



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>	<input type="text" value="96129.65"/>	<input type="text" value="96129.65"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="50222.74"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="61420.97"/>	<input type="text" value="528831.29"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="111643.71"/>	<input type="text" value="624960.94"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="50222.74"/>	<input type="text" value="563539.97"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="61420.97"/>	<input type="text" value="61420.97"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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 (DC37PEOPLE)

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		
(i) Itemized (use Schedule A).....	2671.22	11684.43
(ii) Unitemized .....	58749.75	517146.86
(iii) TOTAL (add Lines 11(a)(i) and (ii)..... ▶	61420.97	528831.29
(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) .....	61420.97	528831.29
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 Transfers (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))..... ▶	61420.97	528831.29
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	61420.97	528831.29

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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.....	50222.74	563539.97
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated 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)) ..	50222.74	563539.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	50222.74	563539.97

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

<b>III. Net Contributions/Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	61420.97	528831.29
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	61420.97	528831.29
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 OF 28
<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 (DC37PEOPLE)

Full Name (Last, First, Middle Initial) <b>A. Darryl Adams</b>		Date of Receipt 10 / 31 / 2011 <b>Transaction ID : SA11AI.9966</b>
Mailing Address 70 Hillside Ave		Amount of Each Receipt this Period 20.00
City Freeport	State NY	Zip Code 11520
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer DC37	Occupation Grievance Rep	Aggregate Year-to-Date ▼ 220.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Miriam Allen</b>		Date of Receipt 10 / 31 / 2011 <b>Transaction ID : SA11AI.9968</b>
Mailing Address 4322 Claredon Rd		Amount of Each Receipt this Period 38.46
City Brooklyn	State NY	Zip Code 11203
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer NYC Board of Higher Ed. State	Occupation COLLEGE ADMIN ASSISTANT	Aggregate Year-to-Date ▼ 423.06
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Peggy Benjamin</b>		Date of Receipt 10 / 31 / 2011 <b>Transaction ID : SA11AI.9970</b>
Mailing Address 545 w 126th st		Amount of Each Receipt this Period 20.00
City NY	State NY	Zip Code 10027
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer District Council 37, AFSCME	Occupation Grievance Rep	Aggregate Year-to-Date ▼ 215.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	78.46
<b>TOTAL</b> 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 OF 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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 (DC37PEOPLE)**

**A. James Bruni**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22 Brighton 3rd rd  
 City Brooklyn State NY Zip Code 11235  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NYC Department of Protection Occupation Construction Laborer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2011  
**Transaction ID : SA11AI.9971**  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction

**B. Judith Burger-Arroyo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1056 E37th St  
 City Brooklyn State NY Zip Code 11210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer District Council 37, AFSCME Occupation Grievance Rep, Local President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2310.00

Date of Receipt 10 / 31 / 2011  
**Transaction ID : SA11AI.9972**  
 Amount of Each Receipt this Period 230.00  
 Payroll Deduction

**C. Zonnie Butts**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 363 Dumont Ave  
 City Brooklyn State NY Zip Code 11210  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NYC Dept Education Occupation School Aide  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 31 / 2011  
**Transaction ID : SA11AI.9973**  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	290.00
<b>TOTAL</b> 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 8 OF 28  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
 DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

**A. Cora Casey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 49-57 Crown Street  
 City Brooklyn State NY Zip Code 11221  
 FEC ID number of contributing federal political committee. C  
 Name of Employer NYC Housing Authority Occupation Secretary  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 220.00

Date of Receipt 10 / 31 / 2011  
 Transaction ID : SA11AI.9974  
 Amount of Each Receipt this Period 20.00  
 Payroll Deduction

**B. Carmen Charles**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 681 Palisade Ave  
 City teaneck State NJ Zip Code 07666  
 FEC ID number of contributing federal political committee. C  
 Name of Employer District Council 37, AFSCME Occupation Local President  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 215.00

Date of Receipt 10 / 31 / 2011  
 Transaction ID : SA11AI.9975  
 Amount of Each Receipt this Period 20.00  
 Payroll Deduction

**C. Santos Crespo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 319 Atkins Ave  
 City Brooklyn State NY Zip Code 11208  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Local 372 NYC Bd of Ed, AFSCME Occupation Vice President  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 220.00

Date of Receipt 10 / 31 / 2011  
 Transaction ID : SA11AI.9977  
 Amount of Each Receipt this Period 20.00  
 Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... 60.00  
**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 9 OF 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)**

