

**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
 AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
 ED

ADDRESS (number and street) 1625 L STREET NW
 Check if different than previously reported. (ACC) WASHINGTON DC 20036

2. **FEC IDENTIFICATION NUMBER** C00011114
 3. **IS THIS REPORT** X **NEW (N)** **OR** **AMENDED (A)**

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

5. Covering Period 01 01 2002 through 01 31 2002

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

Type or Print Name of Treasurer WILLIAM LUCY
 Signature of Treasurer Electronically Filed by WILLIAM LUCY Date 02 19 2002

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/2001)

Page 2

Write or Type Committee Name

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED

Report Covering the Period: From: ^h 0 1 ^d 0 1 ^y 2 0 0 2 To: ^h 0 1 ^d 3 1 ^y 2 0 0 2

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^y 2 0 0 2		660986.66
(b) Cash on Hand at Beginning of Reporting Period	660986.66	
(c) Total Receipts (from Line 19)	353615.82	353615.82
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1014602.48	1014602.48
7. Total Disbursements (from Line 30)	230107.05	230107.05
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	784495.43	784495.43
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**

FEC Form 3X (Revised 1/2001)

Page 3

Write or Type Committee Name

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED

Report Covering the Period: From: ^{MM}01 ^{DD}01 ^{YYYY}2002 To: ^{MM}01 ^{DD}31 ^{YYYY}2002

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)	276.00	
(ii) Unitemized	307139.21	
(iii) TOTAL (add Lines 11(a)(i) and (ii)	307415.21	307415.21
(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 32, page 4)	307415.21	307415.21
12. Transfers From Affiliated/Other Party Committees	45448.55	45448.55
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 36, page 4)	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.)	752.06	752.06
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	353615.82	353615.82
20. Total Federal Receipts (subtract Line 18 from Line 19)	353615.82	353615.82

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Revised 1/2001)

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.....	1107.05	1107.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1107.05	1107.05
22. Transfers to Affiliated/Other Party Committees.....	190000.00	190000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	39000.00	39000.00
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. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)..... ▶	230107.05	230107.05
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)..... ▶	230107.05	230107.05
<hr/>		
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3).....	307415.21	307415.21
33. Total Contribution Refunds (from Line 28(d)).....	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32).....	307415.21	307415.21
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ▶	1107.05	1107.05
36. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35)..... ▶	1107.05	1107.05

**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 5 / 13
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED

Full Name (Last, First, Middle Initial)
A. Joseph Peckman

Mailing Address
6B Sefton Drive

City State Zip Code
Cranston RI 02905

Date of Receipt
 M M / D D / Y Y Y Y
01 24 2002

FEC ID number of contributing federal political committee. Amount of Each Receipt this Period
276.00

Name of Employer AFSCME RI CN 94	Occupation Business Agent
--	-------------------------------------

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **276.00**

Transaction ID: SA11A1.13891

B.

C.

SUBTOTAL of Receipts This Page (optional)	▶	276.00
TOTAL This Period (last page this line number only)	▶	276.00

**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 / 13	
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input checked="" type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED

Full Name (Last, First, Middle Initial)
A. DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY

Mailing Address
PO BOX 2882 CHURCH STREET STATION
City State Zip Code
NEW YORK NY 10007

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

FEC ID number of contributing federal political committee. C00149211

Amount of Each Receipt this Period 43448.55

Name of Employer Occupation TRANSFERS FROM AFFILIATED COMMITTEE

Receipt For: Aggregate Year-to-Date ▼
Primary General Other (specify) ▼ 43448.55

Transaction ID: SA12.14119

Full Name (Last, First, Middle Initial)
B. DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY

Mailing Address
PO BOX 2882 CHURCH STREET STATION
City State Zip Code
NEW YORK NY 10007

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

FEC ID number of contributing federal political committee. C00149211

Amount of Each Receipt this Period 2000.00

Name of Employer Occupation TRANSFERS FROM AFFILIATED COMMITTEE

Receipt For: Aggregate Year-to-Date ▼
Primary General Other (specify) ▼ 45448.55

Transaction ID: SA12.14120

C.

