

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) **American Federation of State, County, and Municipal Employees--Public Employees Organized to Promote Legislative Equality**

ADDRESS (number and street) Check if different than previously reported
1625 L Street, Northwest

CITY, STATE and ZIP CODE
Washington, D.C. 20036

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

FEB 24 12 22 PM '99

2. FEC IDENTIFICATION NUMBER
C00011114

3. This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report

Monthly Report Due On:

- February 20 June 20 October 20
- March 20 July 20 November 20
- April 20 August 20 December 20
- May 20 September 20 January 31

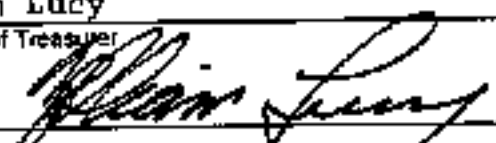
- 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	<u>01/01/99</u> through <u>01/31/99</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>			\$ 7,545,664.69
(b) Cash on Hand at Beginning of Reporting Period		\$ 7,545,664.69	
(c) Total Receipts (from Line 19)		\$ 192,576.69	\$ 192,576.69
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 7,738,241.38	\$ 7,738,241.38
7. Total Disbursements (from Line 30)		\$ 50,399.58	\$ 50,399.58
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 7,687,841.80	\$ 7,687,841.80
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$	For further information contact: Federal Election Commission 888 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-684-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$	

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  Date **02/20/99**

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

FEC FORM 3X
(revised 8/93)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE AFSCME-PEOPLE		REPORT COVERING PERIOD FROM: 01/01/99 TO: 01/31/99	
		COLUMN A Total This Period	COLUMN B Calendar Year
I Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)			
ii. Unitemized		191,341.44	191,341.44
iii. Total (add i and ii) >		191,341.44	191,341.44
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions (add a ii, b and c) >		191,341.44	191,341.44
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)		1,235.25	1,235.25
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		192,576.69	192,576.69
20. Total Federal Receipts (subtract line 18 from line 19) >		192,576.69	192,576.69
II Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share			
b. Other Federal Operating Expenditures		15.60	15.60
c. Total Operating Expenditures (add a i, a ii, and b) >		15.60	15.60
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		32,500.00	32,500.00
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds (add a, b and c) >			
29. Other Disbursements		17,883.98	17,883.98
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		50,399.58	50,399.58
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		50,399.58	50,399.58
III Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)			
33. Total Contribution Refunds (from line 28d)			
34. Net Contributions (other than loans) (subtract line 33 from line 32)			
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >			
36. Offsets to Operating Expenditures (from line 15)			
37. Net Operating Expenditures (subtract line 36 from line 35) >			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **1**
FOR LINE NUMBER **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
Public Employees Organized to Promote Legislative Equality

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rushmore Investment 4922 Fairmont Avenue Bethesda, MD 20814	Interest	01/31/99	1,235.25
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,235.25	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)	1,235.25
TOTAL This Period (last page this line number only)	1,235.25

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE **1** OF **1**
FOR LINE NUMBER **23**

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NAME OF COMMITTEE (in Full) **American Federation of State, County and Municipal Employees Public Employees Organized to Promote Legislative Equality**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Contrib	Date (month, day, year)	Amount of Each Disbursement This Period
Bonior for Congress 237 S. Gratiot Mt. Clemens, MI 48043	Rep. David Bonior D/MI/10	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	1/22/99	5,000.00
Clay Campaign Committee 5011 North Kings Highway Blvd St. Louis, MO 63115	Rep. William Clay D/MO/01	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	1/22/99	5,000.00
Gephardt in Congress Committee 7435 Watson Road, Ste 107 St. Louis, MO 63119	Rep. Richard Gephardt D/MO/03	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	1/22/99	5,000.00
Menendez Campaign Committee P.O. Box 846 Union City, NJ 07306	Rep. Robert Menendez D/NJ/13	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	1/22/99	5,000.00
Rangel for Congress Committee 2030 Allen Place, NW Washington, DC 20009	Rep. Charles Rangel D/NY/15	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	1/22/99	5,000.00
Martin Frost Campaign Committee P.O. Box 4219 Dallas, TX 75208	Rep. Martin Frost D/TX/24	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	1/22/99	5,000.00
Levin for Congress Committee 16300 West Nine Mile Rd Southfield, MI 48675	Rep. Sandler Levin D/MI/12	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	1/25/98	2,500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) **32,500.00**

TOTAL This Period (last page this line number only) **32,500.00**

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full) American Federation of State, County and Municipal Employees
Public Employees Organized to Promote Legislative Equality

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Democrats 2000-Fed Acct Mr. Tom Hatery 1311 L Street, NW, Ste 300 Washington, DC 20005	Contrib PAC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1999	1/12/99	2,500.00
B. Full Name, Mailing Address and ZIP Code NARAL - Fed Acct Ms Kate Michelman 1158 15th Street, NW, Ste 700 Washington, DC 20005	Contrib PAC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1999	1/12/99	5,000.00
C. Full Name, Mailing Address and ZIP Code Lone Star Fund - Fed Acct Rep. Martin Frost Dallas, TX 75208	Contrib PAC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1999	1/12/99	5,000.00
D. Full Name, Mailing Address and ZIP Code Personal Service Company-Fed Acct Mr. John Martin 1129 South Grand Ave, PO Box 4588 Springfield, IL 62708	Contrib (Inkind) PAC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1999	1/22/99	388.98
E. Full Name, Mailing Address and ZIP Code AMERIPAC-Fed Acct 1341 G. Street, NW, Ste 200 Washington, DC 20005	Contrib PAC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1999	1/14/99	5,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) 17,883.98

TOTAL This Period (last page this line number only) 17,883.98

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 2-20-99
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>SH</i>	2-24-99
PREPARER	DATE PREPARED