Full Name (Last, First, Middle Initial)  
**A. Francis Curtis**

Mailing Address 100 Beekman St.  
 #8B

City New York State NY Zip Code 10038

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

Name of Employer District Council 37, AFSCME Occupation Program Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
 10 / 31 / 2011  
**Transaction ID : SA11AI.9978**

Amount of Each Receipt this Period  
**25.00**

Payroll Deduction

Full Name (Last, First, Middle Initial)  
**B. Michael DeMarco**

Mailing Address 83 Ramblewood Ave

City Staten Island State NY Zip Code 10308

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

Name of Employer District Council 37, AFSCME Occupation Grievance Representative

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
 10 / 31 / 2011  
**Transaction ID : SA11AI.9979**

Amount of Each Receipt this Period  
**30.00**

Payroll Deduction

Full Name (Last, First, Middle Initial)  
**C. 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**

Name of Employer District Council 37, AFSCME Occupation Administrative Assistant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
 10 / 31 / 2011  
**Transaction ID : SA11AI.9980**

Amount of Each Receipt this Period  
**25.00**

Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>80.00</b>
<b>TOTAL</b> 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 OF 28  
(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 (DC37PEOPLE)

**A. Cuthbert Dickerson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1969 Benedict Ave  
City Bronx State NY Zip Code 10462  
FEC ID number of contributing federal political committee. C  
Name of Employer District Council 37 Occupation Grievance Rep  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 220.00

Date of Receipt 10 / 31 / 2011  
Transaction ID : SA11AI.9981  
Amount of Each Receipt this Period 200.00  
Payroll Deduction

**B. Connie Etheridge**  
Full Name (Last, First, Middle Initial)  
Mailing Address 123-18 153rd St  
City Jamaica State NY Zip Code 11434  
FEC ID number of contributing federal political committee. C  
Name of Employer NYC LAW DEPARTMENT Occupation CLERICAL ASSOCIATE  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 220.00

Date of Receipt 10 / 31 / 2011  
Transaction ID : SA11AI.9983  
Amount of Each Receipt this Period 30.00  
Payroll Deduction

**C. Isabel Figueroa**  
Full Name (Last, First, Middle Initial)  
Mailing Address 431 E147 Street  
City Bronx State NY Zip Code 10455  
FEC ID number of contributing federal political committee. C  
Name of Employer Local 420, AFSCME AFL-CIO Occupation Vice President  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 220.00

Date of Receipt 10 / 31 / 2011  
Transaction ID : SA11AI.9984  
Amount of Each Receipt this Period 25.00  
Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... 75.00  
**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 11 OF 28  
(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"/>	<input type="checkbox"/>	<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 (DC37PEOPLE)

Full Name (Last, First, Middle Initial)  
**A. Henry Garrido**

Mailing Address 91 Gotham Ave

City State Zip Code  
Elmont NY 11003

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

Name of Employer Occupation  
District Council 37 Asst Assoc Director of DC37

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
10 / 31 / 2011  
Transaction ID : SA11AI.9985

Amount of Each Receipt this Period  
25.00

Payroll Deduction

Full Name (Last, First, Middle Initial)  
**B. 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 Occupation  
District Council 37, AFSCME Associate Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
880.00

Date of Receipt  
10 / 31 / 2011  
Transaction ID : SA11AI.9986

Amount of Each Receipt this Period  
100.00

Payroll Deduction

Full Name (Last, First, Middle Initial)  
**C. Stephanie Harris**

Mailing Address 4223 Hill Ave

City State Zip Code  
Bronx NY 10466

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

Name of Employer Occupation  
NYC Parks & Recreation Recreation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
10 / 31 / 2011  
Transaction ID : SA11AI.9987

Amount of Each Receipt this Period  
30.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 155.00

**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 12 OF 28  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
 DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

**A. Mr. Tyler Hemingway**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 Sunflow Terrace  
 City Middletown State NY Zip Code 10941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer District Council 37 Occupation Asst Division Director - Hosp.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 31 / 2011  
**Transaction ID : SA11AI.9988**  
 Amount of Each Receipt this Period 50.00  
 Payroll Deduction

**B. Dennis Ifill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 257-37 149th Ave  
 City Rosedale State NY Zip Code 11422  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer City of NY-Rent & Rehab Adm Occupation Local President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 31 / 2011  
**Transaction ID : SA11AI.9990**  
 Amount of Each Receipt this Period 40.00  
 Payroll Deduction

