

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

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

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
- Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
- Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on / / in the State of

(d) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period / / through / /

10 / 18 / 2012 through 11 / 26 / 2012

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 LAURA REYES

Signature of Treasurer LAURA REYES [Electronically Filed] Date / /

03 / 14 / 2013

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 (Rev. 02/2003)

Write or Type Committee Name

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

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="2012"/>	<input type="text" value="5966055.18"/>	<input type="text" value="5966055.18"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="383529.61"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="865928.76"/>	<input type="text" value="12021443.93"/>
(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="1249458.37"/>	<input type="text" value="17987499.11"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="696582.24"/>	<input type="text" value="17434622.98"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="552876.13"/>	<input type="text" value="552876.13"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="3500000.00"/>	

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

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

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).....	74664.31	585991.51
(ii) Unitemized	706670.45	6722688.15
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	781334.76	7308679.66
(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)	781334.76	7308679.66
12. Transfers From Affiliated/Other Party Committees.....	84256.60	581274.27
13. All Loans Received	0.00	4100000.00
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	7966.09
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	6500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	337.40	17023.91
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))..... ▶	865928.76	12021443.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	865928.76	12021443.93

DETAILED SUMMARY PAGE
of Disbursements

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	-2713162.20	456516.53
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	-2713162.20	456516.53
22. Transfers to Affiliated/Other Party Committees.....	41300.00	2228444.55
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30000.00	1693500.00
24. Independent Expenditures (use Schedule E)	2738665.44	12449401.60
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	600000.00	600000.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	-221.00	6760.30
(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)).....	-221.00	6760.30
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)) ..	696582.24	17434622.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	696582.24	17434622.98

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	781334.76	7308679.66
34. Total Contribution Refunds (from Line 28(d))	-221.00	6760.30
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	781555.76	7301919.36
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	-2713162.20	456516.53
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	7966.09
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-2713162.20	448550.44

**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 846
	<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	

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

Full Name (Last, First, Middle Initial) A. JEFFREY S. ABBE		Date of Receipt
Mailing Address P.O. Box 486		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Harold	KY	41635
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.276343
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="63.62"/>
Name of Employer	Occupation	
AFSCME INT'L	ORGANIZER II	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1302.12"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. JEFFREY S. ABBE		Date of Receipt
Mailing Address P.O. Box 486		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Harold	KY	41635
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.276538
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="63.62"/>
Name of Employer	Occupation	
AFSCME INT'L	ORGANIZER II	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1365.74"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. KAREN ABBIATICI		Date of Receipt
Mailing Address 4602 W. Barlind		<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
City	State	Zip Code
Pittsburgh	PA	15227
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.279599
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="48.66"/>
Name of Employer	Occupation	
AFSCME PA CN 13	SECRETARY	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="531.90"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="175.90"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ARNOLD D. ABE
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 1208

City Haiku	State HI	Zip Code 96708
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME HI LOC 152	Occupation STAFF REPRESENTATIVE
---------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **231.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.280389

Amount of Each Receipt this Period

45.00	45.00	45.00	45.00	45.00
231.00				

B. RICHARD ABELSON
Full Name (Last, First, Middle Initial)
Mailing Address 4315 N. Lake Drive

City Shorewood	State WI	Zip Code 53211
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WI CN 48	Occupation EXECUTIVE DIRECTOR
-------------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **854.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276313

Amount of Each Receipt this Period

45.00	45.00	45.00	45.00	45.00
14.00				

C. HOWARD ABERNATHY
Full Name (Last, First, Middle Initial)
Mailing Address 13268 Wellesley Drive

City Pickerington	State OH	Zip Code 43147
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation PROGRAMMER/ANALYST V
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.278280

Amount of Each Receipt this Period

45.00	45.00	45.00	45.00	45.00
10.00				

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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 8 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. HOWARD ABERNATHY
Full Name (Last, First, Middle Initial)

Mailing Address 13268 Wellesley Drive

City Pickerington State OH Zip Code 43147

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation PROGRAMMER/ANALYST V

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 02 / 2012**

Transaction ID : SA11AI.278638

Amount of Each Receipt this Period **10.00**

B. HOWARD ABERNATHY
Full Name (Last, First, Middle Initial)

Mailing Address 13268 Wellesley Drive

City Pickerington State OH Zip Code 43147

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation PROGRAMMER/ANALYST V

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 16 / 2012**

Transaction ID : SA11AI.278996

Amount of Each Receipt this Period **10.00**

C. TRACEY ABMAN
Full Name (Last, First, Middle Initial)

Mailing Address 3136 N. Seminary Avenue

City Chicago State IL Zip Code 60657-3309

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

Name of Employer AFSCME IL CN 31 Occupation DIRECTOR OF ORGANIZER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **934.20**

Date of Receipt **11 / 01 / 2012**

Transaction ID : SA11AI.279510

Amount of Each Receipt this Period **87.72**

SUBTOTAL of Receipts This Page (optional)..... **107.72**

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 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CATHYRN ACTON
Full Name (Last, First, Middle Initial)

Mailing Address 190 W. Ostend Street
Suite 101

City Baltimore State MD Zip Code 21230

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

Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **641.52**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2012

Transaction ID : SA11AI.279972

Amount of Each Receipt this Period
58.32

B. DAVID ADAM
Full Name (Last, First, Middle Initial)

Mailing Address 468 Hudson Avenue

City Newark State OH Zip Code 43055

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

Name of Employer AFSCME OH LOC 4 Occupation ORGANIZER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 24 / 2012

Transaction ID : SA11AI.280149

Amount of Each Receipt this Period
20.00

C. DAVID ADAM
Full Name (Last, First, Middle Initial)

Mailing Address 468 Hudson Avenue

City Newark State OH Zip Code 43055

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

Name of Employer AFSCME OH LOC 4 Occupation ORGANIZER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2012

Transaction ID : SA11AI.280203

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	98.32
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 10 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. THERESA M. ADAMS
Full Name (Last, First, Middle Initial)

Mailing Address 1187 Baby Doll Road SE

City Port Orchard	State WA	Zip Code 98366
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		25		2012

Transaction ID : SA11AI.276750

Amount of Each Receipt this Period
12.00

B. THERESA M. ADAMS
Full Name (Last, First, Middle Initial)

Mailing Address 1187 Baby Doll Road SE

City Port Orchard	State WA	Zip Code 98366
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		09		2012

Transaction ID : SA11AI.277042

Amount of Each Receipt this Period
12.00

C. THERESA M. ADAMS
Full Name (Last, First, Middle Initial)

Mailing Address 1187 Baby Doll Road SE

City Port Orchard	State WA	Zip Code 98366
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		26		2012

Transaction ID : SA11AI.277627

Amount of Each Receipt this Period
12.00

SUBTOTAL of Receipts This Page (optional).....▶	36.00
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 11 OF 846
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input 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

Full Name (Last, First, Middle Initial) A. ADIL AHMED		Date of Receipt
Mailing Address 190 W. Ostend Street Suite 101		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City	State	Zip Code
Baltimore	MD	21230
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.279973
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="42.08"/>
Name of Employer	Occupation	
AFSCME MD CN 982	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="462.88"/>	

Full Name (Last, First, Middle Initial) B. AUDREY AHRENS		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
Olympia	WA	98501
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.276751
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="11.00"/>
Name of Employer	Occupation	
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) C. AUDREY AHRENS		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City	State	Zip Code
Olympia	WA	98501
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.277043
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="11.00"/>
Name of Employer	Occupation	
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="231.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="64.08"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 12 OF 846
	<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	<input 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

Full Name (Last, First, Middle Initial) A. AUDREY AHRENS		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277628
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="11.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="242.00"/>	

Full Name (Last, First, Middle Initial) B. SAMUEL K. AH YUEN JR.		Date of Receipt
Mailing Address 1239 Gulick Avenue		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City Honolulu	State HI	Zip Code 96819
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.280390
Name of Employer AFSCME HI LOC 152		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="21.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="231.00"/>	

Full Name (Last, First, Middle Initial) C. AUDREY AKI		Date of Receipt
Mailing Address 66-370 Paalaa Road		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City Haleiwa	State HI	Zip Code 96712
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.280391
Name of Employer AFSCME HI LOC 152		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="275.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="57.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 13 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. GERALD T AKO		Date of Receipt
Mailing Address 888 Mililani Street Suite 601		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code
Honolulu	HI	96813-2991
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.280392
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME HI LOC 152	STAFF REPRESENTATIVE	<input type="text" value=""/>
Receipt For:	Aggregate Year-to-Date ▼	<input type="text" value="25.00"/>
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value=""/>	<input type="text" value="275.00"/>
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MUSILIU ADE ALAGBALA		Date of Receipt
Mailing Address 5701 N. Sheridan #10A		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code
Chicago	IL	60660
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.279512
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME IL CN 31	STAFF REPRESENTATIVE	<input type="text" value=""/>
Receipt For:	Aggregate Year-to-Date ▼	<input type="text" value="69.76"/>
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value=""/>	<input type="text" value="697.60"/>
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. SUMBUL ALAM		Date of Receipt
Mailing Address 190 W. Ostend Street Suite 101		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code
Baltimore	MD	21230
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.279974
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME MD CN 982	STAFF REPRESENTATIVE	<input type="text" value=""/>
Receipt For:	Aggregate Year-to-Date ▼	<input type="text" value="39.16"/>
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value=""/>	<input type="text" value="430.76"/>
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="133.92"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 14 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. THORNTON P. ALBERG			Date of Receipt		
Mailing Address 615 136th Street E			M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2012		
City Tacoma State WA Zip Code 98445			Transaction ID : SA11AI.276752		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 25.00		
Name of Employer AFSCME WA CN 28/STATE OF WA		Occupation STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

Full Name (Last, First, Middle Initial) B. THORNTON P. ALBERG			Date of Receipt		
Mailing Address 615 136th Street E			M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2012		
City Tacoma State WA Zip Code 98445			Transaction ID : SA11AI.277044		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 25.00		
Name of Employer AFSCME WA CN 28/STATE OF WA		Occupation STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 525.00			

Full Name (Last, First, Middle Initial) C. THORNTON P. ALBERG			Date of Receipt		
Mailing Address 615 136th Street E			M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2012		
City Tacoma State WA Zip Code 98445			Transaction ID : SA11AI.277629		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 25.00		
Name of Employer AFSCME WA CN 28/STATE OF WA		Occupation STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 550.00			

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 15 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. SHANA ALDERTON
Full Name (Last, First, Middle Initial)

Mailing Address 710 Chippewa Square

City Marquette State MI Zip Code 48955

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **954.41**

Date of Receipt **11 / 07 / 2012**

Transaction ID : SA11AI.279854

Amount of Each Receipt this Period **36.21**

B. SHANA ALDERTON
Full Name (Last, First, Middle Initial)

Mailing Address 710 Chippewa Square

City Marquette State MI Zip Code 48955

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **990.62**

Date of Receipt **11 / 20 / 2012**

Transaction ID : SA11AI.279904

Amount of Each Receipt this Period **36.21**

C. ADRIENNE ALEXANDER
Full Name (Last, First, Middle Initial)

Mailing Address 1423 W 19th Street Apt. 4R

City Chicago State IL Zip Code 60608

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

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **494.09**

Date of Receipt **11 / 01 / 2012**

Transaction ID : SA11AI.279513

Amount of Each Receipt this Period **55.86**

SUBTOTAL of Receipts This Page (optional)..... **128.28**

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 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LISA A. ALEXANDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 5050 Westbrook Street SE
 City Magnolia State OH Zip Code 44643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 445.83

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279786
 Amount of Each Receipt this Period 45.00

B. SHARON J. ALEXANDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 12510 Chalford Lane
 City Bowie State MD Zip Code 20715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation EXECUTIVE OFFICE ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 781.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276344
 Amount of Each Receipt this Period 39.05

C. SHARON J. ALEXANDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 12510 Chalford Lane
 City Bowie State MD Zip Code 20715
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation EXECUTIVE OFFICE ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 820.05

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276539
 Amount of Each Receipt this Period 39.05

SUBTOTAL of Receipts This Page (optional)..... ▶ 123.10
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 17 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. RAUL B. ALFORQUE		Date of Receipt
Mailing Address 1012 NW 85th Street Apt. 102		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Seattle	State WA	Zip Code 98117
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.277912
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="220.00"/>

Full Name (Last, First, Middle Initial) B. KENNETH L. ALLEN		Date of Receipt
Mailing Address 7935 SW Santolina Place		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City Beaverton	State OR	Zip Code 97008-6272
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276314
Name of Employer AFSCME OR CN 75	Occupation EXECUTIVE DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="14.00"/>

Full Name (Last, First, Middle Initial) C. KENNETH L. ALLEN		Date of Receipt
Mailing Address 7935 SW Santolina Place		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City Beaverton	State OR	Zip Code 97008-6272
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.279354
Name of Employer AFSCME OR CN 75	Occupation EXECUTIVE DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="129.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="163.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CONNIE G. ALONZO
Full Name (Last, First, Middle Initial)

Mailing Address 6082 E CR 700S

City Plainfield	State IN	Zip Code 46168
--------------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation FIELD OFFICE ASSISTANT I
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.23**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276345

Amount of Each Receipt this Period

19.38

B. CONNIE G. ALONZO
Full Name (Last, First, Middle Initial)

Mailing Address 6082 E CR 700S

City Plainfield	State IN	Zip Code 46168
--------------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation FIELD OFFICE ASSISTANT I
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **403.61**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SA11AI.276540

Amount of Each Receipt this Period

19.38

C. SHERI-LYN R. AMIMOTO
Full Name (Last, First, Middle Initial)

Mailing Address 2881 Puanani Street

City Lihue	State HI	Zip Code 96766
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME HI LOC 152	Occupation STAFF REPRESENTATIVE
---------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.280393

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional).....▶	58.76
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: (check only one)	PAGE 19 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BRENDA AMUNDSON-WOJTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 165 West Ridge Pike
 City Limerick State PA Zip Code 19468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **286.00**

Date of Receipt **10 / 31 / 2012**
Transaction ID : SA11AI.279709
 Amount of Each Receipt this Period **200.00**

B. BARBARA ANDERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 4301 Executive Park Drive
 City Harrisburg State PA Zip Code 17111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **629.32**

Date of Receipt **11 / 14 / 2012**
Transaction ID : SA11AI.279600
 Amount of Each Receipt this Period **57.58**

C. CAROL A ANDERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 303 Dias Drive
 City Fort Washington State MD Zip Code 20744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ASSOCIATE DIRECTOR, EDUCATION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1050.00**

Date of Receipt **10 / 31 / 2012**
Transaction ID : SA11AI.276346
 Amount of Each Receipt this Period **52.50**

SUBTOTAL of Receipts This Page (optional).....▶	130.08
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 846
	<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	<input 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

A. CAROL A ANDERSON
Full Name (Last, First, Middle Initial)

Mailing Address 303 Dias Drive

City Fort Washington State MD Zip Code 20744

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

Name of Employer AFSCME INT'L Occupation ASSOCIATE DIRECTOR, EDUCATION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1102.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : SA11AI.276541

Amount of Each Receipt this Period
52.50

B. EARLENE ANDERSON
Full Name (Last, First, Middle Initial)

Mailing Address 2396 Highway 22 W

City Muscatine State IA Zip Code 52761

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

Name of Employer AFSCME IA CN 61 Occupation CLERK

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2012

Transaction ID : SA11AI.280063

Amount of Each Receipt this Period
50.00

C. JON ANDERSON
Full Name (Last, First, Middle Initial)

Mailing Address 315 South Park

City Springfield State MN Zip Code 56087

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

Name of Employer AFSCME MN CN 65 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.74**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2012

Transaction ID : SA11AI.280372

Amount of Each Receipt this Period
18.34

SUBTOTAL of Receipts This Page (optional).....▶	120.84
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 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. RHONDA R. ANDERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1414 SE 145th Avenue
 City Portland State OR Zip Code 97233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OR CN 75/STATE OF OR Occupation OFFICE SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.27934
 Amount of Each Receipt this Period 200.00

B. MICHAEL ANDREJCO
 Full Name (Last, First, Middle Initial)
 Mailing Address 5075 Pajabon Drive #201
 City Harrisburg State PA Zip Code 17111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 804.76

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.279601
 Amount of Each Receipt this Period 73.16

C. CONSTANCE ANDREWS
 Full Name (Last, First, Middle Initial)
 Mailing Address 30132 E. Mallard Point Road
 City Grand Rapids State MN Zip Code 55744-9253
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.278093
 Amount of Each Receipt this Period 18.00

SUBTOTAL of Receipts This Page (optional).....▶ 111.16
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 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KEITH J. ANGEL
Full Name (Last, First, Middle Initial)

Mailing Address 2711 Hafton Road

City Columbus	State OH	Zip Code 43204
------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.278287

Amount of Each Receipt this Period
12.00

B. KEITH J. ANGEL
Full Name (Last, First, Middle Initial)

Mailing Address 2711 Hafton Road

City Columbus	State OH	Zip Code 43204
------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.278645

Amount of Each Receipt this Period
12.00

C. KEITH J. ANGEL
Full Name (Last, First, Middle Initial)

Mailing Address 2711 Hafton Road

City Columbus	State OH	Zip Code 43204
------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
272.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2012

Transaction ID : SA11AI.279003

Amount of Each Receipt this Period
12.00

SUBTOTAL of Receipts This Page (optional).....▶	36.00
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 23 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOHN C. ANTHONY
Full Name (Last, First, Middle Initial)

Mailing Address 2591 Bryton Drive

City Powell	State OH	Zip Code 43065
----------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation NETWORK SERVICES TECHNICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2012

Transaction ID : SA11AI.278290

Amount of Each Receipt this Period
12.00

B. JOHN C. ANTHONY
Full Name (Last, First, Middle Initial)

Mailing Address 2591 Bryton Drive

City Powell	State OH	Zip Code 43065
----------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation NETWORK SERVICES TECHNICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2012

Transaction ID : SA11AI.278648

Amount of Each Receipt this Period
12.00

C. JOHN C. ANTHONY
Full Name (Last, First, Middle Initial)

Mailing Address 2591 Bryton Drive

City Powell	State OH	Zip Code 43065
----------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation NETWORK SERVICES TECHNICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2012

Transaction ID : SA11AI.279006

Amount of Each Receipt this Period
12.00

SUBTOTAL of Receipts This Page (optional).....▶	36.00
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 24 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. DAVID ANTLE			Date of Receipt M M / D D / Y Y Y Y Y 11 / 14 / 2012 Transaction ID : SA11AI.279602
Mailing Address P.O. Box 1093			Amount of Each Receipt this Period 115.68
City Moscow	State PA	Zip Code 18444	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1321.77		

Full Name (Last, First, Middle Initial) B. JOHN P. APPELDORN			Date of Receipt M M / D D / Y Y Y Y Y 10 / 19 / 2012 Transaction ID : SA11AI.278292
Mailing Address 16889 Mahoning Avenue			Amount of Each Receipt this Period 16.00
City Lake Milton	State OH	Zip Code 44429	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation MAINTENANCE REPAIR TECH		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00		

Full Name (Last, First, Middle Initial) C. JOHN P. APPELDORN			Date of Receipt M M / D D / Y Y Y Y Y 11 / 02 / 2012 Transaction ID : SA11AI.278650
Mailing Address 16889 Mahoning Avenue			Amount of Each Receipt this Period 16.00
City Lake Milton	State OH	Zip Code 44429	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation MAINTENANCE REPAIR TECH		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 352.00		

SUBTOTAL of Receipts This Page (optional).....▶	147.68
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 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOHN P. APPELDORN
 Full Name (Last, First, Middle Initial)
 Mailing Address 16889 Mahoning Avenue
 City Lake Milton State OH Zip Code 44429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation MAINTENANCE REPAIR TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 368.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279008
 Amount of Each Receipt this Period
 16.00

B. KAREN J. APPLEBY
 Full Name (Last, First, Middle Initial)
 Mailing Address 1291 Canton Street
 City Oberlin State PA Zip Code 17113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.279710
 Amount of Each Receipt this Period
 20.00

C. JOHN R. ARCHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 5330 E. Charleston Blvd #82
 City Las Vegas State NV Zip Code 89142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ORGANIZER II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276347
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	61.00
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 26 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. JOHN R. ARCHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 5330 E. Charleston Blvd #82
 City Las Vegas State NV Zip Code 89142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ORGANIZER II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276542
 Amount of Each Receipt this Period 25.00

B. ALVA ARELLANO
 Full Name (Last, First, Middle Initial)
 Mailing Address 890 Sharps Lot Rd.
 City Swansea State MA Zip Code 02777-0000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MA CN 93 Occupation DIRECTOR OF ORGANIZING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 392.00

Date of Receipt 11 / 07 / 2012
Transaction ID : SA11AI.280006
 Amount of Each Receipt this Period 30.00

C. AMY J. ARNOLD
 Full Name (Last, First, Middle Initial)
 Mailing Address 4434 Cardan Lane
 City Centerburg State OH Zip Code 43011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4 Occupation ACCOUNT CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 24 / 2012
Transaction ID : SA11AI.280150
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
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 27 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. AMY J. ARNOLD
Full Name (Last, First, Middle Initial)

Mailing Address 4434 Cardan Lane

City Centerburg	State OH	Zip Code 43011
--------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 4	Occupation ACCOUNT CLERK
-------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2012

Transaction ID : SA11AI.280204

Amount of Each Receipt this Period

10.00

B. MATTHEW F. ARNOLD
Full Name (Last, First, Middle Initial)

Mailing Address 913 Belford Street

City Caldwell	State OH	Zip Code 43724
------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation HIGHWAY TECHNICIAN 3
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		19		2012

Transaction ID : SA11AI.278294

Amount of Each Receipt this Period

10.00

C. MATTHEW F. ARNOLD
Full Name (Last, First, Middle Initial)

Mailing Address 913 Belford Street

City Caldwell	State OH	Zip Code 43724
------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation HIGHWAY TECHNICIAN 3
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2012

Transaction ID : SA11AI.278652

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 28 OF 846
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MATTHEW F. ARNOLD
Full Name (Last, First, Middle Initial)

Mailing Address 913 Belford Street

City Caldwell State OH Zip Code 43724

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation HIGHWAY TECHNICIAN 3

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279010

Amount of Each Receipt this Period 10.00

B. EDWARD D. ARNOLDI JR.
Full Name (Last, First, Middle Initial)

Mailing Address 213 Mahogany Street

City Mount Carmel State PA Zip Code 17851

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

Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279711

Amount of Each Receipt this Period 20.00

C. DARYL AROLA
Full Name (Last, First, Middle Initial)

Mailing Address 33828 Indiana Drive

City Grand Rapids State MN Zip Code 55744-5254

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

Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 299.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.278094

Amount of Each Receipt this Period 26.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 56.00

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 29 OF 846
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. GLORIA J. ARSENEAU
Full Name (Last, First, Middle Initial)
Mailing Address 2602 Chippewa Drive
City Bourbonnais State IL Zip Code 60914
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME IL CN 31/STATE OF IL Occupation OFFICE COORDINATOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 456.00

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279379
Amount of Each Receipt this Period 60.00

B. MICHAEL L. ARTZ
Full Name (Last, First, Middle Initial)
Mailing Address 745 Irving Street NW
City Washington State DC Zip Code 20010
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME INT'L Occupation ASSOCIATE GENERAL COUNSEL I
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 903.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276348
Amount of Each Receipt this Period 45.15

C. MICHAEL L. ARTZ
Full Name (Last, First, Middle Initial)
Mailing Address 745 Irving Street NW
City Washington State DC Zip Code 20010
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME INT'L Occupation ASSOCIATE GENERAL COUNSEL I
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 948.15

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276543
Amount of Each Receipt this Period 45.15

SUBTOTAL of Receipts This Page (optional).....▶ 150.30
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 30 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ELIZABETH L ASAHARA
 Full Name (Last, First, Middle Initial)
 Mailing Address 902 Hoalauna Way
 City Hilo State HI Zip Code 96720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME HI LOC 152 Occupation NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.280394
 Amount of Each Receipt this Period 200.00

B. LAURA M. ASKELIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1031 4th Avenue S.E.
 City Rochester State MN Zip Code 55904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MN CN 5/CN14 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 593.61

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.280022
 Amount of Each Receipt this Period 54.44

C. JALADAH ASLAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 3895 Cannon Road
 City Austintown State OH Zip Code 44515-5372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279787
 Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional).....▶ 114.44
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 31 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. ANNETTE ATKINS		Date of Receipt
Mailing Address P.O. Box 2572		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.279381
Country Club Hills	IL	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="60.00"/>
Name of Employer	Occupation	
AFSCME IL CN 31/STATE OF IL	CASEWORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="420.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. DOMINGO AVILA		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.276760
Olympia	WA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="10.50"/>
Name of Employer	Occupation	
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. DOMINGO AVILA		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.277052
Olympia	WA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="10.50"/>
Name of Employer	Occupation	
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.50"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="81.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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 32 OF 846
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input 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

Full Name (Last, First, Middle Initial) A. DOMINGO AVILA		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11AI.277637
Mailing Address 1212 Jefferson St., SE Suite 300		Amount of Each Receipt this Period 40.50
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.00	

Full Name (Last, First, Middle Initial) B. WILLIAM J. BACKES		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 18 / 2012 Transaction ID : SA11AI.277622
Mailing Address 14 W Newhaven Circle		Amount of Each Receipt this Period 10.00
City Madison	State WI	Zip Code 53717
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME WI CN 24/STATE OF WI	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. WILLIAM J. BACKES		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 07 / 2012 Transaction ID : SA11AI.277623
Mailing Address 14 W Newhaven Circle		Amount of Each Receipt this Period 20.00
City Madison	State WI	Zip Code 53717
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME WI CN 24/STATE OF WI	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional).....▶	40.50
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 33 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. PRISCILLA A. BADUA
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 390
 City Hanapepe State HI Zip Code 96716-0390
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 403.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.280395
 Amount of Each Receipt this Period
 25.00

B. JOE BAESSLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2512 NE 50th
 City Portland State OR Zip Code 97213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OR CN 75 Occupation COUNCIL REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.279356
 Amount of Each Receipt this Period
 80.00

C. DAWN M. BAILEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4060 LaPlante Road
 City Monclova State OH Zip Code 43542
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.72

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.279788
 Amount of Each Receipt this Period
 51.34

SUBTOTAL of Receipts This Page (optional).....▶ 156.34
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 34 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KAREN S. BAILEY
Full Name (Last, First, Middle Initial)

Mailing Address 1277 Circle 182

City Kitts Hill	State OH	Zip Code 45645
--------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 4	Occupation FIELD REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
404.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2012