SUBTOTAL of Receipts This Page (optional)	▶	45448.55
TOTAL This Period (last page this line number only)	▶	45448.55

**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 / 13
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED

A. Full Name (Last, First, Middle Initial)
AMALGAMATED BANK- Federal Account

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

Mailing Address
11-15 UNION SQUARE WEST

City State Zip Code
NEW YORK NY 10003

Amount of Each Receipt this Period
706.46

FEC ID number of contributing federal political committee.

Name of Employer Occupation INTEREST

Receipt For: Aggregate Year-to-Date ▼
Primary General Other (specify) ▼ 706.46

Transaction ID: SA17.14125

B. Full Name (Last, First, Middle Initial)
RUSHMORE INVESTMENT

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

Mailing Address
4922 FAIRMONT AVENUE

City State Zip Code
BETHESDA MD 20814

Amount of Each Receipt this Period
45.60

FEC ID number of contributing federal political committee.

Name of Employer Occupation DIVIDENDS

Receipt For: Aggregate Year-to-Date ▼
Primary General Other (specify) ▼ 45.60

Transaction ID: SA17.14131

C.

SUBTOTAL of Receipts This Page (optional)	▶	752.06
TOTAL This Period (last page this line number only)	▶	752.06

**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 6 / 13

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26	<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29
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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED

Full Name (Last, First, Middle Initial) A. AMALGAMATED BANK- Federal Account		Date of Disbursement 01 / 31 / 2002	
Mailing Address 11-15 UNION SQUARE WEST City NEW YORK State NY Zip Code 10003		Amount of Each Disbursement this Period 491.58	
Purpose of Disbursement BANK FEES		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.14123	
State: District:			

Full Name (Last, First, Middle Initial) B. RIGGS NATIONAL BANK		Date of Disbursement 01 / 31 / 2002	
Mailing Address LINCOLN OFFICE City WASHINGTON State DC Zip Code 20074-6758		Amount of Each Disbursement this Period 615.47	
Purpose of Disbursement BANK FEES		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.14122	
State: District:			

C.

SUBTOTAL of Disbursements This Page (optional)	1107.05
TOTAL This Period (last page this line number only)	1107.05

**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)

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<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				

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. AMALGAMATED BANK- NonFederal Account		Date of Disbursement 01 / 08 / 2002
Mailing Address 11-15 UNION SQUARE WEST City NEW YORK, State NY Zip Code 10003		Amount of Each Disbursement this Period 38000.00
Purpose of Disbursement TRANSFER TO AFFILIATED NONFEDERAL CMTE.		Transaction ID: SB22.14025
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. AMALGAMATED BANK- NonFederal Account		Date of Disbursement 01 / 08 / 2002
Mailing Address 11-15 UNION SQUARE WEST City NEW YORK, State NY Zip Code 10003		Amount of Each Disbursement this Period 25000.00
Purpose of Disbursement TRANSFER TO AFFILIATED NONFEDERAL CMTE.		Transaction ID: SB22.14026
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. AMALGAMATED BANK- NonFederal Account		Date of Disbursement 01 / 16 / 2002
Mailing Address 11-15 UNION SQUARE WEST City NEW YORK, State NY Zip Code 10003		Amount of Each Disbursement this Period 28000.00
Purpose of Disbursement TRANSFER TO AFFILIATED NONFEDERAL CMTE.		Transaction ID: SB22.14027
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	91000.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial)

A. AMALGAMATED BANK- NonFederal Account

Mailing Address

11-15 UNION SQUARE WEST

City

NEW YORK,

State

NY

Zip Code

10003

Purpose of Disbursement

TRANSFER TO AFFILIATED NONFEDERAL CMTE.