**C. Barbara Ingram-Edmonds**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 34 douth Mill Rd  
 City West Winsor State NJ Zip Code 08550  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer District Council 37, AFSCME Occupation Director of Field Operators  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 880.00

Date of Receipt 10 / 31 / 2011  
**Transaction ID : SA11AI.9991**  
 Amount of Each Receipt this Period 100.00  
 Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 190.00  
**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 13 OF 28  
(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 (DC37PEOPLE)

**A. Dorothy Jelks**  
Full Name (Last, First, Middle Initial)  
Mailing Address 340 Williams  
City Brooklyn State NY Zip Code 11207  
FEC ID number of contributing federal political committee. C  
Name of Employer NYC FIRE DEPARTMENT Occupation CLERICAL ASSOCIATE  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 220.00

Date of Receipt 10 / 31 / 2011  
Transaction ID : SA11AI.9992  
Amount of Each Receipt this Period 30.00  
Payroll Deduction

**B. Beresford Julien**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2061 Fulton Street  
City Brooklyn State NY Zip Code 11233  
FEC ID number of contributing federal political committee. C  
Name of Employer NYC Parks Dept. Occupation City Park worker  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 220.00

Date of Receipt 10 / 31 / 2011  
Transaction ID : SA11AI.9994  
Amount of Each Receipt this Period 30.00  
Payroll Deduction

**C. Barbara Kairson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 43 Hamilton Terrence  
City New York State NY Zip Code 10031  
FEC ID number of contributing federal political committee. C  
Name of Employer District Council 37, AFSCME Occupation Director of DC 37 Education Fund  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 225.00

Date of Receipt 10 / 31 / 2011  
Transaction ID : SA11AI.9996  
Amount of Each Receipt this Period 20.00  
Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... 80.00  
**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 14 OF 28  
(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			

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 (DC37PEOPLE)

**A. Madonna Knight**  
Full Name (Last, First, Middle Initial)  
Mailing Address 282 E 35th Street  
City Brooklyn State NY Zip Code 11203  
FEC ID number of contributing federal political committee. C  
Name of Employer District Council 37, AFSCME Occupation Council Representative  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2011  
Transaction ID : SA11AI.9997  
Amount of Each Receipt this Period 25.00  
Payroll Deduction

**B. Clifford Koppelman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1270 E 19 Street, #1J  
City Brooklyn State NY Zip Code 11230  
FEC ID number of contributing federal political committee. C  
Name of Employer District Council 37, AFSCME Occupation Grievance Representative  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 31 / 2011  
Transaction ID : SA11AI.9998  
Amount of Each Receipt this Period 50.00  
Payroll Deduction

**C. Ramona Lacen**  
Full Name (Last, First, Middle Initial)  
Mailing Address 431 54 St  
City brooklyn State NY Zip Code 11220  
FEC ID number of contributing federal political committee. C  
Name of Employer NYC HHC Occupation enroll rep  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2011  
Transaction ID : SA11AI.9999  
Amount of Each Receipt this Period 30.00  
Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional).....▶ 105.00  
**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 15 OF 28  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
 DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

**A. Jane Latour**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 72 Seaman apt 6b  
 City New York State NY Zip Code 10034  
 FEC ID number of contributing federal political committee. C  
 Name of Employer District Council 37, AFSCME Occupation Associate Editor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2011  
 Transaction ID : SA11AI.10000  
 Amount of Each Receipt this Period 25.00  
 Payroll Deduction

**B. Eugene Lawrence**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2760 Grand Concourse Apt 1B  
 City Bronx State NY Zip Code 10458  
 FEC ID number of contributing federal political committee. C  
 Name of Employer NYC Parks & Recreation Admin Occupation Associate Park Service Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2011  
 Transaction ID : SA11AI.10001  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction

**C. Marva Lewis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5700 Arlington Ave 9u  
 City Riverdale State NY Zip Code 10471  
 FEC ID number of contributing federal political committee. C  
 Name of Employer District Council 37, AFSCME Occupation Division Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2011  
 Transaction ID : SA11AI.10002  
 Amount of Each Receipt this Period 20.00  
 Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75.00  
**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 16 OF 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)**