Transaction ID : SA11AI.280151

Amount of Each Receipt this Period
19.24

B. KAREN S. BAILEY
Full Name (Last, First, Middle Initial)

Mailing Address 1277 Circle 182

City Kitts Hill	State OH	Zip Code 45645
--------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 4	Occupation FIELD REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
423.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2012

Transaction ID : SA11AI.280205

Amount of Each Receipt this Period
19.24

C. KENNETH BAILEY
Full Name (Last, First, Middle Initial)

Mailing Address 1034 N. Washington Avenue

City Lansing	State MI	Zip Code 48906
-----------------	-------------	-------------------

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

Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2012

Transaction ID : SA11AI.279855

Amount of Each Receipt this Period
10.50

SUBTOTAL of Receipts This Page (optional).....▶	48.98
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 35 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KENNETH BAILEY
Full Name (Last, First, Middle Initial)

Mailing Address 1034 N. Washington Avenue

City Lansing	State MI	Zip Code 48906
-----------------	-------------	-------------------

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

Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	20	/	2012

Transaction ID : SA11AI.279905

Amount of Each Receipt this Period
10.50

B. KRISTY BAILEY
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson Street SE

City Olympia	State WA	Zip Code 98501
-----------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11AI.277053

Amount of Each Receipt this Period
10.00

C. KRISTY BAILEY
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson Street SE

City Olympia	State WA	Zip Code 98501
-----------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.277638

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	30.50
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 36 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. PATRICIA A. BAILEY
Full Name (Last, First, Middle Initial)

Mailing Address 606 N. Van Buren Street

City Wilmington	State DE	Zip Code 19805
--------------------	-------------	-------------------

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

Name of Employer AFSCME DE CN 81	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **986.22**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	15	/	2012

Transaction ID : SA11AI.280142

Amount of Each Receipt this Period

65.34

B. JEREMY A. BAIMAN
Full Name (Last, First, Middle Initial)

Mailing Address 419 Reinhard Avenue

City Youngstown	State OH	Zip Code 43206
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH CN 8	Occupation STAFF REPRESENTATIVE
------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.91**

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.279789

Amount of Each Receipt this Period

44.18

C. KAREN BAKER
Full Name (Last, First, Middle Initial)

Mailing Address 8335 Banbury Street

City Cincinnati	State OH	Zip Code 45216
--------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation ODJFS EXTERNAL AUDITOR
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.278297

Amount of Each Receipt this Period

12.00

SUBTOTAL of Receipts This Page (optional).....▶	121.52
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 37 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. KAREN BAKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 8335 Banbury Street
 City State Zip Code
 Cincinnati OH 45216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH ODJFS EXTERNAL AUDITOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278655
 Amount of Each Receipt this Period
 12.00

B. KAREN BAKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 8335 Banbury Street
 City State Zip Code
 Cincinnati OH 45216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH ODJFS EXTERNAL AUDITOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 264.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279013
 Amount of Each Receipt this Period
 12.00

C. MARK T. BAKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 Hardman Avenue South
 City State Zip Code
 South St. Paul MN 55075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME MN CN 5/CN14 STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 529.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.280023
 Amount of Each Receipt this Period
 51.70

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.70
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 38 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. ANTHONY L. BAKKEN			Date of Receipt
Mailing Address 500 E Parish Street			<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.277525
Prair Du Chien	WI	53821	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
AFSCME WI CN 24/STATE OF WI	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="525.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. ANTHONY L. BAKKEN			Date of Receipt
Mailing Address 500 E Parish Street			<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.277526
Prair Du Chien	WI	53821	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
AFSCME WI CN 24/STATE OF WI	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="550.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. ANTHONY L. BAKKEN			Date of Receipt
Mailing Address 500 E Parish Street			<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.277527
Prair Du Chien	WI	53821	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
AFSCME WI CN 24/STATE OF WI	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="575.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 39 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MATTHEW BALAS
Full Name (Last, First, Middle Initial)

Mailing Address 307 Adams Street

City Freeland	State PA	Zip Code 18224
------------------	-------------	-------------------

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

Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
479.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2012

Transaction ID : SA11AI.279603

Amount of Each Receipt this Period
47.46

B. SCOTT M. BALDWIN
Full Name (Last, First, Middle Initial)

Mailing Address 33 Champlain Drive

City Springfield	State IL	Zip Code 62707
---------------------	-------------	-------------------

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

Name of Employer AFSCME IL CN 31/STATE OF IL	Occupation INFORMATION SYSTEMS TECH
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11AI.279383

Amount of Each Receipt this Period
60.00

C. MATTHEW M. BANAL
Full Name (Last, First, Middle Initial)

Mailing Address 5424 Olde Vintage Drive

City Hilliard	State OH	Zip Code 43026
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4	Occupation FIELD REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
494.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2012

Transaction ID : SA11AI.280152

Amount of Each Receipt this Period
19.24

SUBTOTAL of Receipts This Page (optional).....▶	126.70
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 40 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MATTHEW M. BANAL
Full Name (Last, First, Middle Initial)

Mailing Address 5424 Olde Vintage Drive

City	State	Zip Code
Hilliard	OH	43026

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

Name of Employer	Occupation
AFSCME OH LOC 4	FIELD REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **513.28**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2012

Transaction ID : SA11AI.280206

Amount of Each Receipt this Period

4	3	2	1	0	9	2	4
---	---	---	---	---	---	---	---

19.24

B. ARNETTA S. BANKS
Full Name (Last, First, Middle Initial)

Mailing Address 1509 Burley Drive

City	State	Zip Code
Columbus	OH	43207

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

Name of Employer	Occupation
AFSCME OH LOC 4/COLUMBUS CITY	TEACHER AIDE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **327.50**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2012

Transaction ID : SA11AI.280258

Amount of Each Receipt this Period

4	3	2	1	0	1	2	5
---	---	---	---	---	---	---	---

12.50

C. ARNETTA S. BANKS
Full Name (Last, First, Middle Initial)

Mailing Address 1509 Burley Drive

City	State	Zip Code
Columbus	OH	43207

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

Name of Employer	Occupation
AFSCME OH LOC 4/COLUMBUS CITY	TEACHER AIDE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2012

Transaction ID : SA11AI.280288

Amount of Each Receipt this Period

4	3	2	1	0	1	2	5
---	---	---	---	---	---	---	---

12.50

SUBTOTAL of Receipts This Page (optional).....▶	44.24
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 41 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ARNETTA S. BANKS
Full Name (Last, First, Middle Initial)

Mailing Address 1509 Burley Drive

City Columbus State OH Zip Code 43207

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation TEACHER AIDE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **352.50**

Date of Receipt **11 / 26 / 2012**

Transaction ID : SA11AI.280318

Amount of Each Receipt this Period **12.50**

B. GINA M. BANKS
Full Name (Last, First, Middle Initial)

Mailing Address 1911 Overlook Ridge Drive

City Columbus State OH Zip Code 43219

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CUSTOMER SERVICE REP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt **10 / 19 / 2012**

Transaction ID : SA11AI.278298

Amount of Each Receipt this Period **15.00**

C. GINA M. BANKS
Full Name (Last, First, Middle Initial)

Mailing Address 1911 Overlook Ridge Drive

City Columbus State OH Zip Code 43219

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CUSTOMER SERVICE REP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 02 / 2012**

Transaction ID : SA11AI.278656

Amount of Each Receipt this Period **15.00**

SUBTOTAL of Receipts This Page (optional)..... **42.50**

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 43 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. TERRI L. BARNARD
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
10 / 25 / 2012
Transaction ID : SA11AI.276764

Amount of Each Receipt this Period
21.00

B. TERRI L. BARNARD
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 441.00

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277056

Amount of Each Receipt this Period
21.00

C. TERRI L. BARNARD
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277641

Amount of Each Receipt this Period
21.00

SUBTOTAL of Receipts This Page (optional).....▶	63.00
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 44 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KAREN BARNES
Full Name (Last, First, Middle Initial)

Mailing Address 122 Forest Ridge Place

City Columbus State OH Zip Code 43235

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

Name of Employer AFSCME OH LOC 4 Occupation ACCOUNT CLERK

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2012
Transaction ID : SA11AI.280153

Amount of Each Receipt this Period
 10.00

B. KAREN BARNES
Full Name (Last, First, Middle Initial)

Mailing Address 122 Forest Ridge Place

City Columbus State OH Zip Code 43235

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

Name of Employer AFSCME OH LOC 4 Occupation ACCOUNT CLERK

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2012
Transaction ID : SA11AI.280207

Amount of Each Receipt this Period
 10.00

C. SHERIE L. BARNES
Full Name (Last, First, Middle Initial)

Mailing Address 3015 Whisper Drive NW

City Bremerton State WA Zip Code 98312

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2012
Transaction ID : SA11AI.276765

Amount of Each Receipt this Period
 10.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.50

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 45 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. SHERIE L. BARNES
 Full Name (Last, First, Middle Initial)
 Mailing Address 3015 Whisper Drive NW
 City State Zip Code
 Bremerton WA 98312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277057
 Amount of Each Receipt this Period
 10.50

B. SHERIE L. BARNES
 Full Name (Last, First, Middle Initial)
 Mailing Address 3015 Whisper Drive NW
 City State Zip Code
 Bremerton WA 98312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277642
 Amount of Each Receipt this Period
 10.50

C. NANCY E. BARTTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 888 Mililani Street
 Suite 601
 City State Zip Code
 Honolulu HI 96813-2991
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME HI LOC 152 STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 380.82

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.280396
 Amount of Each Receipt this Period
 34.62

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.62
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 46 OF 846
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. FATIMA A BASTIANELLI
Full Name (Last, First, Middle Initial)
Mailing Address 5604 Vernon Place

City Bethesda	State MD	Zip Code 20817
------------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation POLITICAL ACTION POLLING ASSISTANT
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
765.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276349

Amount of Each Receipt this Period
38.25

B. FATIMA A BASTIANELLI
Full Name (Last, First, Middle Initial)
Mailing Address 5604 Vernon Place

City Bethesda	State MD	Zip Code 20817
------------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation POLITICAL ACTION POLLING ASSISTANT
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
804.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SA11AI.276544

Amount of Each Receipt this Period
39.30

C. LINDA BATES
Full Name (Last, First, Middle Initial)
Mailing Address 1510 Walnut Street

City Woodbridge	State VA	Zip Code 22191
--------------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation LEGAL ASSISTANT II
----------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
667.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276350

Amount of Each Receipt this Period
33.76

SUBTOTAL of Receipts This Page (optional).....▶	111.31
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 47 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LINDA BATES
Full Name (Last, First, Middle Initial)

Mailing Address 1510 Walnut Street

City Woodbridge State VA Zip Code 22191

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

Name of Employer AFSCME INT'L Occupation LEGAL ASSISTANT II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.96**

Date of Receipt **11 / 15 / 2012**

Transaction ID : SA11AI.276545

Amount of Each Receipt this Period **33.76**

B. MICHAEL D. BAUER
Full Name (Last, First, Middle Initial)

Mailing Address 5325 Gargasz Drive

City Lorain State OH Zip Code 40530

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

Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **744.71**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.279792

Amount of Each Receipt this Period **87.32**

C. PATRICIA BAUER
Full Name (Last, First, Middle Initial)

Mailing Address 4031 Executive Park Drive

City Harrisburg State PA Zip Code 17111

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1170.47**

Date of Receipt **11 / 14 / 2012**

Transaction ID : SA11AI.279605

Amount of Each Receipt this Period **98.18**

SUBTOTAL of Receipts This Page (optional).....▶ **219.26**

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 48 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. HENRY BAYER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1507 W. Chase Street
 City Chicago State IL Zip Code 60626-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31 Occupation EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1367.56

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276315
 Amount of Each Receipt this Period 28.00

B. HENRY BAYER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1507 W. Chase Street
 City Chicago State IL Zip Code 60626-2125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31 Occupation EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1488.40

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279515
 Amount of Each Receipt this Period 120.84

C. BRIAN L. BEALLOR
 Full Name (Last, First, Middle Initial)
 Mailing Address 3898 Rubythroat Drive
 City Gahanna State OH Zip Code 42230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4 Occupation ORGANIZER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 504.84

Date of Receipt 10 / 24 / 2012
Transaction ID : SA11AI.280154
 Amount of Each Receipt this Period 24.04

SUBTOTAL of Receipts This Page (optional)..... ▶ 172.88
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 49 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BRIAN L. BEALLOR
Full Name (Last, First, Middle Initial)

Mailing Address 3898 Rubythroat Drive

City Gahanna State OH Zip Code 42230

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

Name of Employer AFSCME OH LOC 4 Occupation ORGANIZER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **528.88**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2012

Transaction ID : SA11AI.280208

Amount of Each Receipt this Period
24.04

B. KENT BEAUCHAMP
Full Name (Last, First, Middle Initial)

Mailing Address 2309 Mariners Point Lane

City Springfield State IL Zip Code 62712

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

Name of Employer AFSCME IL CN 31 Occupation REGIONAL DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **836.60**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2012

Transaction ID : SA11AI.279516

Amount of Each Receipt this Period
83.66

C. MARY KATHLEE BECKMAN
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2012

Transaction ID : SA11AI.276766

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....	132.70
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 51 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MICHAEL BEGATTO
Full Name (Last, First, Middle Initial)

Mailing Address 301 Hedgerow Lane

City Wilmington	State DE	Zip Code 19807
--------------------	-------------	-------------------

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

Name of Employer AFSCME DE CN 81	Occupation EXECUTIVE DIRECTOR
-------------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1015.23

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	15	/	2012

Transaction ID : SA11AI.280143

Amount of Each Receipt this Period
91.48

B. MARTIN BEIL
Full Name (Last, First, Middle Initial)

Mailing Address 10363 Hudson Road

City Mazomanie	State WI	Zip Code 53560-9773
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WI CN 24	Occupation EXECUTIVE DIRECTOR
-------------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1003.44

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	08	/	2012

Transaction ID : SA11AI.277607

Amount of Each Receipt this Period
83.62

C. COURTNEY R. BELCHER
Full Name (Last, First, Middle Initial)

Mailing Address 1928 Billingsley Road

City Columbus	State OH	Zip Code 43235
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4	Occupation SECRETARY
-------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	24	/	2012

Transaction ID : SA11AI.280155

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	185.10
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 52 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. COURTNEY R. BELCHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1928 Billingsley Road
 City Columbus State OH Zip Code 43235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4 Occupation SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2012
Transaction ID : SA11AI.280209
 Amount of Each Receipt this Period
 10.00

B. NANCY L. BELCHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 390 Worthington Road
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2012
Transaction ID : SA11AI.280094
 Amount of Each Receipt this Period
 40.00

C. TURNEIKEIO E. BELCHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 304 Chatterly Lane
 City Columbus State OH Zip Code 43207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278299
 Amount of Each Receipt this Period
 11.00

SUBTOTAL of Receipts This Page (optional).....▶	61.00
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 53 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. TURNEIKEIO E. BELCHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 304 Chatterly Lane
 City Columbus State OH Zip Code 43207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 242.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278657
 Amount of Each Receipt this Period 11.00

B. TURNEIKEIO E. BELCHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 304 Chatterly Lane
 City Columbus State OH Zip Code 43207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 253.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279015
 Amount of Each Receipt this Period 11.00

C. ROBERT M. BELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 27732 Clear Lake Road
 City Eugene State OR Zip Code 97402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OR CN 75/STATE OF OR Occupation ACCOUNTING CLERK II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.277936
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 42.00
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 54 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. SANDRA F BELL
Full Name (Last, First, Middle Initial)

Mailing Address 2968 Tracer Road

City Columbus State OH Zip Code 43232

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

Name of Employer AFSCME OH LOC 11 Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2012
Transaction ID : SA11AI.280095

Amount of Each Receipt this Period
 200.00

B. JOSEPH BELLA
Full Name (Last, First, Middle Initial)

Mailing Address 501 W George Street

City Arlington Heights State IL Zip Code 60005

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

Name of Employer AFSCME IL CN 31 Occupation REGIONAL DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 836.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.279517

Amount of Each Receipt this Period
 83.66

C. CATHERINE S. BENCINI
Full Name (Last, First, Middle Initial)

Mailing Address 1471 Seahorse Lane

City Carbondale State IL Zip Code 62901

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

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation TELECOMMUNICATOR SPECIALIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 218.82

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.279385

Amount of Each Receipt this Period
 31.26

SUBTOTAL of Receipts This Page (optional).....▶	134.92
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 55 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. JAMES R. BENEDICT
 Full Name (Last, First, Middle Initial)
 Mailing Address 6576 Hilmar Court
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278302
 Amount of Each Receipt this Period 10.00

B. JAMES R. BENEDICT
 Full Name (Last, First, Middle Initial)
 Mailing Address 6576 Hilmar Court
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278660
 Amount of Each Receipt this Period 10.00

C. JAMES R. BENEDICT
 Full Name (Last, First, Middle Initial)
 Mailing Address 6576 Hilmar Court
 City Westerville State OH Zip Code 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279018
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 56 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CHARLES BENN
Full Name (Last, First, Middle Initial)

Mailing Address 141 Eddington Avenue

City Harrisburg State PA Zip Code 17111-3520

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1097.56**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2012

Transaction ID : SA11AI.279606

Amount of Each Receipt this Period
98.18

B. PETER J. BENNER
Full Name (Last, First, Middle Initial)

Mailing Address 7650 Cahill Avenue

City Inver Grove Hgts. State MN Zip Code 55076

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

Name of Employer AFSCME INT'L/STATE STREET Occupation RETIREE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **476.30**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2012

Transaction ID : SA11AI.276732

Amount of Each Receipt this Period
43.30

C. STACEY D. BENSON-TAYLOR
Full Name (Last, First, Middle Initial)

Mailing Address 241 Brooklyn Avenue

City Dayton State OH Zip Code 45417

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

Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **618.30**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.279793

Amount of Each Receipt this Period
62.12

SUBTOTAL of Receipts This Page (optional).....▶	203.60
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 57 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BRENDA L BENTON
Full Name (Last, First, Middle Initial)

Mailing Address 4406 E. Mound Street

City Columbus State OH Zip Code 43227

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

Name of Employer AFSCME INT'L Occupation FIELD OFFICE ASSISTANT II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **508.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.276351

Amount of Each Receipt this Period
25.40

B. BRENDA L BENTON
Full Name (Last, First, Middle Initial)

Mailing Address 4406 E. Mound Street

City Columbus State OH Zip Code 43227

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

Name of Employer AFSCME INT'L Occupation FIELD OFFICE ASSISTANT II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **533.40**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : SA11AI.276546

Amount of Each Receipt this Period
25.40

C. RICHARD BERG
Full Name (Last, First, Middle Initial)

Mailing Address 29 N. Wacker Drive Suite 800

City Chicago State IL Zip Code 60606

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

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **673.72**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2012

Transaction ID : SA11AI.279518

Amount of Each Receipt this Period
67.74

SUBTOTAL of Receipts This Page (optional)..... ▶ **118.54**

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 58 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. STEVEN BERGER
Full Name (Last, First, Middle Initial)

Mailing Address 190 W. Ostend Street
Suite 101

City Baltimore State MD Zip Code 21230

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

Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
559.24

Date of Receipt
11 / 05 / 2012
Transaction ID : SA11AI.279975

Amount of Each Receipt this Period
50.84

B. GINGER K. BERNETHY
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
10 / 25 / 2012
Transaction ID : SA11AI.276768

Amount of Each Receipt this Period
10.50

C. GINGER K. BERNETHY
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.50

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277060

Amount of Each Receipt this Period
10.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 71.84

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 59 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. GINGER K. BERNETHY
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277645

Amount of Each Receipt this Period
10.50

B. DANA BERRY
Full Name (Last, First, Middle Initial)

Mailing Address 4320 NW Second Avenue

City Des Moines State IA Zip Code 50313

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

Name of Employer AFSCME IA CN 61 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
307.04

Date of Receipt
11 / 07 / 2012
Transaction ID : SA11AI.280065

Amount of Each Receipt this Period
30.00

C. PATRICIA A. BERRY
Full Name (Last, First, Middle Initial)

Mailing Address 1658 Rainbow Park

City Columbus State OH Zip Code 43206

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
10 / 19 / 2012
Transaction ID : SA11AI.278306

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.50

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 60 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. PATRICIA A. BERRY
Full Name (Last, First, Middle Initial)

Mailing Address 1658 Rainbow Park

City Columbus	State OH	Zip Code 43206
------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation JUVENILE CORRECTION OFFICER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.278664

Amount of Each Receipt this Period
10.00

B. PATRICIA A. BERRY
Full Name (Last, First, Middle Initial)

Mailing Address 1658 Rainbow Park

City Columbus	State OH	Zip Code 43206
------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation JUVENILE CORRECTION OFFICER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2012

Transaction ID : SA11AI.279022

Amount of Each Receipt this Period
10.00

C. JAMES BESTPITCH
Full Name (Last, First, Middle Initial)

Mailing Address 11922 Getson Lane

City Cumberland	State MD	Zip Code 21502
--------------------	-------------	-------------------

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

Name of Employer AFSCME MD CN 67	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
725.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2012

Transaction ID : SA11AI.279953

Amount of Each Receipt this Period
52.72

SUBTOTAL of Receipts This Page (optional).....▶	72.72
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 61 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. DALE A. BESTWICK
 Full Name (Last, First, Middle Initial)
 Mailing Address 669 Sanchez Trail
 City Mercer State PA Zip Code 16137
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13/STATE OF PA Occupation CLERICAL/ADMINISTRATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279713
 Amount of Each Receipt this Period 200.00

B. JEFFREY BIGELOW
 Full Name (Last, First, Middle Initial)
 Mailing Address 29 N. Wacker Drive
 City Chicago State IL Zip Code 60606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 836.60

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279519
 Amount of Each Receipt this Period 83.66

C. DEBORAH K. BINDAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 901 North Road S.E.
 City Niles State OH Zip Code 44446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.40

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279794
 Amount of Each Receipt this Period 22.74

SUBTOTAL of Receipts This Page (optional)..... ▶ 126.40
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 62 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ALLEN C. BIRT
Full Name (Last, First, Middle Initial)

Mailing Address 8510 26th Street Court W.
Apt. 32

City State Zip Code
University Place WA 98466

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

Name of Employer Occupation
AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2012
Transaction ID : SA11AI.277063

Amount of Each Receipt this Period
98.66

B. JEAN BIRTLE
Full Name (Last, First, Middle Initial)

Mailing Address 4301 Executive Park Drive

City State Zip Code
Harrisburg PA 17111

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

Name of Employer Occupation
AFSCME PA CN 13 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
531.90

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2012
Transaction ID : SA11AI.279607

Amount of Each Receipt this Period
48.66

C. PAUL BISSEN
Full Name (Last, First, Middle Initial)

Mailing Address 1906 Bear Court SE

City State Zip Code
Rochester MN 55904

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

Name of Employer Occupation
AFSCME MN CN 5/STATE OF MN STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
532.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012
Transaction ID : SA11AI.278105

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional).....▶	98.66
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 63 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. KENNETH J. BLAIR
 Full Name (Last, First, Middle Initial)
 Mailing Address 15715 62nd Avenue E.
 City Puyallup State WA Zip Code 98375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276772
 Amount of Each Receipt this Period 14.50

B. KENNETH J. BLAIR
 Full Name (Last, First, Middle Initial)
 Mailing Address 15715 62nd Avenue E.
 City Puyallup State WA Zip Code 98375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 304.50

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277064
 Amount of Each Receipt this Period 14.50

C. KENNETH J. BLAIR
 Full Name (Last, First, Middle Initial)
 Mailing Address 15715 62nd Avenue E.
 City Puyallup State WA Zip Code 98375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 319.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277648
 Amount of Each Receipt this Period 14.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 43.50
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 64 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MICHAEL BLAIR
Full Name (Last, First, Middle Initial)

Mailing Address 8 Beacon Street

City Boston State MA Zip Code 02108-0000

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

Name of Employer AFSCME MA CN 93 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **431.42**

Date of Receipt **11 / 07 / 2012**

Transaction ID : SA11AI.280007

Amount of Each Receipt this Period **39.22**

B. WALTER BLAIR
Full Name (Last, First, Middle Initial)

Mailing Address 2223 Wintergreen Avenue

City District Heights State MD Zip Code 20747

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

Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, ACCOUNTING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **892.80**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.276352

Amount of Each Receipt this Period **44.64**

C. WALTER BLAIR
Full Name (Last, First, Middle Initial)

Mailing Address 2223 Wintergreen Avenue

City District Heights State MD Zip Code 20747

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

Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, ACCOUNTING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **937.44**

Date of Receipt **11 / 15 / 2012**

Transaction ID : SA11AI.276547

Amount of Each Receipt this Period **44.64**

SUBTOTAL of Receipts This Page (optional)..... **128.50**

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 65 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. KORY BLAKE		Date of Receipt
Mailing Address 1410 Bush Street Suite A		<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City	State	Zip Code
Baltimore	MD	21230
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.279954
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="52.22"/>
Name of Employer	Occupation	
AFSCME MD CN 67	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="548.31"/>	

Full Name (Last, First, Middle Initial) B. JANE ANN BLAKESLEY		Date of Receipt
Mailing Address 2179 Shoreham Road		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City	State	Zip Code
Upper Arlington	OH	43220
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.280156
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="38.50"/>
Name of Employer	Occupation	
AFSCME OH LOC 4	ADMINISTRATIVE ASSISTANT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="848.50"/>	

Full Name (Last, First, Middle Initial) C. JANE ANN BLAKESLEY		Date of Receipt
Mailing Address 2179 Shoreham Road		<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City	State	Zip Code
Upper Arlington	OH	43220
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.280210
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="38.50"/>
Name of Employer	Occupation	
AFSCME OH LOC 4	ADMINISTRATIVE ASSISTANT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="887.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="129.22"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 67 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. HEIDI L. BLINDAUER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson St., SE
 Suite 300
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277649
 Amount of Each Receipt this Period 10.00

B. DAVID BLOEDE
 Full Name (Last, First, Middle Initial)
 Mailing Address 7426 Harrison Street
 City Forest Park State IL Zip Code 60130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.60

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279520
 Amount of Each Receipt this Period 55.06

C. KAREN BLOOMINGDALE
 Full Name (Last, First, Middle Initial)
 Mailing Address 4301 Executive Park Drive
 City Harrisburg State PA Zip Code 17111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 782.04

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.279608
 Amount of Each Receipt this Period 71.54

SUBTOTAL of Receipts This Page (optional)..... ▶ 136.60
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 68 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DAVID L. BLYTH
Full Name (Last, First, Middle Initial)

Mailing Address 1656 Gilbert Road

City Toledo	State OH	Zip Code 43614
----------------	-------------	-------------------

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

Name of Employer AFSCME OH CN 8	Occupation STAFF REPRESENTATIVE
------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **562.95**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.279795