Candidate Name

Category/
Type

Office Sought:

House

Senate

President

State:

District:

Disbursement For:

Primary

General

Other (specify) ▼

Date of Disbursement

01 M : 28 F : 2002

Amount of Each Disbursement this Period

99000.00

Transaction ID: SB22.14028

B.

C.

SUBTOTAL of Disbursements This Page (optional) ▶

99000.00

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

190000.00

**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 11 / 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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				

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. AMERICANS FOR DEMOCRATIC ACTION INC		Date of Disbursement 01 / 22 / 2002	
Mailing Address 1625 K STREET NW SUITE 210 City: WASHINGTON State: DC Zip Code: 20008		Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement CONTRIBUTION 2002 PAC		Category/ Type	
Candidate Name			
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.14019	
State: District:			

Full Name (Last, First, Middle Initial) B. ELECT KUCINICH TO CONGRESS COMMITTEE		Date of Disbursement 01 / 28 / 2002	
Mailing Address 11808 LORRAINE AVENUE City: CLEVELAND State: OH Zip Code: 44111		Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement CONTRIBUTION 2002		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.14022	
State: OH District: 10			

Full Name (Last, First, Middle Initial) C. INSLEE FOR CONGRESS		Date of Disbursement 01 / 28 / 2002	
Mailing Address PO BOX 33027 City: SEATTLE State: WA Zip Code: 98133		Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement CONTRIBUTION 2002		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: Primary <input type="checkbox"/> <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.14021	
State: WA District: 01			

SUBTOTAL of Disbursements This Page (optional)	15000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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				

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. LONE STAR FUND		Date of Disbursement 01 / 22 / 2002
Mailing Address 469 S. CAPITOL STREET SW SUITE 210A City State Zip Code WASHINGTON DC 20003		Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement CONTRIBUTION 2002 PAC		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB23.14016
State: District:		

Full Name (Last, First, Middle Initial) B. NARAL PAC (NATL ABORTION & REPROD ACTION LEAGUE)		Date of Disbursement 01 / 22 / 2002
Mailing Address 1158 15TH ST NW 7TH FLOOR 5TH FLOOR City State Zip Code WASHINGTON DC 20005		Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement CONTRIBUTION 2002 PAC		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB23.14130
State: District:		

Full Name (Last, First, Middle Initial) C. PARTICIPATION 2000 INC		Date of Disbursement 01 / 22 / 2002
Mailing Address 236 MASSACHUSETTS AVENUE NE SUITE 206 City State Zip Code WASHINGTON DC 20002		Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement CONTRIBUTION 2002 PAC		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB23.14011
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	12500.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 13

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-
ED

Full Name (Last, First, Middle Initial) A. TED STRICKLAND FOR CONGRESS		Date of Disbursement 01 / 28 / 2002	
Mailing Address PO BOX 580 City State Zip Code LUCASVILLE OH 45648		Amount of Each Disbursement this Period 4000.00	
Purpose of Disbursement CONTRIBUTION 2002		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼		
State: OH District: 06	Transaction ID: SB23.14020		

Full Name (Last, First, Middle Initial) B. VOTERS FOR CHOICE		Date of Disbursement 01 / 22 / 2002	
Mailing Address 1010 WISCONSIN AVE NW, SUITE 410 City State Zip Code WASHINGTON DC 20007		Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement CONTRIBUTION 2002 PAC		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		
State: District:	Transaction ID: SB23.14017		

Full Name (Last, First, Middle Initial) C. WOMEN'S CAMPAIGN FUND INC		Date of Disbursement 01 / 22 / 2002	
Mailing Address 734 15TH STREET NW SUITE 500 City State Zip Code WASHINGTON DC 20005		Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement CONTRIBUTION 2002 PAC		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼		
State: District:	Transaction ID: SB23.14015		

SUBTOTAL of Disbursements This Page (optional)	11500.00
TOTAL This Period (last page this line number only)	39000.00