**A. Cory McCaskey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1235 Woodycrest Ave  
 City Bronx State NY Zip Code 10452  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NYC HHC Occupation Patient Care Assoc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 10 / 31 / 2011  
**Transaction ID : SA11AI.10004**  
 Amount of Each Receipt this Period 25.00  
 Payroll Deduction

**B. Mary McCloud**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 Asch Loop  
 City Bronx State NY Zip Code 10475  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NYC HHC Occupation Patient Care Assoc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 10 / 31 / 2011  
**Transaction ID : SA11AI.10005**  
 Amount of Each Receipt this Period 25.00  
 Payroll Deduction

**C. Adrienne Miller**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 37 Regal Walk  
 City Staten Island State NY Zip Code 10303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Dept of Social Services Occupation Supervisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2011  
**Transaction ID : SA11AI.10006**  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 80.00  
**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 17 OF 28 (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 (DC37PEOPLE)

Full Name (Last, First, Middle Initial) <b>A. Terrence Miller</b>			Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2011 <b>Transaction ID : SA11AI.10007</b>		
Mailing Address 417 Prospect Pl			Amount of Each Receipt this Period 30.00		
City Brooklyn	State NY	Zip Code 11238	Payroll Deduction		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 220.00			
Name of Employer NYC Police Department		Occupation Senior Police Admin. Aide			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name (Last, First, Middle Initial) <b>B. Edwin Negrón</b>			Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2011 <b>Transaction ID : SA11AI.10008</b>		
Mailing Address 80 East 110th St			Amount of Each Receipt this Period 75.00		
City New York	State NY	Zip Code 10029	Payroll Deduction		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 550.00			
Name of Employer City of New York Admin Service		Occupation CITY CUSTODIAL ASST			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name (Last, First, Middle Initial) <b>C. Ralph Pepe</b>			Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2011 <b>Transaction ID : SA11AI.10011</b>		
Mailing Address 125 E.17th Street			Amount of Each Receipt this Period 40.00		
City New York	State NY	Zip Code 10003	Payroll Deduction		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 440.00			
Name of Employer District Council 37, AFSCME		Occupation Real Estate Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	145.00
<b>TOTAL</b> 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 18 OF 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)**

**A. Deborah Pitts**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4286 Conashaugh Lks  
 City Milford State PA Zip Code 18337  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer District Council 37, AFSCME Occupation Grievance Representative  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 31 / 2011  
**Transaction ID : SA11AI.10012**  
 Amount of Each Receipt this Period 45.00  
 Payroll Deduction

**B. Togba Porte**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 20346  
 City Staten Island State NY Zip Code 10302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Local 420 AFSCME AFL-CIO Occupation Vice President- Local 420  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2011  
**Transaction ID : SA11AI.10014**  
 Amount of Each Receipt this Period 25.00  
 Payroll Deduction

**C. Walthene Primus**  
 Full Name (Last, First, Middle Initial)  
 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, AFSCME Occupation Grievance Representative  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 31 / 2011  
**Transaction ID : SA11AI.10015**  
 Amount of Each Receipt this Period 40.00  
 Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 110.00  
**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 19 OF 28  
(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"/>	<input type="checkbox"/>	<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 (DC37PEOPLE)

Full Name (Last, First, Middle Initial)  
**A. Darryl Ramsey**

Mailing Address 189-10 Williamson Ave.

City State Zip Code  
Springflds Grd NY 11413

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

Name of Employer Occupation  
DC 37 Grievance Rep

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
10 / 31 / 2011  
**Transaction ID : SA11AI.10017**

Amount of Each Receipt this Period  
30.00

Payroll Deduction

Full Name (Last, First, Middle Initial)  
**B. Wendell Reid**

Mailing Address 29 Marion Ave

City State Zip Code  
Hartsdale NY 10530

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

Name of Employer Occupation  
District Council 37, AFSCME Council Representative

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  
10 / 31 / 2011  
**Transaction ID : SA11AI.10018**

Amount of Each Receipt this Period  
25.00

Payroll Deduction

Full Name (Last, First, Middle Initial)  
**C. Michael Riggio**

Mailing Address 38-24 Corporal Stone S

City State Zip Code  
Bayside NY 11361

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

Name of Employer Occupation  
District Council 37, AFSCME Council Rep

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
10 / 31 / 2011  
**Transaction ID : SA11AI.10019**

Amount of Each Receipt this Period  
30.00

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 85.00

**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 20 OF 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)**

**A. Lillian Roberts**  
 Full Name (Last, First, Middle Initial)  
 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, AFSCME Occupation Executive Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2420.00