Amount of Each Receipt this Period

13	14	15	16	17
				56.38

B. EUGENE BOATRIGHT
Full Name (Last, First, Middle Initial)

Mailing Address 8542 South Bishop

City Chicago	State IL	Zip Code 60620
-----------------	-------------	-------------------

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

Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **601.35**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11AI.279521

Amount of Each Receipt this Period

13	14	15	16	17
				67.65

C. JOYCE C. BOBO
Full Name (Last, First, Middle Initial)

Mailing Address 5745 Hamill Road

City Albany	State OH	Zip Code 45710
----------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 4	Occupation FIELD SECRETARY
-------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2012

Transaction ID : SA11AI.280158

Amount of Each Receipt this Period

13	14	15	16	17
				10.00

SUBTOTAL of Receipts This Page (optional).....▶	134.03
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 69 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOYCE C. BOBO
Full Name (Last, First, Middle Initial)

Mailing Address 5745 Hamill Road

City Albany State OH Zip Code 45710

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

Name of Employer AFSCME OH LOC 4 Occupation FIELD SECRETARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 06 / 2012
Transaction ID : SA11AI.280212

Amount of Each Receipt this Period 10.00

B. PATRICIA BODAY
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 230

City Buckley State WA Zip Code 98321

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277066

Amount of Each Receipt this Period 10.00

C. PATRICIA BODAY
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 230

City Buckley State WA Zip Code 98321

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277650

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00

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 70 OF 846
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input 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

A. THOMAS J. BOIK
Full Name (Last, First, Middle Initial)

Mailing Address 300 Hardman Avenue South

City South St. Paul State MN Zip Code 55075

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

Name of Employer AFSCME MN CN 5/CN14 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **444.27**

Date of Receipt **11 / 14 / 2012**

Transaction ID : SA11AI.280025

Amount of Each Receipt this Period **42.47**

B. MELISSA BOILOTT
Full Name (Last, First, Middle Initial)

Mailing Address 230 River Ridge Drive

City Woodland State WA Zip Code 98674

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

Name of Employer AFSCME OR CN 75/STATE OF OR Occupation PROPERTY SPECIALIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **292.74**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.277938

Amount of Each Receipt this Period **27.88**

C. KAHIM BOLES
Full Name (Last, First, Middle Initial)

Mailing Address 1003 S Frazier Street

City Philadelphia State PA Zip Code 19143

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

Name of Employer AFSCME PA CN 47/LOCAL 2187 Occupation EXECUTIVE BOARD MEMBER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.276316

Amount of Each Receipt this Period **14.00**

SUBTOTAL of Receipts This Page (optional)..... **84.35**

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 71 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. LYNDA L. BOLIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 Circle Drive
 City The Plains State OH Zip Code 45780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 404.04

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2012
Transaction ID : SA11AI.280159
 Amount of Each Receipt this Period
 19.24

B. LYNDA L. BOLIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 8 Circle Drive
 City The Plains State OH Zip Code 45780
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2012
Transaction ID : SA11AI.280213
 Amount of Each Receipt this Period
 19.24

C. SHAWN P. BOLLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 341 Chartwell Street
 City Mount Gilead State OH Zip Code 43338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278310
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 58.48
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 72 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. SHAWN P. BOLLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 341 Chartwell Street
 City Mount Gilead State OH Zip Code 43338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **440.00**

Date of Receipt **11 / 02 / 2012**
Transaction ID : SA11AI.278668
 Amount of Each Receipt this Period **20.00**

B. SHAWN P. BOLLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 341 Chartwell Street
 City Mount Gilead State OH Zip Code 43338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **460.00**

Date of Receipt **11 / 16 / 2012**
Transaction ID : SA11AI.279026
 Amount of Each Receipt this Period **20.00**

C. ALAN R. BOLLINGER
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 577
 City Saint Paris State OH Zip Code 43072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation HIGHWAY TECHNICIAN III
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 19 / 2012**
Transaction ID : SA11AI.278311
 Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional).....	50.00
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 73 OF 846
	<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	<input 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

A. ALAN R. BOLLINGER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 577

City Saint Paris State OH Zip Code 43072

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation HIGHWAY TECHNICIAN III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278669

Amount of Each Receipt this Period
 10.00

B. ALAN R. BOLLINGER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 577

City Saint Paris State OH Zip Code 43072

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation HIGHWAY TECHNICIAN III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279027

Amount of Each Receipt this Period
 10.00

C. BRUCE BOND
Full Name (Last, First, Middle Initial)

Mailing Address 86 Parkwood Blvd.

City Mansfield State OH Zip Code 44906

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278312

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 74 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BRUCE BOND
Full Name (Last, First, Middle Initial)
Mailing Address 86 Parkwood Blvd.
City Mansfield State OH Zip Code 44906
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278670
Amount of Each Receipt this Period 10.00

B. BRUCE BOND
Full Name (Last, First, Middle Initial)
Mailing Address 86 Parkwood Blvd.
City Mansfield State OH Zip Code 44906
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279028
Amount of Each Receipt this Period 10.00

C. CATHERINE J. BOND
Full Name (Last, First, Middle Initial)
Mailing Address 48048 Sarahsville Road
City Caldwell State OH Zip Code 43724
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation LIBRARY ASSISTANT II
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278313
Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 35.00
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 75 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CATHERINE J. BOND
Full Name (Last, First, Middle Initial)

Mailing Address 48048 Sarahsville Road

City Caldwell State OH Zip Code 43724

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation LIBRARY ASSISTANT II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278671

Amount of Each Receipt this Period 15.00

B. CATHERINE J. BOND
Full Name (Last, First, Middle Initial)

Mailing Address 48048 Sarahsville Road

City Caldwell State OH Zip Code 43724

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation LIBRARY ASSISTANT II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279029

Amount of Each Receipt this Period 15.00

C. DEBRA BOND
Full Name (Last, First, Middle Initial)

Mailing Address 1295 Mariuon Road

City Rochester State MN Zip Code 55904-5780

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

Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.278109

Amount of Each Receipt this Period 24.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 54.00

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 76 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. SHAKEEM V. BOONE
 Full Name (Last, First, Middle Initial)
 Mailing Address 5204 4th Street NW
 City Washington State DC Zip Code 20011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation STAFF SPECIALIST I
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **707.37**

Date of Receipt **10 / 31 / 2012**
Transaction ID : SA11AI.276353
 Amount of Each Receipt this Period **33.34**

B. SHAKEEM V. BOONE
 Full Name (Last, First, Middle Initial)
 Mailing Address 5204 4th Street NW
 City Washington State DC Zip Code 20011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation STAFF SPECIALIST I
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **740.71**

Date of Receipt **11 / 15 / 2012**
Transaction ID : SA11AI.276548
 Amount of Each Receipt this Period **33.34**

C. PAUL R. BOOTH
 Full Name (Last, First, Middle Initial)
 Mailing Address 3724 Benton Street NW
 City Washington State DC Zip Code 20007-1803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation EXECUTIVE ASST. TO PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **4014.28**

Date of Receipt **10 / 31 / 2012**
Transaction ID : SA11AI.276354
 Amount of Each Receipt this Period **190.69**

SUBTOTAL of Receipts This Page (optional)..... **257.37**
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 77 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. PAUL R. BOOTH
 Full Name (Last, First, Middle Initial)
 Mailing Address 3724 Benton Street NW
 City Washington State DC Zip Code 20007-1803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation EXECUTIVE ASST. TO PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4204.97

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276549
 Amount of Each Receipt this Period 190.69

B. PAMELA BORDEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 5947 Cooper
 City Taylor State MI Zip Code 48180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 441.84

Date of Receipt 11 / 07 / 2012
Transaction ID : SA11AI.279856
 Amount of Each Receipt this Period 21.04

C. PAMELA BORDEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 5947 Cooper
 City Taylor State MI Zip Code 48180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 462.88

Date of Receipt 11 / 20 / 2012
Transaction ID : SA11AI.279906
 Amount of Each Receipt this Period 21.04

SUBTOTAL of Receipts This Page (optional)..... ▶ 232.77
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 79 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. SHARON K BORTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 5359 29th Street NW
 City Washington State DC Zip Code 20015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ASSIST. DIRECTOR, HUMAN RESOURCES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1045.78

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276551
 Amount of Each Receipt this Period 50.98

B. CAROL BOTTIGLIER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4301 Executive Park Drive
 City Harrisburg State PA Zip Code 17111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 368.27

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.279609
 Amount of Each Receipt this Period 48.66

C. CAROL BOWSHIER
 Full Name (Last, First, Middle Initial)
 Mailing Address 159 East Main Street
 City Mt. Sterling State OH Zip Code 43143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11 Occupation OPERATIONS DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 854.82

Date of Receipt 10 / 24 / 2012
Transaction ID : SA11AI.280098
 Amount of Each Receipt this Period 77.82

SUBTOTAL of Receipts This Page (optional).....▶ 177.46
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 80 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ERIC R. BOYD
Full Name (Last, First, Middle Initial)

Mailing Address 118 East Walnut Street

City Westerville State OH Zip Code 43801

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

Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **597.46**

Date of Receipt
10 / 31 / 2012
Transaction ID : SA11AI.279796

Amount of Each Receipt this Period
60.12

B. MELVIN BRABSON
Full Name (Last, First, Middle Initial)

Mailing Address 5510 Chalmers

City Detroit State MI Zip Code 48213

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **454.13**

Date of Receipt
11 / 07 / 2012
Transaction ID : SA11AI.279857

Amount of Each Receipt this Period
22.99

C. MELVIN BRABSON
Full Name (Last, First, Middle Initial)

Mailing Address 5510 Chalmers

City Detroit State MI Zip Code 48213

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **477.12**

Date of Receipt
11 / 20 / 2012
Transaction ID : SA11AI.279907

Amount of Each Receipt this Period
22.99

SUBTOTAL of Receipts This Page (optional)..... **106.10**

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 81 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. ANDREA BRACHTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4301 Executive Park Drive
 City Harrisburg State PA Zip Code 17111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 299.11

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.279610
 Amount of Each Receipt this Period 29.50

B. MIKE BRADLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2320 Turner Lane
 City Bel Air State MD Zip Code 21015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MD CN 67 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 413.28

Date of Receipt 11 / 06 / 2012
Transaction ID : SA11AI.279955
 Amount of Each Receipt this Period 39.36

C. NORMA BRAIDIGAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 N Derr Drive
 City Lewisburg State PA Zip Code 17837-1387
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L/STATE STREET Occupation RETIREE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.276733
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 88.86
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 82 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CHRISTINE M. BRANCHAW
 Full Name (Last, First, Middle Initial)
 Mailing Address 2223 NE Davis Street
 City Portland State OR Zip Code 97232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OR CN 75/STATE OF OR Occupation CARPENTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 328.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.277939
 Amount of Each Receipt this Period 28.00

B. TALISHIA R. BRANDAO
 Full Name (Last, First, Middle Initial)
 Mailing Address 155 Market Street
 City Highspire State PA Zip Code 17034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279714
 Amount of Each Receipt this Period 50.00

C. BRYAN C. BRANSTETTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 911 1/2 NW Carden
 City Pendleton State OR Zip Code 97801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OR CN 75/STATE OF OR Occupation ENVIRONMENTAL SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.277940
 Amount of Each Receipt this Period 21.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 99.00
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 83 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. NIKKI BRAYMAN
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
273.00

Date of Receipt
10 / 25 / 2012
Transaction ID : SA11AI.276778

Amount of Each Receipt this Period
15.00

B. NIKKI BRAYMAN
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277070

Amount of Each Receipt this Period
15.00

C. NIKKI BRAYMAN
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
303.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277654

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00

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 85 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. JERRY M. BRENIZER
 Full Name (Last, First, Middle Initial)
 Mailing Address N3267 Opal Road
 City Lake Geneva State WI Zip Code 53147
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 414.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.277533
 Amount of Each Receipt this Period 18.00

B. WILLIAM BRENNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 3300 Old Trail Road
 City York Haven State PA Zip Code 17370
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1025.55

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.279612
 Amount of Each Receipt this Period 91.74

C. ROBERT BRISTOL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson St., SE Suite 300
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 521.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276779
 Amount of Each Receipt this Period 26.50

SUBTOTAL of Receipts This Page (optional).....▶ 136.24
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 86 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ROBERT BRISTOL
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 547.50

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277071

Amount of Each Receipt this Period
26.50

B. ROBERT BRISTOL
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 574.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277655

Amount of Each Receipt this Period
26.50

C. MARIA BRITTON
Full Name (Last, First, Middle Initial)

Mailing Address 979 Kamm Road

City Springfield State IL Zip Code 62707

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

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.80

Date of Receipt
11 / 01 / 2012
Transaction ID : SA11AI.279522

Amount of Each Receipt this Period
45.08

SUBTOTAL of Receipts This Page (optional)..... ▶ 98.08

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 87 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MICHAEL S. BROADDUS
Full Name (Last, First, Middle Initial)

Mailing Address 1606 High Street SE

City Salem State OR Zip Code 97302

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

Name of Employer AFSCME OR CN 75/STATE OF OR Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012

Transaction ID : SA11AI.277941

Amount of Each Receipt this Period
 30.00

B. BILL BROCKMILLER
Full Name (Last, First, Middle Initial)

Mailing Address 1418 10th Street #204

City Lacrosse State WI Zip Code 54601

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

Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2012

Transaction ID : SA11AI.277534

Amount of Each Receipt this Period
 30.00

C. BILL BROCKMILLER
Full Name (Last, First, Middle Initial)

Mailing Address 1418 10th Street #204

City Lacrosse State WI Zip Code 54601

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

Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012

Transaction ID : SA11AI.277535

Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00

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 88 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. BILL BROCKMILLER		Date of Receipt
Mailing Address 1418 10th Street #204		<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City Lacrosse	State WI	Zip Code 54601
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.277536
Name of Employer AFSCME WI CN 24/STATE OF WI	Occupation STAFF REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="30.00"/>
	<input type="text" value="690.00"/>	

Full Name (Last, First, Middle Initial) B. T BILLY BROWN		Date of Receipt
Mailing Address 820 S Wright Street		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City Naperville	State IL	Zip Code 60565
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.279523
Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="83.66"/>
	<input type="text" value="836.60"/>	

Full Name (Last, First, Middle Initial) C. WANDA BROWN		Date of Receipt
Mailing Address 17311 NW 46th Avenue		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City Carol City	State FL	Zip Code 33055
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276357
Name of Employer AFSCME INT'L	Occupation LEAD ORGANIZER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="33.36"/>
	<input type="text" value="589.80"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="147.02"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 89 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. WANDA BROWN
Full Name (Last, First, Middle Initial)

Mailing Address 17311 NW 46th Avenue

City	State	Zip Code
Carol City	FL	33055

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

Name of Employer	Occupation
AFSCME INT'L	LEAD ORGANIZER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **623.16**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	15	/	2012

Transaction ID : SA11AI.276552

Amount of Each Receipt this Period

33.36

B. WILLIAM H. BROWN
Full Name (Last, First, Middle Initial)

Mailing Address 17431 SE Forest Hill Drive

City	State	Zip Code
Damascus	OR	97089

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

Name of Employer	Occupation
AFSCME OR CN 75/STATE OF OR	ENVIRONMENTAL SPECIALIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.277943

Amount of Each Receipt this Period

30.00

C. ALAN BRUBACHER
Full Name (Last, First, Middle Initial)

Mailing Address 2502 S. 4th Street

City	State	Zip Code
Steelton	PA	17113

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

Name of Employer	Occupation
AFSCME PA CN 13	MAINTENANCE SUPERVISOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **543.95**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	14	/	2012

Transaction ID : SA11AI.279613

Amount of Each Receipt this Period

48.66

SUBTOTAL of Receipts This Page (optional).....▶	112.02
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 90 OF 846
	<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	<input 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

A. PETER BRUCE
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277074

Amount of Each Receipt this Period
10.00

B. PETER BRUCE
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277658

Amount of Each Receipt this Period
10.00

C. JEROME BUCHANAN
Full Name (Last, First, Middle Initial)

Mailing Address 10833 West 'O' Avenue

City Mattawan State MI Zip Code 49071

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
11 / 07 / 2012
Transaction ID : SA11AI.279858

Amount of Each Receipt this Period
12.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 32.00

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 91 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. JEROME BUCHANAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 10833 West 'O' Avenue
 City Mattawan State MI Zip Code 49071
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2012
Transaction ID : SA11AI.279908
 Amount of Each Receipt this Period
 12.00

B. ROBERT L. BUCKINGHAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 413 1st Street N.E.
 City Little Falls State MN Zip Code 56345-2607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MN CN 5/CN14 Occupation BUSINESS REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.280026
 Amount of Each Receipt this Period
 24.00

C. EDITH E. BUCKLE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1184 Trentwood Road
 City Columbus State OH Zip Code 43221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 570.66

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.279797
 Amount of Each Receipt this Period
 55.90

SUBTOTAL of Receipts This Page (optional)..... ▶ 91.90
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 92 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MICHAEL BUESING
Full Name (Last, First, Middle Initial)

Mailing Address 4218 Nancy Place

City Shoreview State MN Zip Code 55126-6412

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

Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.278115

Amount of Each Receipt this Period 480.00

B. BRUCE D. BULICK
Full Name (Last, First, Middle Initial)

Mailing Address #4 Glacier Orchards Road

City White Salmon State WA Zip Code 98672

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

Name of Employer AFSCME OR CN 75/STATE OF OR Occupation ADM AIDE III

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.50

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.277945

Amount of Each Receipt this Period 25.50

C. SHANE A. BUMGARNER
Full Name (Last, First, Middle Initial)

Mailing Address 2619 S. Walnut

City Springfield State IL Zip Code 62704

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

Name of Employer AFSCME IL CN 31 Occupation ASST MIS SPECIALIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 508.60

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279524

Amount of Each Receipt this Period 50.86

SUBTOTAL of Receipts This Page (optional)..... ▶ 124.36

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 93 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. CARTER A BUNDY			Date of Receipt
Mailing Address 1968 Otowi Drive			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.276358
Santa Fe	NM	87505	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="41.33"/>
Name of Employer	Occupation		
AFSCME INT'L	POLITICAL ACTION REP. III		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="819.45"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. CARTER A BUNDY			Date of Receipt
Mailing Address 1968 Otowi Drive			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.276553
Santa Fe	NM	87505	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="41.33"/>
Name of Employer	Occupation		
AFSCME INT'L	POLITICAL ACTION REP. III		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="860.78"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. THERESE BUNN			Date of Receipt
Mailing Address 1212 Jefferson Street SE			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.277075
Olympia	WA	98501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="201.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="92.66"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 94 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. THERESE BUNN
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson Street SE

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.27659

Amount of Each Receipt this Period 10.00

B. JUSTIN H. BURCHARD
Full Name (Last, First, Middle Initial)

Mailing Address 1650 Harvard Street NW Apt #714

City Washington State DC Zip Code 20009

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

Name of Employer AFSCME INT'L Occupation DATA & TARGETING PROGRAM MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 732.18

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276359

Amount of Each Receipt this Period 37.14

C. JUSTIN H. BURCHARD
Full Name (Last, First, Middle Initial)

Mailing Address 1650 Harvard Street NW Apt #714

City Washington State DC Zip Code 20009

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

Name of Employer AFSCME INT'L Occupation DATA & TARGETING PROGRAM MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 769.32

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276554

Amount of Each Receipt this Period 37.14

SUBTOTAL of Receipts This Page (optional)..... ▶ 84.28

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 95 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ROBERT J. BURGESS
Full Name (Last, First, Middle Initial)

Mailing Address 306 W. Meek Street

City Abingdon State IL Zip Code 61410

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

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279391

Amount of Each Receipt this Period 30.00

B. RICHARD BURKE
Full Name (Last, First, Middle Initial)

Mailing Address 44 Beard Road

City New Boston State NH Zip Code 03070-0000

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

Name of Employer AFSCME MA CN 93 Occupation LNA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 07 / 2012
Transaction ID : SA11AI.280008

Amount of Each Receipt this Period 25.00

C. CAROL L. BURNETT
Full Name (Last, First, Middle Initial)

Mailing Address 1921 N. Westmoreland Street

City Arlington State VA Zip Code 22213

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

Name of Employer AFSCME INT'L Occupation MANAGER, ART & GRAPHIC DESIGN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276360

Amount of Each Receipt this Period 52.50

SUBTOTAL of Receipts This Page (optional).....▶ 107.50

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 96 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CAROL L. BURNETT
Full Name (Last, First, Middle Initial)

Mailing Address 1921 N. Westmoreland Street

City Arlington	State VA	Zip Code 22213
-------------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation MANAGER, ART & GRAPHIC DESIGN
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1102.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SA11AI.276555

Amount of Each Receipt this Period
52.50

B. DOUGLAS R. BURNETT
Full Name (Last, First, Middle Initial)

Mailing Address 2051 McKenna Blvd.

City Madison	State WI	Zip Code 53711
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation POLITICAL ACTION COORDINATOR
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
942.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276361

Amount of Each Receipt this Period
47.12

C. DOUGLAS R. BURNETT
Full Name (Last, First, Middle Initial)

Mailing Address 2051 McKenna Blvd.

City Madison	State WI	Zip Code 53711
-----------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation POLITICAL ACTION COORDINATOR
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
991.97

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SA11AI.276556

Amount of Each Receipt this Period
49.57

SUBTOTAL of Receipts This Page (optional).....▶	149.19
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 97 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. PEGGY S. BURTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 Georg Road
 City Petersburg State IL Zip Code 62675
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31/STATE OF IL Occupation DATA PROCESSING TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 472.08

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279392
 Amount of Each Receipt this Period 67.44

B. RICHARD BURTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson Street SE
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277076
 Amount of Each Receipt this Period 10.00

C. RICHARD BURTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson Street SE
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277660
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 87.44
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 98 OF 846
	<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	<input 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

A. DARNELL N. BUSCH
Full Name (Last, First, Middle Initial)

Mailing Address 6309 Desmond Street

City Cincinnati	State OH	Zip Code 45227
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation THERAPUTIC PROGRAM TECH
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **207.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	16	/	2012

Transaction ID : SA11AI.279033

Amount of Each Receipt this Period

9.00

B. DONALD E. BUSH
Full Name (Last, First, Middle Initial)

Mailing Address 2721 8th Avenue

City Rock Island	State IL	Zip Code 61201
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31/STATE OF IL	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11AI.279393

Amount of Each Receipt this Period

24.00

C. JOEY M. BUTCHER
Full Name (Last, First, Middle Initial)

Mailing Address 2600 Delamaine Drive

City Grove City	State OH	Zip Code 43123
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation ACCOUNTANT/EXAMINER
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.278318

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional).....	43.00
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 99 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JOEY M. BUTCHER		Date of Receipt
Mailing Address 2600 Delamaine Drive		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City State Zip Code Grove City OH 43123		Transaction ID : SA11AI.278676
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation ACCOUNTANT/EXAMINER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) B. JOEY M. BUTCHER		Date of Receipt
Mailing Address 2600 Delamaine Drive		<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City State Zip Code Grove City OH 43123		Transaction ID : SA11AI.279034
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation ACCOUNTANT/EXAMINER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="230.00"/>	

Full Name (Last, First, Middle Initial) C. KATHY R. BUTCHER		Date of Receipt
Mailing Address 4535 Valleydale Way		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City State Zip Code Columbus OH 43231		Transaction ID : SA11AI.278319
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="11.72"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation OFFICE ASSISTANT III	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="246.12"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="31.72"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 100 OF 846
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input 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

A. KATHY R. BUTCHER
Full Name (Last, First, Middle Initial)

Mailing Address 4535 Valleydale Way

City Columbus State OH Zip Code 43231

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation OFFICE ASSISTANT III

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 257.84

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278677

Amount of Each Receipt this Period 11.72

B. KATHY R. BUTCHER
Full Name (Last, First, Middle Initial)

Mailing Address 4535 Valleydale Way

City Columbus State OH Zip Code 43231

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation OFFICE ASSISTANT III

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 269.56

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279035

Amount of Each Receipt this Period 11.72

C. MATT BUTLER
Full Name (Last, First, Middle Initial)

Mailing Address 4320 NW Second Avenue

City Des Moines State IA Zip Code 50313

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

Name of Employer AFSCME IA CN 61 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 07 / 2012
Transaction ID : SA11AI.280066

Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 53.44

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 101 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. NICOLE BUTLER

Mailing Address 3011 29th Avenue NW

City Olympia State WA Zip Code 98502

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2012
Transaction ID : SA11AI.276785

Amount of Each Receipt this Period
 22.00

Full Name (Last, First, Middle Initial)
B. NICOLE BUTLER

Mailing Address 3011 29th Avenue NW

City Olympia State WA Zip Code 98502

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277077

Amount of Each Receipt this Period
 22.00

Full Name (Last, First, Middle Initial)
C. NICOLE BUTLER

Mailing Address 3011 29th Avenue NW

City Olympia State WA Zip Code 98502

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 484.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277661

Amount of Each Receipt this Period
 22.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 66.00

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 102 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. LORI L. BUTTERFIELD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson St., SE
 Suite 300
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2012
Transaction ID : SA11AI.276786
 Amount of Each Receipt this Period
 12.00

B. LORI L. BUTTERFIELD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson St., SE
 Suite 300
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277078
 Amount of Each Receipt this Period
 12.00

C. LORI L. BUTTERFIELD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson St., SE
 Suite 300
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277662
 Amount of Each Receipt this Period
 12.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 36.00
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 103 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MARILYNN E. BYRD
Full Name (Last, First, Middle Initial)

Mailing Address 895 Rainbow Drive

City Springfield State OR Zip Code 97477

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

Name of Employer AFSCME OR CN 75/STATE OF OR Occupation SYSTEMS TECH

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.277947

Amount of Each Receipt this Period 20.00

B. JOY CAGE
Full Name (Last, First, Middle Initial)

Mailing Address 9022 East E Street

City Parkland State WA Zip Code 98445-2259

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276788

Amount of Each Receipt this Period 17.50

C. JOY CAGE
Full Name (Last, First, Middle Initial)

Mailing Address 9022 East E Street

City Parkland State WA Zip Code 98445-2259

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 297.50

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277080

Amount of Each Receipt this Period 17.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00

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 104 OF 846
	<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	<input 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

Full Name (Last, First, Middle Initial) A. JOY CAGE		Date of Receipt
Mailing Address 9022 East E Street		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Parkland	State WA	Zip Code 98445-2259
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277664
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="17.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="315.00"/>	

Full Name (Last, First, Middle Initial) B. SUSAN CAHEN		Date of Receipt
Mailing Address 5384 Meadow Wood Blvd.		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City Lyndhurst	State OH	Zip Code 44124
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.280160
Name of Employer AFSCME OH LOC 4		Amount of Each Receipt this Period
Occupation FIELD REPRESENTATIVE		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="420.00"/>	

Full Name (Last, First, Middle Initial) C. SUSAN CAHEN		Date of Receipt
Mailing Address 5384 Meadow Wood Blvd.		<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City Lyndhurst	State OH	Zip Code 44124
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.280214
Name of Employer AFSCME OH LOC 4		Amount of Each Receipt this Period
Occupation FIELD REPRESENTATIVE		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="440.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="57.50"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 105 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. PAULA J. CAIRA
Full Name (Last, First, Middle Initial)
Mailing Address 17 Fourteenth Street SE
City Washington State DC Zip Code 20003
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME INT'L Occupation ASSOCIATE GENERAL COUNSEL II
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1210.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276363
Amount of Each Receipt this Period 60.50

B. PAULA J. CAIRA
Full Name (Last, First, Middle Initial)
Mailing Address 17 Fourteenth Street SE
City Washington State DC Zip Code 20003
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME INT'L Occupation ASSOCIATE GENERAL COUNSEL II
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1270.50

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276558
Amount of Each Receipt this Period 60.50

C. NINA M. CALABRIA
Full Name (Last, First, Middle Initial)
Mailing Address 6124 Crystal Valley Drive
City Galena State OH Zip Code 43021
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME OH LOC 4 Occupation ADMINISTRATIVE ASSISTANT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 590.00

Date of Receipt 11 / 06 / 2012
Transaction ID : SA11AI.280215
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 146.00
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 106 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ROBIN CALABRIA
Full Name (Last, First, Middle Initial)

Mailing Address 2507 Winslow Hill Road

City Benezette State PA Zip Code 15821

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 243.57

Date of Receipt
11 / 14 / 2012
Transaction ID : SA11AI.279614

Amount of Each Receipt this Period
34.20

B. CHAD D. CALDWELL
Full Name (Last, First, Middle Initial)

Mailing Address 1468 Galway Bend Drive S.

