State Zip Code
Brooklyn NY 11217

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

Name of Employer NY State Board of Higher Educa
Occupation College Assistant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5811

Amount of Each Receipt this Period
48.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	148.00
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 / 20
	<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"/>	<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

Full Name (Last, First, Middle Initial) A. Andrew Mayo		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 720 Lenox Avenue #24C		Transaction ID: SA11A1.5812
City State Zip Code New York NY 10039	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 40.00
Name of Employer NYC Department of Environment Protecti	Occupation Sr. Sewage Treatment Worker	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. Terrence Miller		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 417 Prospect Pl		Transaction ID: SA11A1.5813
City State Zip Code Brooklyn NY 11238	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 40.00
Name of Employer NYC Police Department	Occupation Senior Police Admin. Aide	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) C. Darlene Paretts		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6
Mailing Address 1628 2nd Avenue		Transaction ID: SA11A1.5814
City State Zip Code New York NY 10028	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 40.00
Name of Employer NYC Off Track Betting	Occupation Betting Clerk	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	120.00
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 13 / 20
	<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)
Ralph Pepe

Mailing Address 125 E.17th Street

City State Zip Code
New York NY 10003

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

Name of Employer District Council 37, AFSC-ME Occupation Real Estate Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5815

Amount of Each Receipt this Period
45.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Elnora Phillips

Mailing Address 110 E 99th Street apt. 12F

City State Zip Code
New York NY 10029

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

Name of Employer Department of Social Services Occupation Case Worker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5816

Amount of Each Receipt this Period
40.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Togba Porte

Mailing Address PO Box 20346

City State Zip Code
Staten Island NY 10302

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

Name of Employer District Council 37 Local 420 Occupation Vice President Local 420

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5817

Amount of Each Receipt this Period
40.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	125.00
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 14 / 20
	<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) 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		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6 Transaction ID: SA11A1.5818 Amount of Each Receipt this Period 80.00 Payroll Deduction
Name of Employer District Council 37, AFSC-ME Occupation Grievance Representative Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

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		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6 Transaction ID: SA11A1.5819 Amount of Each Receipt this Period 200.00 Payroll Deduction
Name of Employer Executive Director Occupation District Council 37, AFSCME Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00		

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		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6 Transaction ID: SA11A1.5820 Amount of Each Receipt this Period 40.00 Payroll Deduction
Name of Employer District Council 37 Local 1549 Occupation President Local 1549 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00		

SUBTOTAL of Receipts This Page (optional)	320.00
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 15 / 20
	<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)
Paulette Sher

Mailing Address 381 Edgegrove Avenue

City Staten Island State NY Zip Code 10312

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

Name of Employer NYC Off Track Betting Occupation Betting Clerk

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5821

Amount of Each Receipt this Period
80.00

Payroll Deduction

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

Mailing Address 130 South Highland

City Ossining State NY Zip Code 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 ▼ 520.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5822

Amount of Each Receipt this Period
80.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
Kyle Simmons

Mailing Address 1114 Knollwood Drive

City Tobyhanna State PA Zip Code 18466

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

Name of Employer District Council 37 Occupation Grievance Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5823

Amount of Each Receipt this Period
40.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	200.00
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 16 / 20
	<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"/>	<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)
John Smith

Mailing Address P.O.BOX 199

City State Zip Code
BRONX NY 10451

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

Name of Employer Occupation
City University of New York City Custodial Asst.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5824

Amount of Each Receipt this Period
40.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Dennis Sullivan

Mailing Address 94 Buckingham Rd.

City State Zip Code
Yonkers NY 10701

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

Name of Employer Occupation
District Council 37 Director of Research and Negotiations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 780.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5825

Amount of Each Receipt this Period
120.00

Payroll Deduction

C. Full Name (Last, First, Middle Initial)
John Townsend

Mailing Address 29 Westwood Ave.

City State Zip Code
Deer Park NY 11729

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5826

Amount of Each Receipt this Period
32.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	192.00
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 17 / 20
	<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) James Tucciarelli Mailing Address 361 Mill Rd. City Staten Island State NY Zip Code 10306 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.5827 Amount of Each Receipt this Period <table border="1"> <tr> <td>80.00</td> </tr> </table> Payroll Deduction	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	6	80.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		3	1		2	0	0	6														
80.00																							
Name of Employer District Council 37, AFSC-ME Occupation Grievance Representative Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>510.00</td> </tr> </table>		510.00																					
510.00																							

B. Full Name (Last, First, Middle Initial) Esther Tucker Mailing Address P.O. Box 934 Lincoln Station City New York State NY Zip Code 10037 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.5828 Amount of Each Receipt this Period <table border="1"> <tr> <td>40.00</td> </tr> </table> Payroll Deduction	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	6	40.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		3	1		2	0	0	6														
40.00																							
Name of Employer District Council 37, ASFC-ME Occupation Grievance Representative Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>250.00</td> </tr> </table>		250.00																					
250.00																							

C. Full Name (Last, First, Middle Initial) Robin Vall Mailing Address 7508 Bell Blvd apt 1n City Bayside State NY Zip Code 11364 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: SA11A1.5829 Amount of Each Receipt this Period <table border="1"> <tr> <td>40.00</td> </tr> </table> Payroll Deduction	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	6	40.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		3	1		2	0	0	6														
40.00																							
Name of Employer NY Dept. of CAS Occupation Clerical Associate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>260.00</td> </tr> </table>		260.00																					
260.00																							

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 20
	<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

Full Name (Last, First, Middle Initial) A. Martin Velasquez		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 96 Wenlock Street		Transaction ID: SA11A1.5830	
City State Zip Code Staten Island NY 10303	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer NY State Board of Higher Educa	Occupation City Laborer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Kenneth Wheeler		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 1100 Teller Ave. apt 2G		Transaction ID: SA11A1.5831	
City State Zip Code Bronx NY 10456	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer NYC Parks & Recreation Ad-min	Occupation Associate Park Service Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name (Last, First, Middle Initial) C. Sheryl Williams		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 475 Willson Avenue Apt 1D		Transaction ID: SA11A1.5832	
City State Zip Code Brooklyn NY 11221	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C		Payroll Deduction	
Name of Employer Clerical Assistant	Occupation NYC Finance Administration		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

SUBTOTAL of Receipts This Page (optional) ▶	120.00
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:	PAGE 19 / 20
	(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)
Wanda Williams

Mailing Address 25 Roy Lane

City Highland State NY Zip Code 12528

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

Name of Employer District Council 37, AFSC-ME Occupation Director of Political Action & Legisla

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5833

Amount of Each Receipt this Period
 40.00

Payroll Deduction

B. Full Name (Last, First, Middle Initial)
Timothy Young

Mailing Address 186-17 Foch Blvd.

City St. Albans State NY Zip Code 11412

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

Name of Employer City Debris Remover Occupation NYC Department of Transportation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 6

Transaction ID: SA11A1.5834

Amount of Each Receipt this Period
 40.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)	▶	80.00
TOTAL This Period (last page this line number only)	▶	2347.00

**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 20 / 20

<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

Full Name (Last, First, Middle Initial)

A. 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

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB22.5838

Date of Disbursement

11 / 30 / 2006

Amount of Each Disbursement this Period

2583.91

B. 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

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB22.5790

Date of Disbursement

12 / 07 / 2006

Amount of Each Disbursement this Period

42232.04

SUBTOTAL of Disbursements This Page (optional)

44815.95

TOTAL This Period (last page this line number only)

44815.95