Date of Receipt 10 / 31 / 2011  
**Transaction ID : SA11AI.10020**  
 Amount of Each Receipt this Period 275.00  
 Payroll Deduction

**B. Edward Rodriquez**  
 Full Name (Last, First, Middle Initial)  
 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 ▼ 1100.00

Date of Receipt 10 / 31 / 2011  
**Transaction ID : SA11AI.10021**  
 Amount of Each Receipt this Period 125.00  
 Payroll Deduction

**C. Alma Roper**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 115-24 165th Street  
 City Jamaica State NY Zip Code 11434  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer district Council 37 Occupation Representative  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 222.00

Date of Receipt 10 / 31 / 2011  
**Transaction ID : SA11AI.10022**  
 Amount of Each Receipt this Period 20.00  
 Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 420.00  
**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 21 OF 28  
(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 (DC37PEOPLE)

**A. K G Sabater**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1566 Macombs Rd  
City Bronx State NY Zip Code 10452  
FEC ID number of contributing federal political committee. C  
Name of Employer Dept. of Social Services Occupation Case Workers  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 220.00

Date of Receipt 10 / 31 / 2011  
Transaction ID : SA11AI.10023  
Amount of Each Receipt this Period 30.00  
Payroll Deduction

**B. Jose Sierra**  
Full Name (Last, First, Middle Initial)  
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, AFSCME Occupation Division Director  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 440.00

Date of Receipt 10 / 31 / 2011  
Transaction ID : SA11AI.10025  
Amount of Each Receipt this Period 50.00  
Payroll Deduction

**C. Kyle Simmons**  
Full Name (Last, First, Middle Initial)  
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, AFSCME Occupation Grievance Representative  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 220.00

Date of Receipt 10 / 31 / 2011  
Transaction ID : SA11AI.10026  
Amount of Each Receipt this Period 30.00  
Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... 110.00  
**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 22 OF 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)**

**A. Yvonne Singh**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 501 E 145th St  
 City Bronx State NY Zip Code 10454  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Triboro Bridge & Tunnel Auth. Occupation: Clerical Assoc.  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **220.00**

Date of Receipt: 10 / 31 / 2011  
**Transaction ID : SA11AI.10027**  
 Amount of Each Receipt this Period: 200.00  
 Payroll Deduction

**B. John Smith**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O.BOX 199  
 City BRONX State NY Zip Code 10451  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: City University of New York Occupation: City Custodial Asst.  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **220.00**

Date of Receipt: 10 / 31 / 2011  
**Transaction ID : SA11AI.10028**  
 Amount of Each Receipt this Period: 30.00  
 Payroll Deduction

**C. David Stevens**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23 Water Grant St  
 City Yonkers State NY Zip Code 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 **437.36**

Date of Receipt: 10 / 31 / 2011  
**Transaction ID : SA11AI.10029**  
 Amount of Each Receipt this Period: 39.76  
 Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... **89.76**  
**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 23 OF 28 (check only one)
<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 (DC37PEOPLE)

**A. Barbra Terrelonge**  
Full Name (Last, First, Middle Initial)  
Mailing Address 38 Hull Street  
City Brooklyn State NY Zip Code 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 440.00

Date of Receipt 10 / 31 / 2011  
Transaction ID : SA11AI.10031  
Amount of Each Receipt this Period 50.00  
Payroll Deduction

**B. James Tucciarelli**  
Full Name (Last, First, Middle Initial)  
Mailing Address 361 Mill Rd.  
City Staten Island State NY Zip Code 10306  
FEC ID number of contributing federal political committee. C  
Name of Employer District Council 37, AFSCME Occupation Grievance Representative  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 440.00

Date of Receipt 10 / 31 / 2011  
Transaction ID : SA11AI.10032  
Amount of Each Receipt this Period 50.00  
Payroll Deduction

**C. Esther Tucker**  
Full Name (Last, First, Middle Initial)  
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  
Name of Employer District Council 37, ASFCME Occupation Grievance Representative  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date 220.00

Date of Receipt 10 / 31 / 2011  
Transaction ID : SA11AI.10033  
Amount of Each Receipt this Period 20.00  
Payroll Deduction

**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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 28  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
 DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

**A. Maf Uddin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 161-17 85th Ave  
 City Jamiaca Hills State NY Zip Code 11432  
 FEC ID number of contributing federal political committee. C  
 Name of Employer District Council 37, AFSCME Occupation Treasurer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 220.00