City Pataskala State OH Zip Code 43062

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

Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt
10 / 24 / 2012
Transaction ID : SA11AI.280161

Amount of Each Receipt this Period
25.00

C. CHAD D. CALDWELL
Full Name (Last, First, Middle Initial)

Mailing Address 1468 Galway Bend Drive S.

City Pataskala State OH Zip Code 43062

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

Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
11 / 06 / 2012
Transaction ID : SA11AI.280216

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 84.20

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 107 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. PAMELA D. CALDWELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1861 Bairsford Drive
 City Columbus State OH Zip Code 43232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CUSTOMER SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 226.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278322
 Amount of Each Receipt this Period 11.00

B. PAMELA D. CALDWELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1861 Bairsford Drive
 City Columbus State OH Zip Code 43232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CUSTOMER SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 237.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278680
 Amount of Each Receipt this Period 11.00

C. PAMELA D. CALDWELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1861 Bairsford Drive
 City Columbus State OH Zip Code 43232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CUSTOMER SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 248.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279038
 Amount of Each Receipt this Period 11.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 33.00
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 108 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. MICHAEL A. CALING		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277081
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="210.00"/>		

Full Name (Last, First, Middle Initial) B. MICHAEL A. CALING		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277665
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="220.00"/>		

Full Name (Last, First, Middle Initial) C. CALVIN A. CALKINS		Date of Receipt
Mailing Address 45-480 Hiipoi Street		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City Kaneohe	State HI	Zip Code 96744
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.280398
Name of Employer AFSCME HI LOC 152		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="220.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="40.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 109 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ROBERT CALVIN
Full Name (Last, First, Middle Initial)

Mailing Address 45 Church Road

City Mercer State PA Zip Code 16137-5911

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **841.34**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 14 / 2012

Transaction ID : SA11AI.279615

Amount of Each Receipt this Period
73.16

B. JOHN CAMERON
Full Name (Last, First, Middle Initial)

Mailing Address 6555 N. Maplewood

City Chicago State IL Zip Code 60645

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

Name of Employer AFSCME IL CN 31 Occupation DIRECTOR POL./COM. RELATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **791.60**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 01 / 2012

Transaction ID : SA11AI.279525

Amount of Each Receipt this Period
79.16

C. SUSAN CAMERON
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 32

City Manistique State MI Zip Code 49854

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **441.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 07 / 2012

Transaction ID : SA11AI.279859

Amount of Each Receipt this Period
21.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **173.32**

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 110 OF 846
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input 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

A. SUSAN CAMERON
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 32

City Manistique State MI Zip Code 49854

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2012
Transaction ID : SA11AI.279909

Amount of Each Receipt this Period
 21.00

B. TERESA CAMPBELL
Full Name (Last, First, Middle Initial)

Mailing Address 3709 Morgan Road

City Lake Orion State MI Zip Code 48359

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 441.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2012
Transaction ID : SA11AI.279860

Amount of Each Receipt this Period
 21.00

C. TERESA CAMPBELL
Full Name (Last, First, Middle Initial)

Mailing Address 3709 Morgan Road

City Lake Orion State MI Zip Code 48359

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2012
Transaction ID : SA11AI.279910

Amount of Each Receipt this Period
 21.00

SUBTOTAL of Receipts This Page (optional).....▶	63.00
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 111 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. ULIQUE A. CAMPBELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1633 Berkeley Road
 City Columbus State OH Zip Code 43207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation UNEMPLOYMENT CLAIMS TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278324
 Amount of Each Receipt this Period 11.00

B. ULIQUE A. CAMPBELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1633 Berkeley Road
 City Columbus State OH Zip Code 43207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation UNEMPLOYMENT CLAIMS TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 451.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278682
 Amount of Each Receipt this Period 11.00

C. ULIQUE A. CAMPBELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1633 Berkeley Road
 City Columbus State OH Zip Code 43207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation UNEMPLOYMENT CLAIMS TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 462.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279040
 Amount of Each Receipt this Period 11.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 33.00
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 112 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. CLAYTON L. CAMPO
 Full Name (Last, First, Middle Initial)
 Mailing Address 527 Mary Street
 City Marion State OH Zip Code 43302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278325
 Amount of Each Receipt this Period
 10.00

B. CLAYTON L. CAMPO
 Full Name (Last, First, Middle Initial)
 Mailing Address 527 Mary Street
 City Marion State OH Zip Code 43302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278683
 Amount of Each Receipt this Period
 10.00

C. CLAYTON L. CAMPO
 Full Name (Last, First, Middle Initial)
 Mailing Address 527 Mary Street
 City Marion State OH Zip Code 43302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279041
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 113 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. GUY C. CAMPO			Date of Receipt		
Mailing Address 9972 State Route 309			M M M / D D D / Y Y Y Y Y Y 10 / 19 / 2012		
City State Zip Code Galion OH 44833			Transaction ID : SA11AI.278326		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 11.00		
Name of Employer AFSCME OH LOC 11/STATE OF OH		Occupation MAINTENANCE REPAIR TECH			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 231.00			

Full Name (Last, First, Middle Initial) B. GUY C. CAMPO			Date of Receipt		
Mailing Address 9972 State Route 309			M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2012		
City State Zip Code Galion OH 44833			Transaction ID : SA11AI.278684		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 11.00		
Name of Employer AFSCME OH LOC 11/STATE OF OH		Occupation MAINTENANCE REPAIR TECH			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 242.00			

Full Name (Last, First, Middle Initial) C. GUY C. CAMPO			Date of Receipt		
Mailing Address 9972 State Route 309			M M M / D D D / Y Y Y Y Y Y 11 / 16 / 2012		
City State Zip Code Galion OH 44833			Transaction ID : SA11AI.279042		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 11.00		
Name of Employer AFSCME OH LOC 11/STATE OF OH		Occupation MAINTENANCE REPAIR TECH			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 253.00			

SUBTOTAL of Receipts This Page (optional).....▶	33.00
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 114 OF 846
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input 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

A. JEANA L. CAMPOLO
Full Name (Last, First, Middle Initial)

Mailing Address 504 E. Burgess Street

City Mount Vernon State OH Zip Code 43050

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation THERAPUTIC PROGRAM TECH

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278327

Amount of Each Receipt this Period 12.00

B. JEANA L. CAMPOLO
Full Name (Last, First, Middle Initial)

Mailing Address 504 E. Burgess Street

City Mount Vernon State OH Zip Code 43050

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation THERAPUTIC PROGRAM TECH

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278685

Amount of Each Receipt this Period 12.00

C. JEANA L. CAMPOLO
Full Name (Last, First, Middle Initial)

Mailing Address 504 E. Burgess Street

City Mount Vernon State OH Zip Code 43050

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation THERAPUTIC PROGRAM TECH

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279043

Amount of Each Receipt this Period 12.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 36.00

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 115 OF 846
	<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	<input 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

A. IDA C. CANADY
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
10 / 25 / 2012
Transaction ID : SA11AI.276790

Amount of Each Receipt this Period
10.50

B. IDA C. CANADY
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.50

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277082

Amount of Each Receipt this Period
10.50

C. IDA C. CANADY
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277666

Amount of Each Receipt this Period
10.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 31.50

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 116 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. LINDA CANAN-STEPHENS		Date of Receipt
Mailing Address 9013 Advantage Court		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City State Zip Code Burke VA 22003		Transaction ID : SA11AI.276364
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="103.13"/>
Name of Employer AFSCME INT'L	Occupation EXEC. ASSISTANT TO SECRETARY TREAS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1968.06"/>	

Full Name (Last, First, Middle Initial) B. LINDA CANAN-STEPHENS		Date of Receipt
Mailing Address 9013 Advantage Court		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City State Zip Code Burke VA 22003		Transaction ID : SA11AI.276559
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="103.13"/>
Name of Employer AFSCME INT'L	Occupation EXEC. ASSISTANT TO SECRETARY TREAS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2071.19"/>	

Full Name (Last, First, Middle Initial) C. LISA M. CAPONI		Date of Receipt
Mailing Address 29 Shadow Drive		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City State Zip Code Pittsburgh PA 15227		Transaction ID : SA11AI.276365
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="13.87"/>
Name of Employer AFSCME INT'L	Occupation FIELD OFFICE ASST. I	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="271.76"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="220.13"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 117 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LISA M. CAPONI
Full Name (Last, First, Middle Initial)

Mailing Address 29 Shadow Drive

City Pittsburgh State PA Zip Code 15227

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

Name of Employer AFSCME INT'L Occupation FIELD OFFICE ASST. I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.63**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : SA11AI.276560

Amount of Each Receipt this Period
13.87

B. RICHARD CAPONI
Full Name (Last, First, Middle Initial)

Mailing Address 4453 Stilley Road

City Pittsburgh State PA Zip Code 15227

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1321.77**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2012

Transaction ID : SA11AI.279616

Amount of Each Receipt this Period
115.68

C. GINO A. CARBENIA
Full Name (Last, First, Middle Initial)

Mailing Address 4646 Wakeford Street

City Columbus State OH Zip Code 43214

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

Name of Employer AFSCME INT'L Occupation ASSISTANT TO REGIONAL DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1818.03**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.276366

Amount of Each Receipt this Period
127.47

SUBTOTAL of Receipts This Page (optional).....▶	257.02
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 118 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. GINO A. CARBENIA			Date of Receipt
Mailing Address 4646 Wakeford Street			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.276561
Columbus	OH	43214	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="127.47"/>
Name of Employer	Occupation		
AFSCME INT'L	ASSISTANT TO REGIONAL DIRECTOR		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1945.50"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. DENISE L. CAREY			Date of Receipt
Mailing Address 4069 Brookrun Drive			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.278329
Columbus	OH	43204	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="16.00"/>
Name of Employer	Occupation		
AFSCME OH LOC 11/STATE OF OH	OFFICE ASSISTANT III		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="336.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. DENISE L. CAREY			Date of Receipt
Mailing Address 4069 Brookrun Drive			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.278687
Columbus	OH	43204	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="16.00"/>
Name of Employer	Occupation		
AFSCME OH LOC 11/STATE OF OH	OFFICE ASSISTANT III		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="352.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="159.47"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 119 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DENISE L. CAREY
Full Name (Last, First, Middle Initial)

Mailing Address 4069 Brookrun Drive

City Columbus State OH Zip Code 43204

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation OFFICE ASSISTANT III

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **368.00**

Date of Receipt **11 / 16 / 2012**

Transaction ID : SA11AI.279045

Amount of Each Receipt this Period **16.00**

B. JOYCE CARLSON
Full Name (Last, First, Middle Initial)

Mailing Address 911 Aldine Street

City Saint Paul State MN Zip Code 55104

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

Name of Employer AFSCME MN CN 5/CN14 Occupation BUSINESS REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **948.08**

Date of Receipt **11 / 14 / 2012**

Transaction ID : SA11AI.280027

Amount of Each Receipt this Period **72.28**

C. JUDY C. CARLSON
Full Name (Last, First, Middle Initial)

Mailing Address 300 Hardman Avenue South

City South St. Paul State MN Zip Code 55075

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

Name of Employer AFSCME MN CN 5/CN14 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt **11 / 14 / 2012**

Transaction ID : SA11AI.280028

Amount of Each Receipt this Period **40.00**

SUBTOTAL of Receipts This Page (optional)..... **128.28**

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 120 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MELISSA CARLSON
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277083

Amount of Each Receipt this Period
10.00

B. MELISSA CARLSON
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277667

Amount of Each Receipt this Period
10.00

C. SYLVIA C. CARLSON
Full Name (Last, First, Middle Initial)

Mailing Address 2936 38th Avenue NE

City Tacoma State WA Zip Code 98422

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
10 / 25 / 2012
Transaction ID : SA11AI.276792

Amount of Each Receipt this Period
10.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.50

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 121 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. SYLVIA C. CARLSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2936 38th Avenue NE
 City Tacoma State WA Zip Code 98422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277084
 Amount of Each Receipt this Period
 10.50

B. SYLVIA C. CARLSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 2936 38th Avenue NE
 City Tacoma State WA Zip Code 98422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277668
 Amount of Each Receipt this Period
 10.50

C. SHERI CARNAHAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2007 Emerald Drive
 City Davenport State IA Zip Code 52084
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IA CN 61 Occupation WORKFORCE ADVISOR II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 737.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2012
Transaction ID : SA11AI.280067
 Amount of Each Receipt this Period
 67.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 88.00
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 122 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MICHELE CARON
Full Name (Last, First, Middle Initial)

Mailing Address 5675 135th Street

City Little Falls State MN Zip Code 56345

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

Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.278116

Amount of Each Receipt this Period 20.00

B. ADDO CARPENTER JR.
Full Name (Last, First, Middle Initial)

Mailing Address 9212A S. Halsted Avenue

City Chicago State IL Zip Code 60620

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

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation CHILD SPECIALIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 376.61

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279395

Amount of Each Receipt this Period 31.23

C. CONSTANCE CARR
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277085

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 61.23

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 123 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. CONSTANCE CARR		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277669
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) B. CHAD W. CARTER		Date of Receipt
Mailing Address 6653 13th Street NW		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City Washington	State DC	Zip Code 20012
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.276367
Name of Employer AFSCME INT'L		Amount of Each Receipt this Period
Occupation MANAGER, MEMBER AND AFFILIATE SVCS		<input type="text" value="11.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) C. CHAD W. CARTER		Date of Receipt
Mailing Address 6653 13th Street NW		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City Washington	State DC	Zip Code 20012
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.276562
Name of Employer AFSCME INT'L		Amount of Each Receipt this Period
Occupation MANAGER, MEMBER AND AFFILIATE SVCS		<input type="text" value="11.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="411.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="32.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 124 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JANE M. CARTER		Date of Receipt
Mailing Address 315 12th Street NE Apt. 101		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City Washington	State DC	Zip Code 20002
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276368
Name of Employer AFSCME INT'L	Occupation ASST. DIRECTOR, ORGANIZING & FLD SVC	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="78.00"/>
	<input type="text" value="1552.50"/>	

Full Name (Last, First, Middle Initial) B. JANE M. CARTER		Date of Receipt
Mailing Address 315 12th Street NE Apt. 101		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City Washington	State DC	Zip Code 20002
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276563
Name of Employer AFSCME INT'L	Occupation ASST. DIRECTOR, ORGANIZING & FLD SVC	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="78.00"/>
	<input type="text" value="1630.50"/>	

Full Name (Last, First, Middle Initial) C. LEROY CARTER		Date of Receipt
Mailing Address 2648 Towner Road		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/>
City Ann Arbor	State MI	Zip Code 48105
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.279861
Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="2.25"/>
	<input type="text" value="585.93"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="158.25"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 125 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LEROY CARTER
Full Name (Last, First, Middle Initial)

Mailing Address 2648 Towner Road

City Ann Arbor State MI Zip Code 48105

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **615.05**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2012

Transaction ID : SA11AI.279911

Amount of Each Receipt this Period
29.12

B. LESLIE A. CARTER
Full Name (Last, First, Middle Initial)

Mailing Address 2466 Anna Way

City Elgin State IL Zip Code 60124

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

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **677.40**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2012

Transaction ID : SA11AI.279526

Amount of Each Receipt this Period
67.74

C. HEATHER J. CARVER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 554

City Taylorville State IL Zip Code 62568

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

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation MEDICAL ASSISTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2012

Transaction ID : SA11AI.279396

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional).....▶	126.86
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 126 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. ROBERT CASON
 Full Name (Last, First, Middle Initial)
 Mailing Address 4301 Executive Park Drive
 City Harrisburg State PA Zip Code 17111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1055.37

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.279617
 Amount of Each Receipt this Period 78.28

B. NORMA CASTRO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson Street SE
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276795
 Amount of Each Receipt this Period 20.00

C. NORMA CASTRO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson Street SE
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277087
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 118.28
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 127 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. NORMA CASTRO

Mailing Address 1212 Jefferson Street SE

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt **11 / 26 / 2012**

Transaction ID : SA11AI.277671

Amount of Each Receipt this Period **20.00**

Full Name (Last, First, Middle Initial)
B. TARA CAUGHEY

Mailing Address 114 Thompson Street

City Dalton State PA Zip Code 18414

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

Name of Employer AFSCME PA CN 13 Occupation CLERK

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **867.76**

Date of Receipt **11 / 14 / 2012**

Transaction ID : SA11AI.279618

Amount of Each Receipt this Period **73.16**

Full Name (Last, First, Middle Initial)
C. EDDIE A. CAUMIANT

Mailing Address 120 S. Virginia Avenue

City Belleville State IL Zip Code 62220

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

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **836.60**

Date of Receipt **11 / 01 / 2012**

Transaction ID : SA11AI.279527

Amount of Each Receipt this Period **83.66**

SUBTOTAL of Receipts This Page (optional)..... **176.82**

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 128 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MARK E CAVANAH
Full Name (Last, First, Middle Initial)

Mailing Address 243 Iroquois Drive

City Paducah State KY Zip Code 42001

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

Name of Employer AFSCME INT'L Occupation LEAD ORGANIZER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **982.18**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.276369

Amount of Each Receipt this Period
50.04

B. MARK E CAVANAH
Full Name (Last, First, Middle Initial)

Mailing Address 243 Iroquois Drive

City Paducah State KY Zip Code 42001

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

Name of Employer AFSCME INT'L Occupation LEAD ORGANIZER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1032.22**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : SA11AI.276564

Amount of Each Receipt this Period
50.04

C. WILLIAM CHAI
Full Name (Last, First, Middle Initial)

Mailing Address 888 Mililani Street Suite 601

City Honolulu State HI Zip Code 96813-2991

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

Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **277.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2012

Transaction ID : SA11AI.280399

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **120.08**

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 129 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. STACY CHAMBERLAIN
Full Name (Last, First, Middle Initial)

Mailing Address 5235 NE 23rd Avenue

City Portland State OR Zip Code 97211

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

Name of Employer AFSCME OR CN 75 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279360

Amount of Each Receipt this Period 250.00

B. RICHARD CHAMPAGNE
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277089

Amount of Each Receipt this Period 10.00

C. RICHARD CHAMPAGNE
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277673

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00

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 130 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LINDA D. CHAPMAN
Full Name (Last, First, Middle Initial)

Mailing Address 2576 Renwood Place

City Columbus State OH Zip Code 43211

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation TEACHER AIDE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 287.50

Date of Receipt 10 / 29 / 2012
Transaction ID : SA11AI.280259

Amount of Each Receipt this Period 12.50

B. LINDA D. CHAPMAN
Full Name (Last, First, Middle Initial)

Mailing Address 2576 Renwood Place

City Columbus State OH Zip Code 43211

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation TEACHER AIDE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 13 / 2012
Transaction ID : SA11AI.280289

Amount of Each Receipt this Period 12.50

C. LINDA D. CHAPMAN
Full Name (Last, First, Middle Initial)

Mailing Address 2576 Renwood Place

City Columbus State OH Zip Code 43211

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation TEACHER AIDE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 312.50

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.280319

Amount of Each Receipt this Period 12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 37.50

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 131 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JEANETTE CHAVEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 70 I Street SE
 Apt. 617
 City Washington State DC Zip Code 20003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation EXECUTIVE OFFICE ASSISTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **872.68**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276370
 Amount of Each Receipt this Period
37.93

B. JEANETTE CHAVEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 70 I Street SE
 Apt. 617
 City Washington State DC Zip Code 20003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation EXECUTIVE OFFICE ASSISTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **911.73**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : SA11AI.276565
 Amount of Each Receipt this Period
39.05

C. KARL E. CHILDRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1605 E Street SE
 City Washington State DC Zip Code 20003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation MANAGER, APPLICATIONS DEVELOPMENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1094.51**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276371
 Amount of Each Receipt this Period
49.74

SUBTOTAL of Receipts This Page (optional).....▶	126.72
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 132 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KARL E. CHILDRESS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1605 E Street SE
 City Washington State DC Zip Code 20003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation MANAGER, APPLICATIONS DEVELOPMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1144.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : SA11AI.276566
 Amount of Each Receipt this Period
 49.74

B. NICHELLE CHIVIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4301 Executive Park Drive
 City Harrisburg State PA Zip Code 17111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 661.90

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.279619
 Amount of Each Receipt this Period
 73.16

C. MONA K O CHOCK
 Full Name (Last, First, Middle Initial)
 Mailing Address 2392 Kaola Way
 City Honolulu State HI Zip Code 96813
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.280401
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	142.90
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 133 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JUDY K CHOW
Full Name (Last, First, Middle Initial)

Mailing Address 888 Mililani Street
Suite 601

City Honolulu State HI Zip Code 96813-2991

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

Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
11 / 02 / 2012
Transaction ID : SA11AI.280402

Amount of Each Receipt this Period
100.00

B. SANFORD CHUN
Full Name (Last, First, Middle Initial)

Mailing Address 98-1664 Hapaki Street

City Aiea State HI Zip Code 96701

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

Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
11 / 02 / 2012
Transaction ID : SA11AI.280404

Amount of Each Receipt this Period
25.00

C. NICK CIARAMITARO
Full Name (Last, First, Middle Initial)

Mailing Address 19473 Candlelight Street

City Roseville State MI Zip Code 48066

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
574.12

Date of Receipt
11 / 07 / 2012
Transaction ID : SA11AI.279862

Amount of Each Receipt this Period
29.12

SUBTOTAL of Receipts This Page (optional)..... ▶ 154.12

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 134 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. NICK CIARAMITARO
Full Name (Last, First, Middle Initial)

Mailing Address 19473 Candlelight Street

City Roseville State MI Zip Code 48066

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **576.37**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2012

Transaction ID : SA11AI.279912

Amount of Each Receipt this Period
2.25

B. MICHAEL CLADWELL
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 628043

City Middleton State WI Zip Code 53562

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

Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 22 / 2012

Transaction ID : SA11AI.277537

Amount of Each Receipt this Period
15.00

C. MICHAEL CLADWELL
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 628043

City Middleton State WI Zip Code 53562

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

Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2012

Transaction ID : SA11AI.277538

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional).....▶	32.25
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 135 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. MICHAEL CLADWELL
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 628043
 City Middleton State WI Zip Code 53562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 19 / 2012
Transaction ID : SA11AI.277539
 Amount of Each Receipt this Period 15.00

B. CAROLYN CLARK
 Full Name (Last, First, Middle Initial)
 Mailing Address 4415 Rolling Pine
 City West Bloomfield State MI Zip Code 48324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 07 / 2012
Transaction ID : SA11AI.279863
 Amount of Each Receipt this Period 25.00

C. CAROLYN CLARK
 Full Name (Last, First, Middle Initial)
 Mailing Address 4415 Rolling Pine
 City West Bloomfield State MI Zip Code 48324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 20 / 2012
Transaction ID : SA11AI.279913
 Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
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 136 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CHARLES E. CLARK
Full Name (Last, First, Middle Initial)

Mailing Address 240 Alamosa Path SW

City Atlanta State GA Zip Code 30349

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

Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **217.62**

Date of Receipt **11 / 15 / 2012**

Transaction ID : SA11AI.276568

Amount of Each Receipt this Period **36.27**

B. FLOYD D. CLARK
Full Name (Last, First, Middle Initial)

Mailing Address 7219 E 900th Avenue

City Robinson State IL Zip Code 62454

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

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation SUPERVISOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **294.00**

Date of Receipt **11 / 01 / 2012**

Transaction ID : SA11AI.279397

Amount of Each Receipt this Period **29.40**

C. JACKIE E. CLARK
Full Name (Last, First, Middle Initial)

Mailing Address 12135 Middlefork Road

City Amanda State OH Zip Code 43102

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation WAGE/HOUR ANALYST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 19 / 2012**

Transaction ID : SA11AI.278335

Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional)..... **75.67**

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 137 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JACKIE E. CLARK
Full Name (Last, First, Middle Initial)

Mailing Address 12135 Middlefork Road

City Amanda	State OH	Zip Code 43102
----------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation WAGE/HOUR ANALYST
--	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.278693

Amount of Each Receipt this Period
10.00

B. JACKIE E. CLARK
Full Name (Last, First, Middle Initial)

Mailing Address 12135 Middlefork Road

City Amanda	State OH	Zip Code 43102
----------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation WAGE/HOUR ANALYST
--	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2012

Transaction ID : SA11AI.279051

Amount of Each Receipt this Period
10.00

C. MATRELLE C. CLARK
Full Name (Last, First, Middle Initial)

Mailing Address 519 Long Street

City Cambridge	State OH	Zip Code 43725
-------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.278336

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 138 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MATRELLE C. CLARK
 Full Name (Last, First, Middle Initial)
 Mailing Address 519 Long Street
 City Cambridge State OH Zip Code 43725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278694
 Amount of Each Receipt this Period
 10.00

B. MATRELLE C. CLARK
 Full Name (Last, First, Middle Initial)
 Mailing Address 519 Long Street
 City Cambridge State OH Zip Code 43725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279052
 Amount of Each Receipt this Period
 10.00

C. SHANE CLARK
 Full Name (Last, First, Middle Initial)
 Mailing Address 5296 Autumnwood Drive
 City Cochrannton State PA Zip Code 16314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 453.68

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.279620
 Amount of Each Receipt this Period
 41.72

SUBTOTAL of Receipts This Page (optional).....▶	61.72
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 139 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. BRADLEE T. CLAYCAMP		Date of Receipt
Mailing Address 2201 NE 86th Ave.		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City	State	Zip Code
Vancouver	WA	98664
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.277092
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>
Name of Employer	Occupation	
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. BRADLEE T. CLAYCAMP		Date of Receipt
Mailing Address 2201 NE 86th Ave.		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code
Vancouver	WA	98664
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.277676
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>
Name of Employer	Occupation	
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. KRISTINA A. CLAYPOOL		Date of Receipt
Mailing Address 1921 Dial Court		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City	State	Zip Code
Springfield	IL	62704
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.279398
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="45.00"/>
Name of Employer	Occupation	
AFSCME IL CN 31/STATE OF IL	PUBLIC SERVICE ADMIN	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="315.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="65.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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 140 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. PAULINE CLAYTON-ROSE		Date of Receipt
Mailing Address 2340 Ashurst Road		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City	State	Zip Code
University Heights	OH	44118
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.280162
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME OH LOC 4	FIELD SECRETARY	<input type="text" value="9.62"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="202.02"/>	

Full Name (Last, First, Middle Initial) B. PAULINE CLAYTON-ROSE		Date of Receipt
Mailing Address 2340 Ashurst Road		<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City	State	Zip Code
University Heights	OH	44118
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.280217
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME OH LOC 4	FIELD SECRETARY	<input type="text" value="9.62"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="211.64"/>	

Full Name (Last, First, Middle Initial) C. RUSSELL J. CLEMENS		Date of Receipt
Mailing Address 116 Cranburne Lane		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City	State	Zip Code
Willamsville	NY	14221
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.279976
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME MD CN 982	STAFF REPRESENTATIVE	<input type="text" value="87.42"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="961.62"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="106.66"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 141 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. DONALD L. CLINE
 Full Name (Last, First, Middle Initial)
 Mailing Address 21 E Hope Place
 City Shelton State WA Zip Code 98584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 662.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2012
Transaction ID : SA11AI.276801
 Amount of Each Receipt this Period
 30.00

B. DONALD L. CLINE
 Full Name (Last, First, Middle Initial)
 Mailing Address 21 E Hope Place
 City Shelton State WA Zip Code 98584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 692.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277093
 Amount of Each Receipt this Period
 30.00

C. DONALD L. CLINE
 Full Name (Last, First, Middle Initial)
 Mailing Address 21 E Hope Place
 City Shelton State WA Zip Code 98584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 722.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277677
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 142 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. SHANE CLONTZ		Date of Receipt
Mailing Address P.O. Box #8461		M M / D D / Y Y Y Y 11 / 01 / 2012
City	State	Zip Code
Springfield	IL	62791
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.279399
C		Amount of Each Receipt this Period
		37.80
Name of Employer	Occupation	
AFSCME IL CN 31/STATE OF IL	PUBLIC SERVICE ADMIN	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	264.60	

Full Name (Last, First, Middle Initial) B. KATHERINE A. COAKLEY		Date of Receipt
Mailing Address 410 S. Maple Avenue #604		M M / D D / Y Y Y Y 10 / 31 / 2012
City	State	Zip Code
Falls Church	VA	20046
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.276374
C		Amount of Each Receipt this Period
		45.39
Name of Employer	Occupation	
AFSCME INT'L	AFFILIATE COMMUNICATION MANAGER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	916.32	

Full Name (Last, First, Middle Initial) C. KATHERINE A. COAKLEY		Date of Receipt
Mailing Address 410 S. Maple Avenue #604		M M / D D / Y Y Y Y 11 / 15 / 2012
City	State	Zip Code
Falls Church	VA	20046
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.276569
C		Amount of Each Receipt this Period
		45.39
Name of Employer	Occupation	
AFSCME INT'L	AFFILIATE COMMUNICATION MANAGER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	961.71	

SUBTOTAL of Receipts This Page (optional).....▶	128.58
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 143 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LINCOLN COHEN
Full Name (Last, First, Middle Initial)

Mailing Address 4500 E. 6th Street

City Gary	State IN	Zip Code 46403
--------------	-------------	-------------------

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

Name of Employer AFSCME IL CN 31	Occupation EDITOR
-------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
766.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11AI.279528

Amount of Each Receipt this Period
76.54

B. FRED W. COKER
Full Name (Last, First, Middle Initial)

Mailing Address 134 Literal Road

City Chehalis	State WA	Zip Code 98532
------------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2012

Transaction ID : SA11AI.276802

Amount of Each Receipt this Period
10.50

C. FRED W. COKER
Full Name (Last, First, Middle Initial)

Mailing Address 134 Literal Road

City Chehalis	State WA	Zip Code 98532
------------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11AI.277094

Amount of Each Receipt this Period
10.50

SUBTOTAL of Receipts This Page (optional).....	97.54
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 144 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. FRED W. COKER		Date of Receipt
Mailing Address 134 Literal Road		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code
Chehalis	WA	98532
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.27678
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10.50"/>
Name of Employer	Occupation	
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="231.00"/>	

Full Name (Last, First, Middle Initial) B. AARON J. COLE		Date of Receipt
Mailing Address 1520 Brighton Way SE		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Olympia	WA	98501
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.276375
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="31.22"/>
Name of Employer	Occupation	
AFSCME INT'L	INT'L UNION REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="609.45"/>	

Full Name (Last, First, Middle Initial) C. AARON J. COLE		Date of Receipt
Mailing Address 1520 Brighton Way SE		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Olympia	WA	98501
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.276570
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="31.22"/>
Name of Employer	Occupation	
AFSCME INT'L	INT'L UNION REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="640.67"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="72.94"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 145 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KENTON C. COLE
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 882

City Lomax State IA Zip Code 61454

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

Name of Employer AFSCME IA CN 61 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **825.00**

Date of Receipt **11 / 07 / 2012**

Transaction ID : SA11AI.280068

Amount of Each Receipt this Period **80.00**

B. RENE COLLAZO
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 25 / 2012**

Transaction ID : SA11AI.276803

Amount of Each Receipt this Period **10.50**

C. RENE COLLAZO
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.50**

Date of Receipt **11 / 09 / 2012**

Transaction ID : SA11AI.277095

Amount of Each Receipt this Period **10.50**

SUBTOTAL of Receipts This Page (optional)..... ► **101.00**

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 146 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. RENE COLLAZO		Date of Receipt M M / D D / Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11AI.277679
Mailing Address 1212 Jefferson St., SE Suite 300		Amount of Each Receipt this Period 10.50
City Olympia	State WA Zip Code 98501	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 231.00
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. RAMONA COLLINS-SALIM		Date of Receipt M M / D D / Y Y Y Y Y 10 / 19 / 2012 Transaction ID : SA11AI.278340
Mailing Address 741 Belmont Avenue		Amount of Each Receipt this Period 11.00
City Toledo	State OH Zip Code 43604	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 231.00
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. RAMONA COLLINS-SALIM		Date of Receipt M M / D D / Y Y Y Y Y 11 / 02 / 2012 Transaction ID : SA11AI.278698
Mailing Address 741 Belmont Avenue		Amount of Each Receipt this Period 11.00
City Toledo	State OH Zip Code 43604	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 242.00
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	32.50
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 147 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. RAMONA COLLINS-SALIM
 Full Name (Last, First, Middle Initial)
 Mailing Address 741 Belmont Avenue
 City Toledo State OH Zip Code 43604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 253.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279056
 Amount of Each Receipt this Period 11.00

B. KATHERINE COLVIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3198 W 54th Street
 City Cleveland State OH Zip Code 44102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278341
 Amount of Each Receipt this Period 11.00

C. KATHERINE COLVIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3198 W 54th Street
 City Cleveland State OH Zip Code 44102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 242.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278699
 Amount of Each Receipt this Period 11.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 33.00
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 148 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KATHERINE COLVIN
Full Name (Last, First, Middle Initial)

Mailing Address 3198 W 54th Street

City Cleveland State OH Zip Code 44102

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **253.00**

Date of Receipt **11 / 16 / 2012**

Transaction ID : SA11AI.279057

Amount of Each Receipt this Period **11.00**

B. TRACEY CONATY
Full Name (Last, First, Middle Initial)

Mailing Address 3525 Quebec Street NW

City Washington State DC Zip Code 20016

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

Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, NEW MEDIA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1110.00**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.276376

Amount of Each Receipt this Period **52.50**

C. TRACEY CONATY
Full Name (Last, First, Middle Initial)

Mailing Address 3525 Quebec Street NW

City Washington State DC Zip Code 20016

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

Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, NEW MEDIA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1162.50**

Date of Receipt **11 / 15 / 2012**

Transaction ID : SA11AI.276571

Amount of Each Receipt this Period **52.50**

SUBTOTAL of Receipts This Page (optional)..... **116.00**

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 149 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. AMY CONKLIN
Full Name (Last, First, Middle Initial)
Mailing Address 1212 Jefferson Street SE

City Olympia	State WA	Zip Code 98501
-----------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		25		2012

Transaction ID : SA11AI.276804

Amount of Each Receipt this Period
15.00

B. AMY CONKLIN
Full Name (Last, First, Middle Initial)
Mailing Address 1212 Jefferson Street SE

City Olympia	State WA	Zip Code 98501
-----------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
266.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		09		2012

Transaction ID : SA11AI.277096

Amount of Each Receipt this Period
15.00

C. AMY CONKLIN
Full Name (Last, First, Middle Initial)
Mailing Address 1212 Jefferson Street SE

City Olympia	State WA	Zip Code 98501
-----------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
281.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		26		2012

Transaction ID : SA11AI.277680

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional).....	45.00
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 150 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DONALD W. CONLEY
Full Name (Last, First, Middle Initial)

Mailing Address 2695 Schaff Drive

City Columbus State OH Zip Code 43209

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

Name of Employer AFSCME OH LOC 11 Occupation OPERATIONS DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **484.00**

Date of Receipt **10 / 24 / 2012**

Transaction ID : SA11AI.280102

Amount of Each Receipt this Period **44.00**

B. HILARY L. CONLEY
Full Name (Last, First, Middle Initial)

Mailing Address 3443 Pine Way

City Powell State OH Zip Code 43065

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

Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **440.91**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.279800

Amount of Each Receipt this Period **44.18**

C. THOMAS R. CONNELLY
Full Name (Last, First, Middle Initial)

Mailing Address 1364 Clinton Street

City Niles State OH Zip Code 44446

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

Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **242.34**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.279801

Amount of Each Receipt this Period **15.00**

SUBTOTAL of Receipts This Page (optional)..... **103.18**

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 151 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MELODY K. CONRAD
Full Name (Last, First, Middle Initial)

Mailing Address 4020 Basil Western Road

City	State	Zip Code
Baltimore	OH	43015

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

Name of Employer	Occupation
AFSCME OH LOC 11/STATE OF OH	TRANSPORTATION TECHN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **252.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2012

Transaction ID : SA11AI.278344

Amount of Each Receipt this Period

12.00

B. MELODY K. CONRAD
Full Name (Last, First, Middle Initial)

Mailing Address 4020 Basil Western Road

City	State	Zip Code
Baltimore	OH	43015

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

Name of Employer	Occupation
AFSCME OH LOC 11/STATE OF OH	TRANSPORTATION TECHN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **264.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2012

Transaction ID : SA11AI.278702

Amount of Each Receipt this Period

12.00

C. MELODY K. CONRAD
Full Name (Last, First, Middle Initial)

Mailing Address 4020 Basil Western Road

City	State	Zip Code
Baltimore	OH	43015

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

Name of Employer	Occupation
AFSCME OH LOC 11/STATE OF OH	TRANSPORTATION TECHN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **276.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2012

Transaction ID : SA11AI.279060

Amount of Each Receipt this Period

12.00

SUBTOTAL of Receipts This Page (optional).....▶	36.00
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 152 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BEVERLY S. CONTEE
Full Name (Last, First, Middle Initial)

Mailing Address 12061 Beltsville Drive

City Beltsville State MD Zip Code 20705

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

Name of Employer AFSCME INT'L Occupation LEGAL ASSISTANT II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.276377

Amount of Each Receipt this Period
10.00

B. BEVERLY S. CONTEE
Full Name (Last, First, Middle Initial)

Mailing Address 12061 Beltsville Drive

City Beltsville State MD Zip Code 20705

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

Name of Employer AFSCME INT'L Occupation LEGAL ASSISTANT II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : SA11AI.276572

Amount of Each Receipt this Period
10.00

C. WENDY R. CONWAY
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2012

Transaction ID : SA11AI.276805

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... **40.00**

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 153 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. WENDY R. CONWAY
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277097

Amount of Each Receipt this Period
20.00

B. WENDY R. CONWAY
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277681

Amount of Each Receipt this Period
20.00

C. MAL J. COREY
Full Name (Last, First, Middle Initial)

Mailing Address 3416 Frankfort Clarksburg Pike

City Frankfort State OH Zip Code 45628

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
10 / 19 / 2012
Transaction ID : SA11AI.278346

Amount of Each Receipt this Period
12.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 52.00

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 154 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MAL J. COREY
Full Name (Last, First, Middle Initial)

Mailing Address 3416 Frankfort Clarksburg Pike

City Frankfort	State OH	Zip Code 45628
-------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
264.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.278704

Amount of Each Receipt this Period
12.00

B. MAL J. COREY
Full Name (Last, First, Middle Initial)

Mailing Address 3416 Frankfort Clarksburg Pike

City Frankfort	State OH	Zip Code 45628
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2012

Transaction ID : SA11AI.279062

Amount of Each Receipt this Period
12.00

C. SYLVIA Y. COSLOW
Full Name (Last, First, Middle Initial)

Mailing Address 1931 N 2nd Street

City Harrisburg	State PA	Zip Code 17102
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13/STATE OF PA	Occupation STAFF REPRESENTATIVE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.279718

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	74.00
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 155 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BARBARA COUFAL
Full Name (Last, First, Middle Initial)

Mailing Address 10112 Parkwood Drive

City Bethesda State MD Zip Code 20814

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

Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, FED GOVT AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1322.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276378

Amount of Each Receipt this Period 52.50

B. BARBARA COUFAL
Full Name (Last, First, Middle Initial)

Mailing Address 10112 Parkwood Drive

City Bethesda State MD Zip Code 20814

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

Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, FED GOVT AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1374.50

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276573

Amount of Each Receipt this Period 52.50

C. PATRICIA A. COULTER
Full Name (Last, First, Middle Initial)

Mailing Address 27702 NE 73rd Avenue

City Battle Ground State WA Zip Code 98604

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276808

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. PATRICIA A. COULTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 27702 NE 73rd Avenue
 City State Zip Code
 Battle Ground WA 98604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277100
 Amount of Each Receipt this Period
 20.00

B. PATRICIA A. COULTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 27702 NE 73rd Avenue
 City State Zip Code
 Battle Ground WA 98604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277684
 Amount of Each Receipt this Period
 20.00

C. CHRISTOPHER COWEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 47 Douglas Street
 City State Zip Code
 Saint Paul MN 55102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME MN CN 5/CN14 BUSINESS REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 782.54

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.280029
 Amount of Each Receipt this Period
 71.14

SUBTOTAL of Receipts This Page (optional).....▶	111.14
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 157 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CLAIRE V. COWLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 822 Melrose Avenue
 City Columbus State OH Zip Code 43224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278347
 Amount of Each Receipt this Period
 10.00

B. CLAIRE V. COWLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 822 Melrose Avenue
 City Columbus State OH Zip Code 43224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278705
 Amount of Each Receipt this Period
 10.00

C. CLAIRE V. COWLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 822 Melrose Avenue
 City Columbus State OH Zip Code 43224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279063
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 158 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOSEPH COX
Full Name (Last, First, Middle Initial)

Mailing Address 190 W. Ostend Street
Suite 101

City Baltimore State MD Zip Code 21230

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

Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
495.00

Date of Receipt
11 / 05 / 2012
Transaction ID : SA11AI.279977

Amount of Each Receipt this Period
45.00

B. JESSICA M. CRINEAN
Full Name (Last, First, Middle Initial)

Mailing Address 31 Chicago Avenue
Apt. 8

City Yakima State WA Zip Code 98902

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277103

Amount of Each Receipt this Period
10.00

C. JESSICA M. CRINEAN
Full Name (Last, First, Middle Initial)

Mailing Address 31 Chicago Avenue
Apt. 8

City Yakima State WA Zip Code 98902

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277687

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00

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 159 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KEMIE P. CRISP
Full Name (Last, First, Middle Initial)

Mailing Address 1613 E Capitol Avenue

City Springfield State IL Zip Code 62703

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

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation OFFICE COORDINATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 219.24

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279400

Amount of Each Receipt this Period 31.32

B. DICK CROFTER
Full Name (Last, First, Middle Initial)

Mailing Address 238 S. Oak Park Avenue #1F

City Oak Park State IL Zip Code 60302

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

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 677.46

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279529

Amount of Each Receipt this Period 67.80

C. CARLOS CROSS
Full Name (Last, First, Middle Initial)

Mailing Address 1034 N. Washington Avenue

City Lansing State MI Zip Code 48906

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 611.52

Date of Receipt 11 / 07 / 2012
Transaction ID : SA11AI.279865

Amount of Each Receipt this Period 29.12

SUBTOTAL of Receipts This Page (optional)..... ▶ 128.24

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 161 OF 846
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input 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

A. GLENDA CUMMINS
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
10 / 25 / 2012
Transaction ID : SA11AI.276813

Amount of Each Receipt this Period
10.50

B. GLENDA CUMMINS
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.50

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277105

Amount of Each Receipt this Period
10.50

C. GLENDA CUMMINS
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277689

Amount of Each Receipt this Period
10.50

SUBTOTAL of Receipts This Page (optional).....▶ 31.50

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 162 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DEBORAH CURRIE
Full Name (Last, First, Middle Initial)

Mailing Address 4031 Executive Park Drive

City Harrisburg State PA Zip Code 17111

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **700.21**

Date of Receipt **11 / 14 / 2012**

Transaction ID : SA11AI.279621

Amount of Each Receipt this Period **62.56**

B. MICHAEL S. CURRY
Full Name (Last, First, Middle Initial)

Mailing Address 2979 Tracer Road

City Columbus State OH Zip Code 43232

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation PROGRAMMER/ANALYST II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 19 / 2012**

Transaction ID : SA11AI.278350

Amount of Each Receipt this Period **10.00**

C. MICHAEL S. CURRY
Full Name (Last, First, Middle Initial)

Mailing Address 2979 Tracer Road

City Columbus State OH Zip Code 43232

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation PROGRAMMER/ANALYST II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 02 / 2012**

Transaction ID : SA11AI.278708

Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional).....▶	82.56
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 163 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MICHAEL S. CURRY
Full Name (Last, First, Middle Initial)

Mailing Address 2979 Tracer Road

City Columbus	State OH	Zip Code 43232
------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation PROGRAMMER/ANALYST II
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2012

Transaction ID : SA11AI.279066

Amount of Each Receipt this Period

10.00

B. DOUGLAS H. CURTIS
Full Name (Last, First, Middle Initial)

Mailing Address N5326 Rice Lane

City Gleason	State WI	Zip Code 54435
-----------------	-------------	-------------------

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

Name of Employer AFSCME WI CN 24/STATE OF WI	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2012

Transaction ID : SA11AI.277540

Amount of Each Receipt this Period

10.00

C. DOUGLAS H. CURTIS
Full Name (Last, First, Middle Initial)

Mailing Address N5326 Rice Lane

City Gleason	State WI	Zip Code 54435
-----------------	-------------	-------------------

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

Name of Employer AFSCME WI CN 24/STATE OF WI	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.277541

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 164 OF 846
	<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	<input 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

A. DOUGLAS H. CURTIS
 Full Name (Last, First, Middle Initial)
 Mailing Address N5326 Rice Lane
 City Gleason State WI Zip Code 54435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.277542
 Amount of Each Receipt this Period
 10.00

B. SANDRA J CURTIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 23243 Gateway Drive
 City Akeley State MN Zip Code 56433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MN CN 5 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.280030
 Amount of Each Receipt this Period
 30.00

C. TYRONE CUTKOMP
 Full Name (Last, First, Middle Initial)
 Mailing Address 4320 NW Second Avenue
 City Des Moines State IA Zip Code 50313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IA CN 61 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2012
Transaction ID : SA11AI.280069
 Amount of Each Receipt this Period
 18.36

SUBTOTAL of Receipts This Page (optional).....▶	58.36
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 165 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. TRACY L. CUTRIGHT
Full Name (Last, First, Middle Initial)

Mailing Address 3009 Denwood Drive

City Moundsville	State WV	Zip Code 26041
---------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **462.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		19		2012

Transaction ID : SA11AI.278352

Amount of Each Receipt this Period

22.00

B. TRACY L. CUTRIGHT
Full Name (Last, First, Middle Initial)

Mailing Address 3009 Denwood Drive

City Moundsville	State WV	Zip Code 26041
---------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **484.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2012

Transaction ID : SA11AI.278710

Amount of Each Receipt this Period

22.00

C. TRACY L. CUTRIGHT
Full Name (Last, First, Middle Initial)

Mailing Address 3009 Denwood Drive

City Moundsville	State WV	Zip Code 26041
---------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **506.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		16		2012

Transaction ID : SA11AI.279068

Amount of Each Receipt this Period

22.00

SUBTOTAL of Receipts This Page (optional).....▶	66.00
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 166 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JIM A. DAHLING
Full Name (Last, First, Middle Initial)

Mailing Address 66983 403rd Avenue

City Goodhue State MN Zip Code 55027

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

Name of Employer AFSCME MN CN 65 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **520.86**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2012

Transaction ID : SA11AI.280373

Amount of Each Receipt this Period
70.86

B. JEFFREY DAINS
Full Name (Last, First, Middle Initial)

Mailing Address 1743 Carl Street

City Roseville State MN Zip Code 55113

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

Name of Employer AFSCME MN CN 5/CN14 Occupation BUSINESS REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **594.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2012

Transaction ID : SA11AI.280031

Amount of Each Receipt this Period
54.00

C. WILLIAM DANDO
Full Name (Last, First, Middle Initial)

Mailing Address 6630 Huntingdon Street

City Harrisburg State PA Zip Code 17111

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

Name of Employer AFSCME PA CN 13 Occupation ASSOCIATE LEGISLATIVE DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1854.79**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2012

Transaction ID : SA11AI.279622

Amount of Each Receipt this Period
196.36

SUBTOTAL of Receipts This Page (optional).....▶	321.22
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 167 OF 846
	<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	<input 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

A. SAMANTHA DANIELSON
Full Name (Last, First, Middle Initial)

Mailing Address 4031 Executive Park Drive

City Harrisburg State PA Zip Code 17111

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.279623

Amount of Each Receipt this Period
 200.00

B. MARGARET A DANISON
Full Name (Last, First, Middle Initial)

Mailing Address 5 Heritage Place

City Ballston Spa State NY Zip Code 12020

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

Name of Employer AFSCME INT'L Occupation FIELD OFFICE ASSISTANT II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276380

Amount of Each Receipt this Period
 15.00

C. MARGARET A DANISON
Full Name (Last, First, Middle Initial)

Mailing Address 5 Heritage Place

City Ballston Spa State NY Zip Code 12020

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

Name of Employer AFSCME INT'L Occupation FIELD OFFICE ASSISTANT II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : SA11AI.276575

Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 168 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. TAWFIK Y DAOUD
Full Name (Last, First, Middle Initial)

Mailing Address 13304 Clifton Park Circle

City Clifton	State VA	Zip Code 20124
-----------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation NETWORK ANALYST III
----------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **946.20**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276381

Amount of Each Receipt this Period

47.31

B. TAWFIK Y DAOUD
Full Name (Last, First, Middle Initial)

Mailing Address 13304 Clifton Park Circle

City Clifton	State VA	Zip Code 20124
-----------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation NETWORK ANALYST III
----------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **993.51**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SA11AI.276576

Amount of Each Receipt this Period

47.31

C. ELMER D. DARST
Full Name (Last, First, Middle Initial)

Mailing Address 266 Penick Avenue

City Delaware	State OH	Zip Code 43015
------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.278353

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional).....▶	104.62
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 169 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ELMER D. DARST
Full Name (Last, First, Middle Initial)

Mailing Address 266 Penick Avenue

City Delaware	State OH	Zip Code 43015
------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.278711

Amount of Each Receipt this Period
10.00

B. ELMER D. DARST
Full Name (Last, First, Middle Initial)

Mailing Address 266 Penick Avenue

City Delaware	State OH	Zip Code 43015
------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	16	/	2012

Transaction ID : SA11AI.279069

Amount of Each Receipt this Period
10.00

C. CHRISTINE DAUGHERTY
Full Name (Last, First, Middle Initial)

Mailing Address 4031 Executive Park Drive

City Harrisburg	State PA	Zip Code 17111
--------------------	-------------	-------------------

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

Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
339.18

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	14	/	2012

Transaction ID : SA11AI.279611

Amount of Each Receipt this Period
48.66

SUBTOTAL of Receipts This Page (optional).....	68.66
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 170 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DEBORAH M. DAUNHAUER
 Full Name (Last, First, Middle Initial)
 Mailing Address 3504 2nd Street
 City Union Gap State WA Zip Code 98903
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276814
 Amount of Each Receipt this Period 10.50

B. DEBORAH M. DAUNHAUER
 Full Name (Last, First, Middle Initial)
 Mailing Address 3504 2nd Street
 City Union Gap State WA Zip Code 98903
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.50

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277106
 Amount of Each Receipt this Period 10.50

C. DEBORAH M. DAUNHAUER
 Full Name (Last, First, Middle Initial)
 Mailing Address 3504 2nd Street
 City Union Gap State WA Zip Code 98903
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277690
 Amount of Each Receipt this Period 10.50

SUBTOTAL of Receipts This Page (optional).....▶	31.50
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 171 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. KIMBERLY A. DAVANZO		Date of Receipt
Mailing Address 4901 New Castle Road		<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
City State Zip Code Lowellville OH 44436		Transaction ID : SA11AI.279624
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="36.48"/>
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="383.01"/>	

Full Name (Last, First, Middle Initial) B. MATTHEW P. DAVENHALL		Date of Receipt
Mailing Address 7305 213th Place SW Apt. 104		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City State Zip Code Edmonds WA 98026		Transaction ID : SA11AI.277922
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="11.00"/>
Name of Employer AFSCME WA CN 28/COMM COLLEGE	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="209.00"/>	