Date of Receipt 10 / 31 / 2011  
 Transaction ID : SA11AI.10035  
 Amount of Each Receipt this Period 25.00  
 Payroll Deduction

**B. Robin Vall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7508 Bell Blvd apt 1n  
 City Bayside State NY Zip Code 11364  
 FEC ID number of contributing federal political committee. C  
 Name of Employer NY Dept . of Admin. Service Occupation Clerical Associate  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 220.00

Date of Receipt 10 / 31 / 2011  
 Transaction ID : SA11AI.10036  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction

**C. Cesar Vasquez**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 969  
 City New York State NY Zip Code 10029  
 FEC ID number of contributing federal political committee. C  
 Name of Employer NYC Board of Education Occupation Community Associate  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 220.00

Date of Receipt 10 / 31 / 2011  
 Transaction ID : SA11AI.10037  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional)..... 85.00  
**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 25 OF 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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 (DC37PEOPLE)**

**A. Martin Velasquez**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 96 Wenlock Street  
 City Staten Island State NY Zip Code 10303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NY State Board of Higher Educa Occupation City Laborer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2011  
**Transaction ID : SA11AI.10038**  
 Amount of Each Receipt this Period 200.00  
 Payroll Deduction

**B. Barbara Watkins**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 294 Osborn St  
 City Brooklyn State NY Zip Code 11212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NYC ADMINISTRATIVE SERVICES Occupation CITY CUSTODIAL ASST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 352.00

Date of Receipt 10 / 31 / 2011  
**Transaction ID : SA11AI.10039**  
 Amount of Each Receipt this Period 48.00  
 Payroll Deduction

**C. Kenneth Wheeler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 Teller Ave. apt 2G  
 City Bronx State NY Zip Code 10456  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NYC Parks & Recreation Admin Occupation Associate Park Service Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2011  
**Transaction ID : SA11AI.10041**  
 Amount of Each Receipt this Period 30.00  
 Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	98.00
<b>TOTAL</b> 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 26 OF 28
	<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 (DC37PEOPLE)

Full Name (Last, First, Middle Initial) <b>A. Chris Wilgenkamp</b>		Date of Receipt 10 / 31 / 2011 <b>Transaction ID : SA11AI.10042</b>
Mailing Address 2415 wolson Ave		Amount of Each Receipt this Period 25.00
City Bronx	State NY	Zip Code 10469
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer District Council 37, AFSCME	Occupation Asst Divison Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B. Sheryl Williams</b>		Date of Receipt 10 / 31 / 2011 <b>Transaction ID : SA11AI.10043</b>
Mailing Address 475 Willson Avenue Apt 1D		Amount of Each Receipt this Period 30.00
City Brooklyn	State NY	Zip Code 11221
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer NYC Finance Administration	Occupation COMPUTER ASSOC.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) <b>C. Wanda Williams</b>		Date of Receipt 10 / 31 / 2011 <b>Transaction ID : SA11AI.10044</b>
Mailing Address 25 Roy Lane		Amount of Each Receipt this Period 25.00
City Highland	State NY	Zip Code 12528
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer District Council 37, AFSCME	Occupation Director of Political Action & Legisla	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.00
<b>TOTAL</b> 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 27 OF 28  
(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 (DC37PEOPLE)

**A. Mercedes Youman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 345 E 93rd St  
16h  
City NY State NY Zip Code 10128  
FEC ID number of contributing federal political committee. C  
Name of Employer NYC Health Dept. Occupation Public Health Nurse  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2011  
Transaction ID : SA11AI.10045  
Amount of Each Receipt this Period  
60.00  
Payroll Deduction

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2671.22

**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 (DC37PEOPLE)

Full Name (Last, First, Middle Initial) <b>A. AMERICAN FEDERATION OF STATE COUNTY &amp; MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED</b>		Date of Disbursement MM / DD / YYYY 10 / 25 / 2011
Mailing Address 1625 L STREET NW		<b>Transaction ID : SB22.10046</b>
City WASHINGTON	State DC	
Zip Code 20036	Purpose of Disbursement Transfer	Amount of Each Disbursement this Period 50222.74
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		<b>Amount of Each Disbursement this Period</b>
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		<b>Amount of Each Disbursement this Period</b>
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	50222.74
<b>TOTAL</b> This Period (last page this line number only).....▶	50222.74