Full Name (Last, First, Middle Initial) C. JOE C. DAVENPORT		Date of Receipt
Mailing Address 3825 NE 125th Street		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City State Zip Code Seattle WA 98125		Transaction ID : SA11AI.277354
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="40.00"/>
Name of Employer AFSCME WA CN 28/UNIV OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="295.50"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="87.48"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 172 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JOE C. DAVENPORT		Date of Receipt
Mailing Address 3825 NE 125th Street		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code
Seattle	WA	98125
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.277913
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME WA CN 28/UNIV OF WA	STAFF REPRESENTATIVE	<input type="text" value="40.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="335.50"/>	

Full Name (Last, First, Middle Initial) B. NATALYA DAVIDOVICH		Date of Receipt
Mailing Address 10143 SE Harold Street		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Portland	OR	97266
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.277954
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME OR CN 75/STATE OF OR	LEGAL ASSISTANT	<input type="text" value="20.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="215.00"/>	

Full Name (Last, First, Middle Initial) C. BERI L. DAVIDSON		Date of Receipt
Mailing Address 2451 W. Prospect Avenue		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Hood River	OR	97031
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.277955
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME OR CN 75/STATE OF OR	STAFF REPRESENTATIVE	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="85.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 173 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. SARA DAVIES
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 453

City State Zip Code
Factoryville PA 18419

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

Name of Employer Occupation
AFSCME PA CN 13 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.30

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 14 / 2012
Transaction ID : SA11AI.279625

Amount of Each Receipt this Period
26.50

B. ABIGAIL K. DAVIS
Full Name (Last, First, Middle Initial)

Mailing Address 1806 West Rice Street
Apt. 2N

City State Zip Code
Chicago IL 60622

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

Name of Employer Occupation
AFSCME IL CN 31 ORGANIZER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
651.35

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 01 / 2012
Transaction ID : SA11AI.279530

Amount of Each Receipt this Period
67.65

C. DIANE DAVIS
Full Name (Last, First, Middle Initial)

Mailing Address 1208 Gertrude Drive

City State Zip Code
Champaign IL 61821

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

Name of Employer Occupation
AFSCME IL CN 31/STATE OF IL SECRETARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
417.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 01 / 2012
Transaction ID : SA11AI.279401

Amount of Each Receipt this Period
41.70

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.85

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 174 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JUDITH B. DAVIS
Full Name (Last, First, Middle Initial)

Mailing Address 2536 Cherry Road

City Springfield State IL Zip Code 62704

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

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation PUBLIC SERVICE ADMIN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **551.25**

Date of Receipt **11 / 01 / 2012**

Transaction ID : SA11AI.279402

Amount of Each Receipt this Period **78.75**

B. MARK R. DAVIS
Full Name (Last, First, Middle Initial)

Mailing Address 14724 Armin Avenue

City Lakewood State OH Zip Code 44107

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

Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **651.01**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.279803

Amount of Each Receipt this Period **88.56**

C. MICHAEL A. DAVIS
Full Name (Last, First, Middle Initial)

Mailing Address 8364 Papillon Avenue

City Reynoldsburg State OH Zip Code 43068

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation INSURANCE COMPLAINT ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **206.00**

Date of Receipt **10 / 19 / 2012**

Transaction ID : SA11AI.278358

Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional)..... **177.31**

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 175 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. MICHAEL A. DAVIS

Mailing Address 8364 Papillon Avenue

City Reynoldsburg State OH Zip Code 43068

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

Name of Employer: AFSCME OH LOC 11/STATE OF OH Occupation: INSURANCE COMPLAINT ANALYST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **216.00**

Date of Receipt: **11 / 02 / 2012**
Transaction ID : SA11AI.278716

Amount of Each Receipt this Period: **10.00**

Full Name (Last, First, Middle Initial)
B. MICHAEL A. DAVIS

Mailing Address 8364 Papillon Avenue

City Reynoldsburg State OH Zip Code 43068

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

Name of Employer: AFSCME OH LOC 11/STATE OF OH Occupation: INSURANCE COMPLAINT ANALYST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **226.00**

Date of Receipt: **11 / 16 / 2012**
Transaction ID : SA11AI.279074

Amount of Each Receipt this Period: **10.00**

Full Name (Last, First, Middle Initial)
C. ROBERT A. DAVIS

Mailing Address 822 Bovee Lane

City Powell State OH Zip Code 43065

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

Name of Employer: AFSCME OH CN 8 Occupation: ASSOCIATE DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **871.89**

Date of Receipt: **10 / 31 / 2012**
Transaction ID : SA11AI.279804

Amount of Each Receipt this Period: **87.32**

SUBTOTAL of Receipts This Page (optional)..... ► **107.32**

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 176 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ROBERT DAVIS
Full Name (Last, First, Middle Initial)

Mailing Address 1034 N. Washington Avenue

City Lansing State MI Zip Code 48906

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **611.52**

Date of Receipt **11 / 07 / 2012**

Transaction ID : SA11AI.279866

Amount of Each Receipt this Period **29.12**

B. ROBERT DAVIS
Full Name (Last, First, Middle Initial)

Mailing Address 1034 N. Washington Avenue

City Lansing State MI Zip Code 48906

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **640.64**

Date of Receipt **11 / 20 / 2012**

Transaction ID : SA11AI.279916

Amount of Each Receipt this Period **29.12**

C. TANYA DAVIS-PRYSOCK
Full Name (Last, First, Middle Initial)

Mailing Address 3451 Penfield Road

City Columbus State OH Zip Code 43227

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation SECRETARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **206.00**

Date of Receipt **10 / 19 / 2012**

Transaction ID : SA11AI.278360

Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional)..... **68.24**

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 177 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. TANYA DAVIS-PRYSOCK
Full Name (Last, First, Middle Initial)

Mailing Address 3451 Penfield Road

City Columbus State OH Zip Code 43227

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation SECRETARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278718

Amount of Each Receipt this Period 10.00

B. TANYA DAVIS-PRYSOCK
Full Name (Last, First, Middle Initial)

Mailing Address 3451 Penfield Road

City Columbus State OH Zip Code 43227

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation SECRETARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279076

Amount of Each Receipt this Period 10.00

C. DANIEL DAWSON
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276815

Amount of Each Receipt this Period 10.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.50

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 179 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. WAYNE DEAN		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277108
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="10.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="220.50"/>	

Full Name (Last, First, Middle Initial) B. WAYNE DEAN		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277692
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="10.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="231.00"/>	

Full Name (Last, First, Middle Initial) C. PRESTON DEBOER		Date of Receipt
Mailing Address 4320 NW Second Avenue		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/>
City Des Moines	State IA	Zip Code 50313
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.280070
Name of Employer AFSCME IA CN 61		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="20.84"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="229.24"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="41.84"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 180 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ALBERT J. DEBOO
Full Name (Last, First, Middle Initial)

Mailing Address 1204 Laura Lane

City Marion State IL Zip Code 62959

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

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation CHILD WELFARE TECH

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2012

Transaction ID : SA11AI.279404

Amount of Each Receipt this Period
30.00

B. EDGAR DEJESUS
Full Name (Last, First, Middle Initial)

Mailing Address 8 Ralph Street
First Floor

City Bergenfield State NJ Zip Code 07621-0000

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

Name of Employer AFSCME INT'L Occupation AREA ORGANIZING DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1030.80**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.276382

Amount of Each Receipt this Period
51.54

C. EDGAR DEJESUS
Full Name (Last, First, Middle Initial)

Mailing Address 8 Ralph Street
First Floor

City Bergenfield State NJ Zip Code 07621-0000

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

Name of Employer AFSCME INT'L Occupation AREA ORGANIZING DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1082.34**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : SA11AI.276577

Amount of Each Receipt this Period
51.54

SUBTOTAL of Receipts This Page (optional).....▶	133.08
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 181 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. LACHOND DELANEY		Date of Receipt
Mailing Address 1410 Bush Street Suite A		<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City	State	Zip Code
Baltimore	MD	21230
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.279958
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="44.88"/>
Name of Employer	Occupation	
AFSCME MD CN 67	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="471.24"/>	

Full Name (Last, First, Middle Initial) B. CHERYL DELL'AGLIO		Date of Receipt
Mailing Address 125 State Street		<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
City	State	Zip Code
Nicholson	PA	18446
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.279626
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="48.66"/>
Name of Employer	Occupation	
AFSCME PA CN 13	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="531.90"/>	

Full Name (Last, First, Middle Initial) C. JOSEPH DELOREY		Date of Receipt
Mailing Address 8 Beacon Street		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/>
City	State	Zip Code
Boston	MA	02108-0000
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.280009
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="41.66"/>
Name of Employer	Occupation	
AFSCME MA CN 93	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="458.26"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="135.20"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 182 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. MARCINIAK TAMMY DELP		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.276818
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="11.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="230.00"/>	

Full Name (Last, First, Middle Initial) B. MARCINIAK TAMMY DELP		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277110
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="11.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="241.50"/>	

Full Name (Last, First, Middle Initial) C. MARCINIAK TAMMY DELP		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277694
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="11.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="253.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="34.50"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 183 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MICHAEL A. DELUKE
Full Name (Last, First, Middle Initial)

Mailing Address 844 Manchester Avenue

City Kent State OH Zip Code 44240

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

Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **811.29**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.279805

Amount of Each Receipt this Period **62.12**

B. JAYSON C. DEMAGALL
Full Name (Last, First, Middle Initial)

Mailing Address 15628 Lakewood Hts Blvd.

City Lakewood State OH Zip Code 44107

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

Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt **10 / 24 / 2012**

Transaction ID : SA11AI.280163

Amount of Each Receipt this Period **20.00**

C. JAYSON C. DEMAGALL
Full Name (Last, First, Middle Initial)

Mailing Address 15628 Lakewood Hts Blvd.

City Lakewood State OH Zip Code 44107

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

Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt **11 / 06 / 2012**

Transaction ID : SA11AI.280218

Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional).....▶	102.12
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 184 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOHN C. DEMPSEY
Full Name (Last, First, Middle Initial)

Mailing Address 20235 Watermark Place

City Sterling State VA Zip Code 20165

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

Name of Employer AFSCME INT'L Occupation GENERAL COUNSEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1987.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276383

Amount of Each Receipt this Period
 95.34

B. JOHN C. DEMPSEY
Full Name (Last, First, Middle Initial)

Mailing Address 20235 Watermark Place

City Sterling State VA Zip Code 20165

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

Name of Employer AFSCME INT'L Occupation GENERAL COUNSEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2083.14

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : SA11AI.276578

Amount of Each Receipt this Period
 95.34

C. CONSTANCE DERR
Full Name (Last, First, Middle Initial)

Mailing Address 111 Ranchitos

City Corrales State NM Zip Code 87048

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

Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1113.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276384

Amount of Each Receipt this Period
 52.50

SUBTOTAL of Receipts This Page (optional).....▶	243.18
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 185 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CONSTANCE DERR
Full Name (Last, First, Middle Initial)
Mailing Address 111 Ranchitos
City Corrales State NM Zip Code 87048
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES DIRECTOR
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1165.50**

Date of Receipt **11 / 15 / 2012**
Transaction ID : SA11AI.276579
Amount of Each Receipt this Period **52.50**

B. LEIOMALAMA DESHA
Full Name (Last, First, Middle Initial)
Mailing Address 1717 Mott Smith Drive #1602
City Honolulu State HI Zip Code 96822
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **275.00**

Date of Receipt **11 / 02 / 2012**
Transaction ID : SA11AI.280405
Amount of Each Receipt this Period **25.00**

C. YOLANDA K. DEUTCHMAN
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 144
City Auburn State IL Zip Code 62615
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME IL CN 31/STATE OF IL Occupation SHILD SUPPORT SPECIALIST
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **218.40**

Date of Receipt **11 / 01 / 2012**
Transaction ID : SA11AI.279405
Amount of Each Receipt this Period **31.20**

SUBTOTAL of Receipts This Page (optional)..... **108.70**
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 186 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. GREG D. DEVEREUX
Full Name (Last, First, Middle Initial)

Mailing Address 3561 Kamilche Point Road

City Shelton	State WA	Zip Code 98584
-----------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28	Occupation EXECUTIVE DIRECTOR
-------------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1340.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		31		2012

Transaction ID : SA11AI.276317

Amount of Each Receipt this Period
14.00

B. ROBERT L. DEVLIN
Full Name (Last, First, Middle Initial)

Mailing Address 216 E. 46th Street

City Tacoma	State WA	Zip Code 98404
----------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		25		2012

Transaction ID : SA11AI.276819

Amount of Each Receipt this Period
10.50

C. ROBERT L. DEVLIN
Full Name (Last, First, Middle Initial)

Mailing Address 216 E. 46th Street

City Tacoma	State WA	Zip Code 98404
----------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.50

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		09		2012

Transaction ID : SA11AI.277111

Amount of Each Receipt this Period
10.50

SUBTOTAL of Receipts This Page (optional).....▶	35.00
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 187 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. ROBERT L. DEVLIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 216 E. 46th Street
 City Tacoma State WA Zip Code 98404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277695
 Amount of Each Receipt this Period 10.50

B. WILLIAM A. DEVORE
 Full Name (Last, First, Middle Initial)
 Mailing Address 4499 Stover Road
 City Ostrander State OH Zip Code 43061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.87

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279806
 Amount of Each Receipt this Period 64.18

C. JEFFREY DEXTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 501 Dennis Avenue
 City Bradley State IL Zip Code 60915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 677.40

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279531
 Amount of Each Receipt this Period 67.74

SUBTOTAL of Receipts This Page (optional).....▶ 142.42
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 188 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. SANDRA A. DHONDT		Date of Receipt M M / D D / Y Y Y Y Y 10 / 24 / 2012 Transaction ID : SA11AI.280164
Mailing Address 225 Mallard Road		Amount of Each Receipt this Period 9.62
City Perrysburg	State OH	Zip Code 43551
FEC ID number of contributing federal political committee. C	Name of Employer AFSCME OH LOC 4	Occupation FIELD SECRETARY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.02	

Full Name (Last, First, Middle Initial) B. SANDRA A. DHONDT		Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2012 Transaction ID : SA11AI.280219
Mailing Address 225 Mallard Road		Amount of Each Receipt this Period 9.62
City Perrysburg	State OH	Zip Code 43551
FEC ID number of contributing federal political committee. C	Name of Employer AFSCME OH LOC 4	Occupation FIELD SECRETARY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.64	

Full Name (Last, First, Middle Initial) C. JASON DIBBLE		Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2012 Transaction ID : SA11AI.278131
Mailing Address 303 12th Street SE		Amount of Each Receipt this Period 150.00
City Austin	State MN	Zip Code 55912-4229
FEC ID number of contributing federal political committee. C	Name of Employer AFSCME MN CN 5/STATE OF MN	Occupation STAFF REPRESENTATIVE
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1725.00	

SUBTOTAL of Receipts This Page (optional).....▶	169.24
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 189 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CRYSTAL M. DI DOMENICO
 Full Name (Last, First, Middle Initial)
 Mailing Address 6616 Comet Circle
 Apt. 314
 City Springfield State VA Zip Code 22150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation STAFF SPECIALIST II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 726.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276385
 Amount of Each Receipt this Period
 37.14

B. CRYSTAL M. DI DOMENICO
 Full Name (Last, First, Middle Initial)
 Mailing Address 6616 Comet Circle
 Apt. 314
 City Springfield State VA Zip Code 22150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation STAFF SPECIALIST II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 764.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : SA11AI.276580
 Amount of Each Receipt this Period
 37.14

C. JEAN M. DIEDERICH
 Full Name (Last, First, Middle Initial)
 Mailing Address 4741 Grand Ave. So.
 No. 3
 City Minneapolis State MN Zip Code 55419-5443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MN CN 5/HENNEPIN COUNTY Occupation CHILD SUPPORT OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2012
Transaction ID : SA11AI.280138
 Amount of Each Receipt this Period
 232.00

SUBTOTAL of Receipts This Page (optional).....▶	306.28
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 190 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JEAN M. DIEDERICH
 Full Name (Last, First, Middle Initial)
 Mailing Address 4741 Grand Ave. So.
 No. 3
 City Minneapolis State MN Zip Code 55419-5443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MN CN 5/HENNEPIN COUNTY Occupation CHILD SUPPORT OFFICER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1365.00**

Date of Receipt **10 / 31 / 2012**
Transaction ID : SA11AI.280140
 Amount of Each Receipt this Period **58.00**

B. JEAN M. DIEDERICH
 Full Name (Last, First, Middle Initial)
 Mailing Address 4741 Grand Ave. So.
 No. 3
 City Minneapolis State MN Zip Code 55419-5443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MN CN 5/HENNEPIN COUNTY Occupation CHILD SUPPORT OFFICER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1481.00**

Date of Receipt **11 / 15 / 2012**
Transaction ID : SA11AI.280141
 Amount of Each Receipt this Period **116.00**

C. RACHEL DIETZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 1332 Fulton St.
 City Harrisburg State PA Zip Code 17102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **555.99**

Date of Receipt **11 / 14 / 2012**
Transaction ID : SA11AI.279627
 Amount of Each Receipt this Period **48.66**

SUBTOTAL of Receipts This Page (optional)..... **222.66**
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 191 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JEANETTE DIFLORIO
 Full Name (Last, First, Middle Initial)
 Mailing Address 4296 Merriman Loop
 City State Zip Code
 Howell MI 48843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME MI CN 25 STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 636.09

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2012
Transaction ID : SA11AI.279867
 Amount of Each Receipt this Period
 30.29

B. JEANETTE DIFLORIO
 Full Name (Last, First, Middle Initial)
 Mailing Address 4296 Merriman Loop
 City State Zip Code
 Howell MI 48843
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME MI CN 25 STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 666.38

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2012
Transaction ID : SA11AI.279917
 Amount of Each Receipt this Period
 30.29

C. MICHAEL DILLION
 Full Name (Last, First, Middle Initial)
 Mailing Address 520 S Second Street
 Apt. 120
 City State Zip Code
 Springfield IL 62701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME IL CN 31 STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 435.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.279532
 Amount of Each Receipt this Period
 53.80

SUBTOTAL of Receipts This Page (optional)..... ▶ 114.38
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 192 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. GREGORY D. DILLOW
Full Name (Last, First, Middle Initial)
Mailing Address 475 Dillow Lane

City Anna	State IL	Zip Code 62906
--------------	-------------	-------------------

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

Name of Employer AFSCME IL CN 31/STATE OF IL	Occupation MENTAL HEALTH TECH I
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11AI.279407

Amount of Each Receipt this Period

80.00

B. SHERI A. DIMMERMAN
Full Name (Last, First, Middle Initial)
Mailing Address 1237 E. Glenwood Court

City Amelia	State OH	Zip Code 45102
----------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation TRAINING OFFICER
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.278363

Amount of Each Receipt this Period

10.00

C. SHERI A. DIMMERMAN
Full Name (Last, First, Middle Initial)
Mailing Address 1237 E. Glenwood Court

City Amelia	State OH	Zip Code 45102
----------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation TRAINING OFFICER
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.278721

Amount of Each Receipt this Period

10.00

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: (check only one)	PAGE 193 OF 846
	<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	<input 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

A. SHERI A. DIMMERMAN
Full Name (Last, First, Middle Initial)

Mailing Address 1237 E. Glenwood Court

City State Zip Code
Amelia OH 45102

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

Name of Employer Occupation
AFSCME OH LOC 11/STATE OF OH TRAINING OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
11 / 16 / 2012

Transaction ID : SA11AI.279079

Amount of Each Receipt this Period
10.00

B. STACIE DINEEN
Full Name (Last, First, Middle Initial)

Mailing Address 80490 28th Street

City State Zip Code
Lawton MI 49065

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

Name of Employer Occupation
AFSCME MI CN 25 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **279.50**

Date of Receipt
11 / 07 / 2012

Transaction ID : SA11AI.279868

Amount of Each Receipt this Period
10.50

C. STACIE DINEEN
Full Name (Last, First, Middle Initial)

Mailing Address 80490 28th Street

City State Zip Code
Lawton MI 49065

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

Name of Employer Occupation
AFSCME MI CN 25 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **290.00**

Date of Receipt
11 / 20 / 2012

Transaction ID : SA11AI.279918

Amount of Each Receipt this Period
10.50

SUBTOTAL of Receipts This Page (optional)..... **31.00**

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 194 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. JOHN A. DINICOLA
 Full Name (Last, First, Middle Initial)
 Mailing Address 320 2nd Street
 City Bergenline State NJ Zip Code 07087-0000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 677.40

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.279533
 Amount of Each Receipt this Period
 67.74

B. ERIKA S. DINKEL-SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 715
 City Menomonie State WI Zip Code 54751
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MN CN 5/CN14 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 479.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.280032
 Amount of Each Receipt this Period
 44.76

C. NORMAND P. DIONNE
 Full Name (Last, First, Middle Initial)
 Mailing Address 15-2692 Aweoweo Street
 City Pahoa State HI Zip Code 96778
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.280407
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 137.50
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 195 OF 846
	<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	<input 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

A. LISA DIVITTORE
Full Name (Last, First, Middle Initial)

Mailing Address 4031 Executive Park Drive

City Harrisburg State PA Zip Code 17111

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **641.86**

Date of Receipt **11 / 14 / 2012**

Transaction ID : SA11AI.279628

Amount of Each Receipt this Period **58.72**

B. JAMES W. DIXON
Full Name (Last, First, Middle Initial)

Mailing Address 26 homewood Court

City Springfield State IL Zip Code 62704

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

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation CASEWORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **11 / 01 / 2012**

Transaction ID : SA11AI.279408

Amount of Each Receipt this Period **30.00**

C. DONALD E. DOBBS
Full Name (Last, First, Middle Initial)

Mailing Address 4249 Cleveland Avenue

City Dayton State OH Zip Code 45410

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 19 / 2012**

Transaction ID : SA11AI.278364

Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional)..... **98.72**

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 196 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DONALD E. DOBBS
Full Name (Last, First, Middle Initial)

Mailing Address 4249 Cleveland Avenue

City Dayton State OH Zip Code 45410

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278722

Amount of Each Receipt this Period 10.00

B. DONALD E. DOBBS
Full Name (Last, First, Middle Initial)

Mailing Address 4249 Cleveland Avenue

City Dayton State OH Zip Code 45410

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279080

Amount of Each Receipt this Period 10.00

C. KEVIN DOEING
Full Name (Last, First, Middle Initial)

Mailing Address 316 Quittie Park Dr.

City Annville State PA Zip Code 17003

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 942.60

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.279629

Amount of Each Receipt this Period 82.50

SUBTOTAL of Receipts This Page (optional).....▶ 102.50

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 197 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MICHAEL J. DOLNEY JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 105 Pacific Avenue
 P.O. Box 71
 City Randall State MN Zip Code 56475
 Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.278132
 Amount of Each Receipt this Period 40.00

B. RANDY J. DOMINIC
 Full Name (Last, First, Middle Initial)
 Mailing Address 821 Painter Street
 City Streator State IL Zip Code 61364
 Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 583.20

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279534
 Amount of Each Receipt this Period 58.32

C. PETER DOMPIERE
 Full Name (Last, First, Middle Initial)
 Mailing Address 710 Chippewa Street
 City Marquette State MI Zip Code 49855
 Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt 11 / 07 / 2012
Transaction ID : SA11AI.279869
 Amount of Each Receipt this Period 21.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 119.32
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 198 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. PETER DOMPIERE
Full Name (Last, First, Middle Initial)

Mailing Address 710 Chippewa Street

City Marquette State MI Zip Code 49855

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt
11 / 20 / 2012
Transaction ID : SA11AI.279919

Amount of Each Receipt this Period
21.00

B. LORI DONALDSON
Full Name (Last, First, Middle Initial)

Mailing Address 419 1/2 Grant Street

City Franklin State PA Zip Code 16323

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 531.90

Date of Receipt
11 / 14 / 2012
Transaction ID : SA11AI.279630

Amount of Each Receipt this Period
48.66

C. DANNY DONOHUE
Full Name (Last, First, Middle Initial)

Mailing Address 10 Longview Drive

City Clifton Park State NY Zip Code 12061

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

Name of Employer AFSCME NY LOC 1000 Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 536.57

Date of Receipt
10 / 31 / 2012
Transaction ID : SA11AI.276318

Amount of Each Receipt this Period
14.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 83.66

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 199 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CYNTHIA DONOVAN
Full Name (Last, First, Middle Initial)
Mailing Address 1212 Jefferson Street SE

City Olympia	State WA	Zip Code 98501
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2012

Transaction ID : SA11AI.276820

Amount of Each Receipt this Period
12.50

B. CYNTHIA DONOVAN
Full Name (Last, First, Middle Initial)
Mailing Address 1212 Jefferson Street SE

City Olympia	State WA	Zip Code 98501
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
262.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11AI.277112

Amount of Each Receipt this Period
12.50

C. CYNTHIA DONOVAN
Full Name (Last, First, Middle Initial)
Mailing Address 1212 Jefferson Street SE

City Olympia	State WA	Zip Code 98501
-----------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.277696

Amount of Each Receipt this Period
12.50

SUBTOTAL of Receipts This Page (optional).....▶	37.50
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 200 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BRYAN DOSH
Full Name (Last, First, Middle Initial)

Mailing Address 1711 Norwood

City Brainerd State MN Zip Code 56401-3846

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

Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.278133

Amount of Each Receipt this Period 24.00

B. KIM C. DOSS-PATTERSON
Full Name (Last, First, Middle Initial)

Mailing Address 10734 S. Langley Avenue

City Chicago State IL Zip Code 60628

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

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation CASEWORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 684.00

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279409

Amount of Each Receipt this Period 40.00

C. CAROL A. DOTLICH
Full Name (Last, First, Middle Initial)

Mailing Address 8312 198th Street E

City Spanaway State WA Zip Code 98387

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

Name of Employer AFSCME WA CN 28 Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 651.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276319

Amount of Each Receipt this Period 14.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 78.00

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 201 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. THERESA A. DOTSON
Full Name (Last, First, Middle Initial)

Mailing Address 2960 Janet Circle
Apt. A

City Columbus State OH Zip Code 43209

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation CUSTODIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **327.50**

Date of Receipt
10 / 29 / 2012

Transaction ID : SA11AI.280260

Amount of Each Receipt this Period
12.50

B. THERESA A. DOTSON
Full Name (Last, First, Middle Initial)

Mailing Address 2960 Janet Circle
Apt. A

City Columbus State OH Zip Code 43209

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation CUSTODIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt
11 / 13 / 2012

Transaction ID : SA11AI.280290

Amount of Each Receipt this Period
12.50

C. THERESA A. DOTSON
Full Name (Last, First, Middle Initial)

Mailing Address 2960 Janet Circle
Apt. A

City Columbus State OH Zip Code 43209

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation CUSTODIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **352.50**

Date of Receipt
11 / 26 / 2012

Transaction ID : SA11AI.280320

Amount of Each Receipt this Period
12.50

SUBTOTAL of Receipts This Page (optional)..... **37.50**

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 202 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DANNY DOUGLAS
Full Name (Last, First, Middle Initial)

Mailing Address 1723 Linn Hipsher Road

City Marion	State OH	Zip Code 43302
----------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2012

Transaction ID : SA11AI.278366

Amount of Each Receipt this Period
4.00

B. DANNY DOUGLAS
Full Name (Last, First, Middle Initial)

Mailing Address 1723 Linn Hipsher Road

City Marion	State OH	Zip Code 43302
----------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2012

Transaction ID : SA11AI.278724

Amount of Each Receipt this Period
4.00

C. DANNY DOUGLAS
Full Name (Last, First, Middle Initial)

Mailing Address 1723 Linn Hipsher Road

City Marion	State OH	Zip Code 43302
----------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
212.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2012

Transaction ID : SA11AI.279082

Amount of Each Receipt this Period
4.00

SUBTOTAL of Receipts This Page (optional).....▶	12.00
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 203 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KAY DOUGLAS
Full Name (Last, First, Middle Initial)

Mailing Address 913 23rd Avenue E

City Seattle State WA Zip Code 98112

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

Name of Employer AFSCME WA CN 28/UNIV OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277914

Amount of Each Receipt this Period 200.00

B. RODNEY DOUGLAS
Full Name (Last, First, Middle Initial)

Mailing Address 2753 W Warren Boulevard

City Chicago State IL Zip Code 60612

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

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 595.06

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279535

Amount of Each Receipt this Period 69.76

C. MARCIA M. DOUGLAS-BUMGARNER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 232

City Lyman State WA Zip Code 98263

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 247.50

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276822

Amount of Each Receipt this Period 12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 102.26

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 204 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MARCIA M. DOUGLAS-BUMGARNER
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 232
 City Lyman State WA Zip Code 98263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **260.00**

Date of Receipt **11 / 09 / 2012**
Transaction ID : SA11AI.277114
 Amount of Each Receipt this Period **12.50**

B. MARCIA M. DOUGLAS-BUMGARNER
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 232
 City Lyman State WA Zip Code 98263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **272.50**

Date of Receipt **11 / 26 / 2012**
Transaction ID : SA11AI.277698
 Amount of Each Receipt this Period **12.50**

C. DAVID DOVER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6930 S. Campbell
 City Chicago State IL Zip Code 60629
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **564.18**

Date of Receipt **11 / 01 / 2012**
Transaction ID : SA11AI.279536
 Amount of Each Receipt this Period **58.32**

SUBTOTAL of Receipts This Page (optional)..... **83.32**
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 205 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JOZETTE D. DOWDELL		Date of Receipt
Mailing Address 3587 Rosebud Park Drive		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Snellville	GA	30039
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.276581
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
AFSCME INT'L	ORGANIZER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. THOMAS C. DRABICK JR.		Date of Receipt
Mailing Address 982 Fortkort Drive		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City	State	Zip Code
Reynoldsburg	OH	43068
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.280165
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="40.00"/>
Name of Employer	Occupation	
AFSCME OH LOC 4	DIRECTOR, LEGAL SERVICES	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="880.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. THOMAS C. DRABICK JR.		Date of Receipt
Mailing Address 982 Fortkort Drive		<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City	State	Zip Code
Reynoldsburg	OH	43068
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.280220
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="40.00"/>
Name of Employer	Occupation	
AFSCME OH LOC 4	DIRECTOR, LEGAL SERVICES	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="920.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="90.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 206 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LAURA E. DRAKE
Full Name (Last, First, Middle Initial)

Mailing Address 238 S. Oak Park Avenue

City Oak Park State IL Zip Code 60302

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

Name of Employer AFSCME IL CN 31 Occupation SENIOR ORGANIZER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **677.40**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2012

Transaction ID : SA11AI.279537

Amount of Each Receipt this Period
67.74

B. SARAH A. DRECKSEL
Full Name (Last, First, Middle Initial)

Mailing Address 1231 199th Street E.

City Spanaway State WA Zip Code 98387

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2012

Transaction ID : SA11AI.277116

Amount of Each Receipt this Period
10.00

C. SARAH A. DRECKSEL
Full Name (Last, First, Middle Initial)

Mailing Address 1231 199th Street E.

City Spanaway State WA Zip Code 98387

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.277700

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	87.74
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 207 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BRYAN DULAS
Full Name (Last, First, Middle Initial)

Mailing Address 202 E 10th Street

City Winona	State MN	Zip Code 55987
----------------	-------------	-------------------

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

Name of Employer AFSCME MN CN 5/STATE OF MN	Occupation STAFF REPRESENTATIVE
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.278135

Amount of Each Receipt this Period

97.00	97.00	97.00	97.00	97.00
-------	-------	-------	-------	-------

230.00

B. PAMELA F. DUNCAN
Full Name (Last, First, Middle Initial)

Mailing Address 7282 Aplin Drive

City Reynoldsburg	State OH	Zip Code 43068
----------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 4	Occupation EXECUTIVE ASSISTANT
-------------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **848.50**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2012

Transaction ID : SA11AI.280166

Amount of Each Receipt this Period

38.50	38.50	38.50	38.50	38.50
-------	-------	-------	-------	-------

38.50

C. PAMELA F. DUNCAN
Full Name (Last, First, Middle Initial)

Mailing Address 7282 Aplin Drive

City Reynoldsburg	State OH	Zip Code 43068
----------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 4	Occupation EXECUTIVE ASSISTANT
-------------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **887.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2012

Transaction ID : SA11AI.280221

Amount of Each Receipt this Period

38.50	38.50	38.50	38.50	38.50
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38.50

SUBTOTAL of Receipts This Page (optional).....▶	97.00
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 208 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JAMES W DURKIN
Full Name (Last, First, Middle Initial)

Mailing Address 8 Beacon Street

City Boston State MA Zip Code 02108-0000

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

Name of Employer AFSCME MA CN 93 Occupation COMMUNICATIONS SPECIALIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 07 / 2012
Transaction ID : SA11AI.280010

Amount of Each Receipt this Period 50.00

B. JEFFERY A. DUVENDACK
Full Name (Last, First, Middle Initial)

Mailing Address 2716 Randall Drive

City Oregon State OH Zip Code 43616

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation MOTOR FLEET COORDINATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278368

Amount of Each Receipt this Period 10.00

C. JEFFERY A. DUVENDACK
Full Name (Last, First, Middle Initial)

Mailing Address 2716 Randall Drive

City Oregon State OH Zip Code 43616

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation MOTOR FLEET COORDINATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278726

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 209 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JEFFERY A. DUVENDACK
 Full Name (Last, First, Middle Initial)
 Mailing Address 2716 Randall Drive
 City Oregon State OH Zip Code 43616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation MOTOR FLEET COORDINATOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **230.00**

Date of Receipt **11 / 16 / 2012**
Transaction ID : SA11AI.279084
 Amount of Each Receipt this Period **10.00**

B. ETHEL M DYER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2205 Medina Avenue
 City Columbus State OH Zip Code 43211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation CUSTODIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **327.50**

Date of Receipt **10 / 29 / 2012**
Transaction ID : SA11AI.280261
 Amount of Each Receipt this Period **12.50**

C. ETHEL M DYER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2205 Medina Avenue
 City Columbus State OH Zip Code 43211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation CUSTODIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **340.00**

Date of Receipt **11 / 13 / 2012**
Transaction ID : SA11AI.280291
 Amount of Each Receipt this Period **12.50**

SUBTOTAL of Receipts This Page (optional)..... **35.00**
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 210 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ETHEL M DYER
Full Name (Last, First, Middle Initial)

Mailing Address 2205 Medina Avenue

City Columbus State OH Zip Code 43211

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation CUSTODIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 352.50

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.280321

Amount of Each Receipt this Period 12.50

B. JOHN M. EAGLESPRIT
Full Name (Last, First, Middle Initial)

Mailing Address 619 W Gambier Street

City Mount Vernon State OH Zip Code 43050

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation CUSTODIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 29 / 2012
Transaction ID : SA11AI.280262

Amount of Each Receipt this Period 25.00

C. JOHN M. EAGLESPRIT
Full Name (Last, First, Middle Initial)

Mailing Address 619 W Gambier Street

City Mount Vernon State OH Zip Code 43050

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation CUSTODIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 13 / 2012
Transaction ID : SA11AI.280292

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 62.50

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 211 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. JOHN M. EAGLESPRIT
 Full Name (Last, First, Middle Initial)
 Mailing Address 619 W Gambier Street
 City State Zip Code
 Mount Vernon OH 43050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 4/COLUMBUS CITY CUSTODIAN
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.280322
 Amount of Each Receipt this Period
 25.00

B. ANN N. EBESUNO
 Full Name (Last, First, Middle Initial)
 Mailing Address 285 Kuhilani Street
 City State Zip Code
 Hilo HI 96720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME HI LOC 152 STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 291.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.280408
 Amount of Each Receipt this Period
 21.00

C. LAURIE ECKELS
 Full Name (Last, First, Middle Initial)
 Mailing Address 42 Profio Road
 City State Zip Code
 McDonald PA 15057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME PA CN 13 STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 837.72

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.279631
 Amount of Each Receipt this Period
 76.64

SUBTOTAL of Receipts This Page (optional)..... ▶ 122.64
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 212 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. THOMAS EDSTROM
Full Name (Last, First, Middle Initial)

Mailing Address 4106 N. Sacramento

City Chicago	State IL	Zip Code 60618
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31	Occupation LEGAL COUNSEL
-------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
792.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11AI.279538

Amount of Each Receipt this Period
79.24

B. PATRICIA A. EDWARDS
Full Name (Last, First, Middle Initial)

Mailing Address 720 Mox Chehalis Road

City McCleary	State WA	Zip Code 98557
------------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2012

Transaction ID : SA11AI.276825

Amount of Each Receipt this Period
21.00

C. PATRICIA A. EDWARDS
Full Name (Last, First, Middle Initial)

Mailing Address 720 Mox Chehalis Road

City McCleary	State WA	Zip Code 98557
------------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
441.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11AI.277117

Amount of Each Receipt this Period
21.00

SUBTOTAL of Receipts This Page (optional).....▶	121.24
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 213 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. PATRICIA A. EDWARDS		Date of Receipt
Mailing Address 720 Mox Chehalis Road		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City State Zip Code McCleary WA 98557		Transaction ID : SA11AI.277701
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="21.00"/>
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="462.00"/>	

Full Name (Last, First, Middle Initial) B. JAMES C. EGGERS		Date of Receipt
Mailing Address 563 Harland Drive		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City State Zip Code Columbus OH 43207		Transaction ID : SA11AI.278371
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="16.00"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation EMPLOYMENT SERVICES REP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="276.00"/>	

Full Name (Last, First, Middle Initial) C. JAMES C. EGGERS		Date of Receipt
Mailing Address 563 Harland Drive		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City State Zip Code Columbus OH 43207		Transaction ID : SA11AI.278729
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="16.00"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation EMPLOYMENT SERVICES REP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="292.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="53.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 214 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JAMES C. EGGERS
Full Name (Last, First, Middle Initial)

Mailing Address 563 Harland Drive

City Columbus State OH Zip Code 43207

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation EMPLOYMENT SERVICES REP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 308.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279087

Amount of Each Receipt this Period 16.00

B. RICKIE EILANDER
Full Name (Last, First, Middle Initial)

Mailing Address 4320 NW Second Avenue

City Des Moines State IA Zip Code 50313

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

Name of Employer AFSCME IA CN 61 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 07 / 2012
Transaction ID : SA11AI.280071

Amount of Each Receipt this Period 40.00

C. GORDON K. ELLEY
Full Name (Last, First, Middle Initial)

Mailing Address 31517 36th Avenue S.

City Auburn State WA Zip Code 98001

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276826

Amount of Each Receipt this Period 10.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 66.50

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 215 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. GORDON K. ELLEY
Full Name (Last, First, Middle Initial)

Mailing Address 31517 36th Avenue S.

City Auburn	State WA	Zip Code 98001
----------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.50**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11Al.277118

Amount of Each Receipt this Period

10.50

B. GORDON K. ELLEY
Full Name (Last, First, Middle Initial)

Mailing Address 31517 36th Avenue S.

City Auburn	State WA	Zip Code 98001
----------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **231.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11Al.277702

Amount of Each Receipt this Period

10.50

C. HELEN H. ELLIOTT
Full Name (Last, First, Middle Initial)

Mailing Address 1408 Wyeth Street

City Harrisburg	State PA	Zip Code 17102
--------------------	-------------	-------------------

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

Name of Employer AFSCME PA CN 13/STATE OF PA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11Al.279720

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional).....▶	41.00
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 216 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DEVON F. ELLIS
Full Name (Last, First, Middle Initial)

Mailing Address 1379 Hudson Street

City Dupont State WA Zip Code 98327

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **543.00**

Date of Receipt **10 / 25 / 2012**

Transaction ID : SA11AI.276828

Amount of Each Receipt this Period **26.00**

B. LEONORA ELLIS
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 25 / 2012**

Transaction ID : SA11AI.276829

Amount of Each Receipt this Period **10.50**

C. LEONORA ELLIS
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.50**

Date of Receipt **11 / 09 / 2012**

Transaction ID : SA11AI.277120

Amount of Each Receipt this Period **10.50**

SUBTOTAL of Receipts This Page (optional)..... **47.00**

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 217 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LEONORA ELLIS
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277704

Amount of Each Receipt this Period 10.50

B. LORI R. ELMORE
Full Name (Last, First, Middle Initial)

Mailing Address 1763 North Cassady Avenue

City Columbus State OH Zip Code 43219

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

Name of Employer AFSCME OH LOC 11 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 582.00

Date of Receipt 10 / 24 / 2012
Transaction ID : SA11AI.280103

Amount of Each Receipt this Period 62.00

C. MARTHA EMMERTON
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276830

Amount of Each Receipt this Period 10.50

SUBTOTAL of Receipts This Page (optional).....	83.00
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 219 OF 846
	<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	<input 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

A. GILBERT ESCUDERO
Full Name (Last, First, Middle Initial)

Mailing Address 14099 SW 17th Terrace

City Miami State FL Zip Code 33175

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

Name of Employer AFSCME INT'L/STATE STREET Occupation RETIREE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **349.47**

Date of Receipt **11 / 02 / 2012**
Transaction ID : **SA11AI.276736**

Amount of Each Receipt this Period **31.77**

B. FLORENCE S. ESTES
Full Name (Last, First, Middle Initial)

Mailing Address 4328 N. Hermitage Avenue #1-W

City Chicago State IL Zip Code 60613

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

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **677.40**

Date of Receipt **11 / 01 / 2012**
Transaction ID : **SA11AI.279539**

Amount of Each Receipt this Period **67.74**

C. GEORGE ESTRIGHT
Full Name (Last, First, Middle Initial)

Mailing Address 4031 Executive Park Drive

City Harrisburg State PA Zip Code 17111

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **738.21**

Date of Receipt **11 / 14 / 2012**
Transaction ID : **SA11AI.279632**

Amount of Each Receipt this Period **62.56**

SUBTOTAL of Receipts This Page (optional)..... **162.07**

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 220 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. SUSAN ESTY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2257 Park Hill Avenue
 City Baltimore State MD Zip Code 21211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1018.50

Date of Receipt 11 / 05 / 2012
Transaction ID : SA11AI.279978
 Amount of Each Receipt this Period 87.50

B. MICHELLE R. EVANS
 Full Name (Last, First, Middle Initial)
 Mailing Address 10201 Galena Pointe Drive
 City Galena State OH Zip Code 43021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH CN 8 Occupation STAFF ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 669.23

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279807
 Amount of Each Receipt this Period 67.02

C. SUSAN E. EVERETTS
 Full Name (Last, First, Middle Initial)
 Mailing Address 2704 Bella Via Avenue
 City Columbus State OH Zip Code 43231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4 Occupation ACCOUNT CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2012
Transaction ID : SA11AI.280167
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional).....▶ 164.52
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 221 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. SUSAN E. EVERETTS
Full Name (Last, First, Middle Initial)

Mailing Address 2704 Bella Via Avenue

City Columbus State OH Zip Code 43231

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

Name of Employer AFSCME OH LOC 4 Occupation ACCOUNT CLERK

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 06 / 2012
Transaction ID : SA11AI.280222

Amount of Each Receipt this Period 10.00

B. JOHN B. EWALDT
Full Name (Last, First, Middle Initial)

Mailing Address 6927 10th Street N

City Oakdale State MN Zip Code 55128

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

Name of Employer AFSCME MN CN 5/RAMSEY COUNTY Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.280034

Amount of Each Receipt this Period 20.00

C. FAITH E. FADDIS
Full Name (Last, First, Middle Initial)

Mailing Address 1400 Tandem Avenue NE

City Salem State OR Zip Code 97301

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

Name of Employer AFSCME OR CN 75/STATE OF OR Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.277958

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00

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 222 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. YOUSEF FAHOUM
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
10 / 25 / 2012
Transaction ID : SA11AI.276833

Amount of Each Receipt this Period
13.50

B. YOUSEF FAHOUM
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
283.50

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277124

Amount of Each Receipt this Period
13.50

C. YOUSEF FAHOUM
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
297.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277708

Amount of Each Receipt this Period
13.50

SUBTOTAL of Receipts This Page (optional).....▶	40.50
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 223 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. SHELIA G. FALCONER
 Full Name (Last, First, Middle Initial)
 Mailing Address 163 N. Macarthur
 City Springfield State IL Zip Code 62702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31/STATE OF IL Occupation DATA PROCESSING TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279411
 Amount of Each Receipt this Period 30.00

B. MARY FALK
 Full Name (Last, First, Middle Initial)
 Mailing Address 11236 Georgia Avenue North
 City North Champlin State MN Zip Code 55316-3800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.278138
 Amount of Each Receipt this Period 60.00

C. JASMINE FALLS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3412 Knipp Drive Suite 102
 City Jefferson City State MO Zip Code 65109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MO CN 72 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 328.51

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.280348
 Amount of Each Receipt this Period 17.29

SUBTOTAL of Receipts This Page (optional).....▶ 107.29
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 224 OF 846
	<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	<input 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

Full Name (Last, First, Middle Initial) A. JASMINE FALLS		Date of Receipt
Mailing Address 3412 Knipp Drive Suite 102		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.280356
Jefferson City	MO	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="17.29"/>
Name of Employer	Occupation	
AFSCME MO CN 72	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="345.80"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. JASMINE FALLS		Date of Receipt
Mailing Address 3412 Knipp Drive Suite 102		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.280364
Jefferson City	MO	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="17.29"/>
Name of Employer	Occupation	
AFSCME MO CN 72	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="363.09"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. ROBERT FANTAUZZO		Date of Receipt
Mailing Address 6805 Oak Creek Drive		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.280168
Columbus	OH	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="23.08"/>
Name of Employer	Occupation	
AFSCME OH LOC 4	FIELD REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="323.12"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="57.66"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 225 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. ROBERT FANTAUZZO		Date of Receipt
Mailing Address 6805 Oak Creek Drive		<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City	State	Zip Code
Columbus	OH	43229
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.280223
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="23.08"/>
Name of Employer	Occupation	
AFSCME OH LOC 4	FIELD REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="346.20"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. STEPHAN FANTAUZZO		Date of Receipt
Mailing Address 3840 N. Delaware Street		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Indianapolis	IN	46205
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.276387
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="107.71"/>
Name of Employer	Occupation	
AFSCME INT'L	CHIEF OF STAFF TO THE PRESIDENT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1887.27"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. STEPHAN FANTAUZZO		Date of Receipt
Mailing Address 3840 N. Delaware Street		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Indianapolis	IN	46205
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.276582
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="107.71"/>
Name of Employer	Occupation	
AFSCME INT'L	CHIEF OF STAFF TO THE PRESIDENT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1994.98"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="238.50"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 226 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JULIE A. FARRAR
Full Name (Last, First, Middle Initial)

Mailing Address 426 Dewey Street

City Sandusky State OH Zip Code 44870

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278377

Amount of Each Receipt this Period
 10.00

B. JULIE A. FARRAR
Full Name (Last, First, Middle Initial)

Mailing Address 426 Dewey Street

City Sandusky State OH Zip Code 44870

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278735

Amount of Each Receipt this Period
 10.00

C. JULIE A. FARRAR
Full Name (Last, First, Middle Initial)

Mailing Address 426 Dewey Street

City Sandusky State OH Zip Code 44870

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279093

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00

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 227 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. MICHAEL J. FEDOR		Date of Receipt
Mailing Address 2340 Dewey Lane		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Enola	PA	17025
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276389
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME PA CN 13	FIELD EDUCATION COORDINATOR II	<input type="text" value="30.76"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="581.88"/>	

Full Name (Last, First, Middle Initial) B. MICHAEL J. FEDOR		Date of Receipt
Mailing Address 2340 Dewey Lane		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Enola	PA	17025
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276584
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME PA CN 13	FIELD EDUCATION COORDINATOR II	<input type="text" value="25.17"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="607.05"/>	

Full Name (Last, First, Middle Initial) C. PAULETTE A. FELD		Date of Receipt
Mailing Address 416 W 5th Avenue		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2012"/>
City	State	Zip Code
Oshkosh	WI	54902
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.277543
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME WI CN 24/STATE OF WI	IS NETWORK SUP TECH I	<input type="text" value="20.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="499.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.93"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 228 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. PAULETTE A. FELD			Date of Receipt
Mailing Address 416 W 5th Avenue			<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.277544
Oshkosh	WI	54902	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
AFSCME WI CN 24/STATE OF WI	IS NETWORK SUP TECH I		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="519.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. PAULETTE A. FELD			Date of Receipt
Mailing Address 416 W 5th Avenue			<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.277545
Oshkosh	WI	54902	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
AFSCME WI CN 24/STATE OF WI	IS NETWORK SUP TECH I		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="539.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. RICHARD M. FELLER			Date of Receipt
Mailing Address 5480 Wisconsin Avenue Apt. 1017			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276390
Chevy Chase	MD	20815	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="56.94"/>
Name of Employer	Occupation		
AFSCME INT'L	ASSOCIATE DIRECTOR, POLITICAL ACTION		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1138.80"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="96.94"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

**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 229 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. RICHARD M. FELLER
Full Name (Last, First, Middle Initial)

Mailing Address 5480 Wisconsin Avenue
Apt. 1017

City Chevy Chase State MD Zip Code 20815

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

Name of Employer AFSCME INT'L Occupation ASSOCIATE DIRECTOR, POLITICAL ACTION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1195.74

Date of Receipt
11 / 15 / 2012
Transaction ID : SA11AI.276585

Amount of Each Receipt this Period
56.94

B. ANGELA FERRITTO
Full Name (Last, First, Middle Initial)

Mailing Address 1053 Newton Avenue

City Erie State PA Zip Code 16511

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
472.68

Date of Receipt
11 / 14 / 2012
Transaction ID : SA11AI.279634

Amount of Each Receipt this Period
38.18

C. DERRICK E FIELDS
Full Name (Last, First, Middle Initial)

Mailing Address 703 Fairwood Avenue

City Columbus State OH Zip Code 43205

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation CUSTODIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
287.50

Date of Receipt
10 / 29 / 2012
Transaction ID : SA11AI.280263

Amount of Each Receipt this Period
12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 107.62

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 230 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DERRICK E FIELDS
Full Name (Last, First, Middle Initial)

Mailing Address 703 Fairwood Avenue

City Columbus	State OH	Zip Code 43205
------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation CUSTODIAN
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	13	/	2012

Transaction ID : SA11AI.280293

Amount of Each Receipt this Period
12.50

B. DERRICK E FIELDS
Full Name (Last, First, Middle Initial)

Mailing Address 703 Fairwood Avenue

City Columbus	State OH	Zip Code 43205
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation CUSTODIAN
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312.50

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.280323

Amount of Each Receipt this Period
12.50

C. JOHN J. FILAK Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 6160 Clingan Road

City Poland	State OH	Zip Code 44514
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH CN 8	Occupation STAFF REPRESENTATIVE
------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
867.53

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.279808

Amount of Each Receipt this Period
87.32

SUBTOTAL of Receipts This Page (optional).....▶	112.32
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 231 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)
A. DAVID FILLMAN

Mailing Address 4031 Exective Park Drive

City	State	Zip Code
Harrisburg	PA	17111

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

Name of Employer	Occupation
AFSCME PA CN 13	EXECUTIVE DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1637.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276320

Amount of Each Receipt this Period
14.00

Full Name (Last, First, Middle Initial)
B. DAVID FILLMAN

Mailing Address 4031 Exective Park Drive

City	State	Zip Code
Harrisburg	PA	17111

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

Name of Employer	Occupation
AFSCME PA CN 13	EXECUTIVE DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1780.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2012

Transaction ID : SA11AI.279635

Amount of Each Receipt this Period
143.60

Full Name (Last, First, Middle Initial)
C. ELISABETH F. FINCHER-HUYCK

Mailing Address 8705 NW Thicket Lane

City	State	Zip Code
Terrebonne	OR	97760

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

Name of Employer	Occupation
AFSCME OR CN 75/STATE OF OR	WATER METER TECHNICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.277960

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	182.60
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 232 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. NANCY J. FINNERTY
Full Name (Last, First, Middle Initial)

Mailing Address 441 Windet Ridge Road

City Yorkville State IL Zip Code 60560

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

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation CHILD WELFARE TECH

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 219.45

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279413

Amount of Each Receipt this Period 31.35

B. DIANE FIRKUS
Full Name (Last, First, Middle Initial)

Mailing Address 44935 Deerfield Road

City Sturgeon Lake State MN Zip Code 55783

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

Name of Employer AFSCME MN CN 5/CN14 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 572.00

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.280035

Amount of Each Receipt this Period 52.00

C. GERALD FIRKUS
Full Name (Last, First, Middle Initial)

Mailing Address 44935 Deerfield Road

City Sturgeon Lake State MN Zip Code 55783-3616

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

Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 422.51

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.278140

Amount of Each Receipt this Period 36.74

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.09

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 233 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MICHAEL FISH
Full Name (Last, First, Middle Initial)

Mailing Address 429 20th Street

City Cloquet State MN Zip Code 55720

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

Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.278142

Amount of Each Receipt this Period **30.00**

B. TODD R. FISHER
Full Name (Last, First, Middle Initial)

Mailing Address 219 N. Willow Street

City Kent State OH Zip Code 44240

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation ENVIRONMENTAL SPECIALIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 19 / 2012**

Transaction ID : SA11AI.278379

Amount of Each Receipt this Period **10.00**

C. TODD R. FISHER
Full Name (Last, First, Middle Initial)

Mailing Address 219 N. Willow Street

City Kent State OH Zip Code 44240

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation ENVIRONMENTAL SPECIALIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 02 / 2012**

Transaction ID : SA11AI.278737

Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional)..... **50.00**

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 234 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. TODD R. FISHER
Full Name (Last, First, Middle Initial)

Mailing Address 219 N. Willow Street

City Kent State OH Zip Code 44240

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation ENVIRONMENTAL SPECIALIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279095

Amount of Each Receipt this Period 100.00

B. CHRISTOPHER C. FLEMING
Full Name (Last, First, Middle Initial)

Mailing Address 2351 Huntington Station Court

City Alexandria State VA Zip Code 22303

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

Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR MEDIA OUTREACH

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 852.76

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276391

Amount of Each Receipt this Period 43.45

C. CHRISTOPHER C. FLEMING
Full Name (Last, First, Middle Initial)

Mailing Address 2351 Huntington Station Court

City Alexandria State VA Zip Code 22303

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

Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR MEDIA OUTREACH

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 896.21

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276586

Amount of Each Receipt this Period 43.45

SUBTOTAL of Receipts This Page (optional).....▶	96.90
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 235 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. RICHARD A. FLEMING
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 359

City Kapowsin State WA Zip Code 98344

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2012

Transaction ID : SA11AI.276834

Amount of Each Receipt this Period
10.50

B. RICHARD A. FLEMING
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 359

City Kapowsin State WA Zip Code 98344

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2012

Transaction ID : SA11AI.277125

Amount of Each Receipt this Period
10.50

C. RICHARD A. FLEMING
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 359

City Kapowsin State WA Zip Code 98344

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **231.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.277709

Amount of Each Receipt this Period
10.50

SUBTOTAL of Receipts This Page (optional)..... ▶ **31.50**

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 236 OF 846
	<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

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

A. PARENTHIA A. FLONNOY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4768 Derbyshire Drive
 City North Randall State OH Zip Code 44128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation WKRS COMPENSATION SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278381
 Amount of Each Receipt this Period
 10.00

B. PARENTHIA A. FLONNOY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4768 Derbyshire Drive
 City North Randall State OH Zip Code 44128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation WKRS COMPENSATION SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278739
 Amount of Each Receipt this Period
 10.00

C. PARENTHIA A. FLONNOY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4768 Derbyshire Drive
 City North Randall State OH Zip Code 44128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation WKRS COMPENSATION SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279097
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 237 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. LINDA M. FLOYD
 Full Name (Last, First, Middle Initial)
 Mailing Address 7341 Emerald Tree Drive
 City State Zip Code
 Canal Winchester OH 41220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 4/COLUMBUS CITY BUS DRIVER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 359.49

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2012
Transaction ID : SA11AI.280264
 Amount of Each Receipt this Period
 15.63

B. LINDA M. FLOYD
 Full Name (Last, First, Middle Initial)
 Mailing Address 7341 Emerald Tree Drive
 City State Zip Code
 Canal Winchester OH 41220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 4/COLUMBUS CITY BUS DRIVER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 375.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2012
Transaction ID : SA11AI.280294
 Amount of Each Receipt this Period
 15.63

C. LINDA M. FLOYD
 Full Name (Last, First, Middle Initial)
 Mailing Address 7341 Emerald Tree Drive
 City State Zip Code
 Canal Winchester OH 41220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 4/COLUMBUS CITY BUS DRIVER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 390.75

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.280324
 Amount of Each Receipt this Period
 15.63

SUBTOTAL of Receipts This Page (optional)..... ▶ 46.89
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 238 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LARRY FLUE
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
10 / 25 / 2012
Transaction ID : SA11AI.276835

Amount of Each Receipt this Period
10.50

B. LARRY FLUE
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.50

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277126

Amount of Each Receipt this Period
10.50

C. LARRY FLUE
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277710

Amount of Each Receipt this Period
10.50

SUBTOTAL of Receipts This Page (optional).....▶	31.50
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 239 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. NANETTE M. FOLSOM
 Full Name (Last, First, Middle Initial)
 Mailing Address 5631 Swan Avenue ne
 City North Canton State OH Zip Code 44721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 24 / 2012
Transaction ID : SA11AI.280169
 Amount of Each Receipt this Period 25.00

B. NANETTE M. FOLSOM
 Full Name (Last, First, Middle Initial)
 Mailing Address 5631 Swan Avenue ne
 City North Canton State OH Zip Code 44721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 06 / 2012
Transaction ID : SA11AI.280224
 Amount of Each Receipt this Period 25.00

C. G JAMAL M. FORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 4919 Zimmer Drive
 City Columbus State OH Zip Code 43232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation BUS DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 359.49

Date of Receipt 10 / 29 / 2012
Transaction ID : SA11AI.280265
 Amount of Each Receipt this Period 15.63

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.63
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 240 OF 846
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input 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

A. G JAMAL M. FORD
Full Name (Last, First, Middle Initial)

Mailing Address 4919 Zimmer Drive

City Columbus State OH Zip Code 43232

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation BUS DRIVER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **375.12**

Date of Receipt **11 / 13 / 2012**

Transaction ID : SA11AI.280295

Amount of Each Receipt this Period **15.63**

B. G JAMAL M. FORD
Full Name (Last, First, Middle Initial)

Mailing Address 4919 Zimmer Drive

City Columbus State OH Zip Code 43232

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation BUS DRIVER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.75**

Date of Receipt **11 / 26 / 2012**

Transaction ID : SA11AI.280325

Amount of Each Receipt this Period **15.63**

C. BENJAMIN FORSTENZER
Full Name (Last, First, Middle Initial)

Mailing Address 190 W. Ostend Street Suite 101

City Baltimore State MD Zip Code 21230

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

Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **687.50**

Date of Receipt **11 / 05 / 2012**

Transaction ID : SA11AI.279979

Amount of Each Receipt this Period **62.50**

SUBTOTAL of Receipts This Page (optional)..... **93.76**

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: (check only one)	PAGE 241 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JEFFREY S. FOWLER
Full Name (Last, First, Middle Initial)

Mailing Address 7664 Hinton Avenue South
Apt. #9

City State Zip Code
Cottage Grove MN 55016

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

Name of Employer Occupation
AFSCME MN CN 5/CN14 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
598.79

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2012
Transaction ID : SA11AI.280036

Amount of Each Receipt this Period
54.44

B. MICHAEL E. FOX
Full Name (Last, First, Middle Initial)

Mailing Address 3818 Sheffield Lane

City State Zip Code
Harrisburg PA 17110-3044

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

Name of Employer Occupation
AFSCME PA CN 13 COUNCIL DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2775.29

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012
Transaction ID : SA11AI.276321

Amount of Each Receipt this Period
70.00

C. MICHAEL E. FOX
Full Name (Last, First, Middle Initial)

Mailing Address 3818 Sheffield Lane

City State Zip Code
Harrisburg PA 17110-3044

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

Name of Employer Occupation
AFSCME PA CN 13 COUNCIL DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3006.65

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2012
Transaction ID : SA11AI.279637

Amount of Each Receipt this Period
231.36

SUBTOTAL of Receipts This Page (optional)..... ▶ **355.80**

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 242 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. WALTER FRANCIS
Full Name (Last, First, Middle Initial)

Mailing Address 1002 Cypress Rd.

City State Zip Code
Wilmington DE 19810

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

Name of Employer Occupation
AFSCME PA CN 13 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
713.73

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2012

Transaction ID : SA11AI.279638

Amount of Each Receipt this Period
67.70

B. GARETH J. FRANK
Full Name (Last, First, Middle Initial)

Mailing Address 2309 Parkway

City State Zip Code
Cheverly MD 20785

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

Name of Employer Occupation
AFSCME INT'L/STATE STREET RETIREE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
618.40

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2012

Transaction ID : SA11AI.276737

Amount of Each Receipt this Period
77.40

C. ANGELA FROEBE
Full Name (Last, First, Middle Initial)

Mailing Address 190 W. Ostend Street
Suite 101

City State Zip Code
Baltimore MD 21230

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

Name of Employer Occupation
AFSCME MD CN 982 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
339.24

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2012

Transaction ID : SA11AI.279980

Amount of Each Receipt this Period
30.84

SUBTOTAL of Receipts This Page (optional)..... ► **175.94**

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 243 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CATHRIN E. FRYE
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 252
 City State Zip Code
 So. Prairie WA 98385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2012
Transaction ID : SA11AI.276837
 Amount of Each Receipt this Period
 10.50

B. CATHRIN E. FRYE
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 252
 City State Zip Code
 So. Prairie WA 98385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277128
 Amount of Each Receipt this Period
 10.50

C. CATHRIN E. FRYE
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 252
 City State Zip Code
 So. Prairie WA 98385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277712
 Amount of Each Receipt this Period
 10.50

SUBTOTAL of Receipts This Page (optional).....▶	31.50
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 244 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JAMES E. FRYE		Date of Receipt
Mailing Address 11510 Waesche Drive		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City State Zip Code Bowie MD 20721		Transaction ID : SA11AI.276392
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="35.19"/>
Name of Employer AFSCME INT'L	Occupation STAFF SPECIALIST II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="690.38"/>	

Full Name (Last, First, Middle Initial) B. JAMES E. FRYE		Date of Receipt
Mailing Address 11510 Waesche Drive		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City State Zip Code Bowie MD 20721		Transaction ID : SA11AI.276587
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="35.19"/>
Name of Employer AFSCME INT'L	Occupation STAFF SPECIALIST II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="725.57"/>	

Full Name (Last, First, Middle Initial) C. MARK J. FRYMOYER		Date of Receipt
Mailing Address 518 Reuel Avenue		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/>
City State Zip Code Kellogg IA 50134		Transaction ID : SA11AI.280072
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="60.00"/>
Name of Employer AFSCME IA CN 61	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="660.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="130.38"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 245 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BRIAN FUITEN
Full Name (Last, First, Middle Initial)
Mailing Address 445 Mayfair Drive
City Lincoln State IL Zip Code 62656
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME IL CN 31 Occupation DATA PROCESSING SPECIALIST
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **765.00**

Date of Receipt **11 / 01 / 2012**
Transaction ID : SA11AI.279540
Amount of Each Receipt this Period **76.50**

B. GAIL FUJIMOTO
Full Name (Last, First, Middle Initial)
Mailing Address 888 Mililani Street Suite 601
City Honolulu State HI Zip Code 96813-2991
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **275.00**

Date of Receipt **11 / 02 / 2012**
Transaction ID : SA11AI.280409
Amount of Each Receipt this Period **25.00**

C. SEAN FULKERSON
Full Name (Last, First, Middle Initial)
Mailing Address 29 N. Wacker Drive Suite 800
City Chicago State IL Zip Code 60606
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **677.40**

Date of Receipt **11 / 01 / 2012**
Transaction ID : SA11AI.279541
Amount of Each Receipt this Period **67.74**

SUBTOTAL of Receipts This Page (optional)..... **169.24**
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 246 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. CHRISTOPHER B. FULLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 92 Wilber Avenue
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation BUS DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2012
Transaction ID : SA11AI.280266
 Amount of Each Receipt this Period
 25.00

B. CHRISTOPHER B. FULLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 92 Wilber Avenue
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation BUS DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2012
Transaction ID : SA11AI.280296
 Amount of Each Receipt this Period
 25.00

C. CHRISTOPHER B. FULLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 92 Wilber Avenue
 City Columbus State OH Zip Code 43215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation BUS DRIVER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.280326
 Amount of Each Receipt this Period
 25.00

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 247 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. AMY H. GALATIAN			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2012 Transaction ID : SA11AI.276393
Mailing Address 11072 Sospel Place			Amount of Each Receipt this Period 39.21
City Las Vegas	State NV	Zip Code 89141	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation FIELD COORDINATOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 932.55		

Full Name (Last, First, Middle Initial) B. AMY H. GALATIAN			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2012 Transaction ID : SA11AI.276588
Mailing Address 11072 Sospel Place			Amount of Each Receipt this Period 39.21
City Las Vegas	State NV	Zip Code 89141	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation FIELD COORDINATOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 971.76		

Full Name (Last, First, Middle Initial) C. KERRI GALLAGHER			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 14 / 2012 Transaction ID : SA11AI.279639
Mailing Address 8 South Main Street			Amount of Each Receipt this Period 67.70
City Mountain Top	State PA	Zip Code 18707	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 646.03		

SUBTOTAL of Receipts This Page (optional).....▶	146.12
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 248 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JOHN GALUSKA			Date of Receipt M M / D D / Y Y Y Y Y 11 / 14 / 2012 Transaction ID : SA11AI.279640
Mailing Address 205 Green Vista Drive			Amount of Each Receipt this Period 67.70
City Pittsburgh	State PA	Zip Code 15237	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 698.35		

Full Name (Last, First, Middle Initial) B. PAUL H. GAMMEL			Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2012 Transaction ID : SA11AI.278146
Mailing Address 47390 Acacia Trail			Amount of Each Receipt this Period 30.00
City Stanchfield	State MN	Zip Code 55080	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MN CN 5/STATE OF MN	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00		

Full Name (Last, First, Middle Initial) C. DEBRA L. GARCIA			Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2012 Transaction ID : SA11AI.276394
Mailing Address 449 College Avenue			Amount of Each Receipt this Period 57.43
City Richmond	State IN	Zip Code 47374	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation AREA FIELD SERVICES DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1164.89		

SUBTOTAL of Receipts This Page (optional).....▶	155.13
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 249 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DEBRA L. GARCIA
Full Name (Last, First, Middle Initial)

Mailing Address 449 College Avenue

City Richmond State IN Zip Code 47374

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

Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1222.32

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276589

Amount of Each Receipt this Period 57.43

B. DONALD GARDNER
Full Name (Last, First, Middle Initial)

Mailing Address 513 E. Main

City Flushing State MI Zip Code 48433

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

Name of Employer AFSCME MI CN 25 Occupation STAFF SPECIALIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 07 / 2012
Transaction ID : SA11AI.279871

Amount of Each Receipt this Period 10.00

C. DONALD GARDNER
Full Name (Last, First, Middle Initial)

Mailing Address 513 E. Main

City Flushing State MI Zip Code 48433

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

Name of Employer AFSCME MI CN 25 Occupation STAFF SPECIALIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 20 / 2012
Transaction ID : SA11AI.279921

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 77.43

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 250 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. ALBERT GARRETT

Mailing Address 18491 Lauder

City State Zip Code
 Detroit MI 48232

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

Name of Employer Occupation
 AFSCME MI CN 25 PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2544.43

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2012
Transaction ID : SA11AI.279872

Amount of Each Receipt this Period
 117.83

Full Name (Last, First, Middle Initial)
B. ALBERT GARRETT

Mailing Address 18491 Lauder

City State Zip Code
 Detroit MI 48232

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

Name of Employer Occupation
 AFSCME MI CN 25 PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2662.26

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2012
Transaction ID : SA11AI.279922

Amount of Each Receipt this Period
 117.83

Full Name (Last, First, Middle Initial)
C. AUSTIN GARRETT

Mailing Address 1034 N. Washington Avenue

City State Zip Code
 Lansing MI 48906

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

Name of Employer Occupation
 AFSCME MI CN 25 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 328.74

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2012
Transaction ID : SA11AI.279873

Amount of Each Receipt this Period
 25.68

SUBTOTAL of Receipts This Page (optional)..... ▶ 261.34

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 251 OF 846
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. AUSTIN GARRETT
Full Name (Last, First, Middle Initial)
Mailing Address 1034 N. Washington Avenue
City Lansing State MI Zip Code 48906
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 354.42

Date of Receipt 11 / 20 / 2012
Transaction ID : SA11AI.279923
Amount of Each Receipt this Period 25.68

B. ROBERT A. GARRETT
Full Name (Last, First, Middle Initial)
Mailing Address 5621 Wigmore Drive
City Columbus State OH Zip Code 43235
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 397.46

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279809
Amount of Each Receipt this Period 51.74

C. JOHN H GARRETT SR
Full Name (Last, First, Middle Initial)
Mailing Address 3560 Wymore Place
City Columbus State OH Zip Code 43232
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation BUS DRIVER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 327.50

Date of Receipt 10 / 29 / 2012
Transaction ID : SA11AI.280267
Amount of Each Receipt this Period 12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 89.92
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 252 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOHN H GARRETT SR
Full Name (Last, First, Middle Initial)

Mailing Address 3560 Wymore Place

City Columbus State OH Zip Code 43232

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation BUS DRIVER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt 11 / 13 / 2012
Transaction ID : SA11AI.280297

Amount of Each Receipt this Period 12.50

B. JOHN H GARRETT SR
Full Name (Last, First, Middle Initial)

Mailing Address 3560 Wymore Place

City Columbus State OH Zip Code 43232

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation BUS DRIVER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 352.50

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.280327

Amount of Each Receipt this Period 12.50

C. DAVID GASH
Full Name (Last, First, Middle Initial)

Mailing Address 226 Hartley Road

City Hershey State PA Zip Code 17033

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 804.76

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.279641

Amount of Each Receipt this Period 73.16

SUBTOTAL of Receipts This Page (optional)..... ▶ 98.16

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 253 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JON A. GASPER
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 4251

City Honolulu State HI Zip Code 96812-4251

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

Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.280410

Amount of Each Receipt this Period 21.00

B. ALLEN B. GASTON
Full Name (Last, First, Middle Initial)

Mailing Address 341 W. Union Road

City Shelocta State PA Zip Code 15774

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

Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279723

Amount of Each Receipt this Period 20.00

C. JUDITH E. GATLIN
Full Name (Last, First, Middle Initial)

Mailing Address 2007 Manor Court

City Eau Claire State WI Zip Code 54703

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

Name of Employer AFSCME WI CN 24/STATE OF WI Occupation ACADEMIC DEPT ASSOC. B

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 22 / 2012
Transaction ID : SA11AI.277546

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 51.00

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 254 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. JUDITH E. GATLIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2007 Manor Court
 City Eau Claire State WI Zip Code 54703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WI CN 24/STATE OF WI Occupation ACADEMIC DEPT ASSOC. B
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.277547
 Amount of Each Receipt this Period 10.00

B. JUDITH E. GATLIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2007 Manor Court
 City Eau Claire State WI Zip Code 54703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WI CN 24/STATE OF WI Occupation ACADEMIC DEPT ASSOC. B
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.277548
 Amount of Each Receipt this Period 10.00

C. RYAN GENOVESE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1410 Bush Street Suite A
 City Baltimore State MD Zip Code 21230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MD CN 67 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 529.62

Date of Receipt 11 / 06 / 2012
Transaction ID : SA11AI.279960
 Amount of Each Receipt this Period 50.44

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.44
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 255 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. KEVIN GEORGE
 Full Name (Last, First, Middle Initial)
 Mailing Address 527 River Pebble Drive
 City State Zip Code
 Blacklick OH 43004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278388
 Amount of Each Receipt this Period
 10.00

B. KEVIN GEORGE
 Full Name (Last, First, Middle Initial)
 Mailing Address 527 River Pebble Drive
 City State Zip Code
 Blacklick OH 43004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278746
 Amount of Each Receipt this Period
 10.00

C. KEVIN GEORGE
 Full Name (Last, First, Middle Initial)
 Mailing Address 527 River Pebble Drive
 City State Zip Code
 Blacklick OH 43004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279104
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 256 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. RAGLAN GEORGE Jr.		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2012 Transaction ID : SA11AI.276322
Mailing Address 75 Varick Street Suite #1404		Amount of Each Receipt this Period 14.00
City New York	State NY	Zip Code 10013-9902
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME NY CN 1707	Occupation EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1193.36	

Full Name (Last, First, Middle Initial) B. THOMAS GIBBS		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2012 Transaction ID : SA11AI.279642
Mailing Address 152 Upper Claar Rd.		Amount of Each Receipt this Period 73.16
City Claysburg	State PA	Zip Code 16625
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 804.76	

Full Name (Last, First, Middle Initial) C. CRAIG W. GIBELYOU		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 25 / 2012 Transaction ID : SA11AI.276839
Mailing Address 10905 132nd Street E		Amount of Each Receipt this Period 21.00
City Puyallup	State WA	Zip Code 98374
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

SUBTOTAL of Receipts This Page (optional).....▶	108.16
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 257 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. CRAIG W. GIBELYOU
 Full Name (Last, First, Middle Initial)
 Mailing Address 10905 132nd Street E
 City Puyallup State WA Zip Code 98374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277130
 Amount of Each Receipt this Period 21.00

B. CRAIG W. GIBELYOU
 Full Name (Last, First, Middle Initial)
 Mailing Address 10905 132nd Street E
 City Puyallup State WA Zip Code 98374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 462.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.27714
 Amount of Each Receipt this Period 21.00

C. KAREN GILBERT
 Full Name (Last, First, Middle Initial)
 Mailing Address 12710 Wycklow Drive
 City Clifton State VA Zip Code 20124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation PROJECT TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276591
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 52.00
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 258 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DELLA L. GILES
Full Name (Last, First, Middle Initial)

Mailing Address 1265 Manchester Avenue

City Columbus	State OH	Zip Code 43211
------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation DATA ENTRY OPERATOR
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.278392

Amount of Each Receipt this Period
10.00

B. DELLA L. GILES
Full Name (Last, First, Middle Initial)

Mailing Address 1265 Manchester Avenue

City Columbus	State OH	Zip Code 43211
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation DATA ENTRY OPERATOR
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.278750

Amount of Each Receipt this Period
10.00

C. DELLA L. GILES
Full Name (Last, First, Middle Initial)

Mailing Address 1265 Manchester Avenue

City Columbus	State OH	Zip Code 43211
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation DATA ENTRY OPERATOR
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2012

Transaction ID : SA11AI.279108

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 259 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LENORA R. GILES
Full Name (Last, First, Middle Initial)

Mailing Address 40778 Boyd Road

City Wellsville	State OH	Zip Code 43968
--------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 4	Occupation FIELD REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2012

Transaction ID : SA11AI.280170

Amount of Each Receipt this Period
20.00

B. LENORA R. GILES
Full Name (Last, First, Middle Initial)

Mailing Address 40778 Boyd Road

City Wellsville	State OH	Zip Code 43968
--------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 4	Occupation FIELD REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2012

Transaction ID : SA11AI.280225

Amount of Each Receipt this Period
20.00

C. KAREN GILGOFF
Full Name (Last, First, Middle Initial)

Mailing Address 3003 Van Ness Street NW
#W1023

City Washington	State DC	Zip Code 20008
--------------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation ASST. DIRECTOR, RETIREES PROGRAM
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1594.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276397

Amount of Each Receipt this Period
79.74

SUBTOTAL of Receipts This Page (optional).....▶	119.74
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 260 OF 846
	<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	<input 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

A. KAREN GILGOFF
Full Name (Last, First, Middle Initial)

Mailing Address 3003 Van Ness Street NW
#W1023

City Washington State DC Zip Code 20008

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

Name of Employer AFSCME INT'L Occupation ASST. DIRECTOR, RETIREES PROGRAM

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1674.54

Date of Receipt
11 / 15 / 2012
Transaction ID : SA11AI.276592

Amount of Each Receipt this Period
79.74

B. CARLA GILLESPIE
Full Name (Last, First, Middle Initial)

Mailing Address 608 Blair Street

City Alton State IL Zip Code 62002

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

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.22

Date of Receipt
11 / 01 / 2012
Transaction ID : SA11AI.279542

Amount of Each Receipt this Period
32.13

C. GARY L. GILLESPIE
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 1

City Eugene State OR Zip Code 97440

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

Name of Employer AFSCME OR CN 75/STATE OF OR Occupation CUST ACCTS SPECIALIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
10 / 31 / 2012
Transaction ID : SA11AI.277961

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 141.87

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 261 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. DOROTHY L. GILLIAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 1216 Waterford Drive
 City State Zip Code
 District Heights MD 20747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME INT'L EXECUTIVE OFFICE ASSISTANT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 834.58

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276398
 Amount of Each Receipt this Period
 38.56

B. DOROTHY L. GILLIAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 1216 Waterford Drive
 City State Zip Code
 District Heights MD 20747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME INT'L EXECUTIVE OFFICE ASSISTANT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 873.63

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : SA11AI.276593
 Amount of Each Receipt this Period
 39.05

C. CHERYL A. GILMORE
 Full Name (Last, First, Middle Initial)
 Mailing Address 2608 Naylor Road SE #301
 City State Zip Code
 Washington DC 20020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME INT'L ADMINISTRATIVE ASSISTANT II
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 726.83

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276400
 Amount of Each Receipt this Period
 34.08

SUBTOTAL of Receipts This Page (optional)..... ▶ 111.69
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 262 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CHERYL A. GILMORE
Full Name (Last, First, Middle Initial)

Mailing Address 2608 Naylor Road SE #301

City Washington State DC Zip Code 20020

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

Name of Employer AFSCME INT'L Occupation ADMINISTRATIVE ASSISTANT II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 760.91

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276595

Amount of Each Receipt this Period 34.08

B. DENISE GILMORE
Full Name (Last, First, Middle Initial)

Mailing Address 190 W. Ostend Street Suite 101

City Baltimore State MD Zip Code 21230

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

Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.88

Date of Receipt 11 / 05 / 2012
Transaction ID : SA11AI.279981

Amount of Each Receipt this Period 42.08

C. STEVE GIORGI
Full Name (Last, First, Middle Initial)

Mailing Address 8386 Gardenia Street

City Virginia State MN Zip Code 55792

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

Name of Employer AFSCME MN CN 65 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 896.49

Date of Receipt 11 / 07 / 2012
Transaction ID : SA11AI.280374

Amount of Each Receipt this Period 79.69

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.85

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 263 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MARK T. GIPSON
Full Name (Last, First, Middle Initial)

Mailing Address 2961 SW Champlain Drive

City Portland State OR Zip Code 97205

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

Name of Employer AFSCME OR CN 75/STATE OF OR Occupation CUSTODIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.277962

Amount of Each Receipt this Period 200.00

B. ROGER GLADDEN
Full Name (Last, First, Middle Initial)

Mailing Address 3412 Knipp Drive Suite 102

City Jefferson City State MO Zip Code 65109

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

Name of Employer AFSCME MO CN 72 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 356.25

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.280349

Amount of Each Receipt this Period 18.75

C. ROGER GLADDEN
Full Name (Last, First, Middle Initial)

Mailing Address 3412 Knipp Drive Suite 102

City Jefferson City State MO Zip Code 65109

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

Name of Employer AFSCME MO CN 72 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 11 / 05 / 2012
Transaction ID : SA11AI.280357

Amount of Each Receipt this Period 18.75

SUBTOTAL of Receipts This Page (optional)..... ▶ 57.50

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 264 OF 846
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input 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

A. ROGER GLADDEN
Full Name (Last, First, Middle Initial)

Mailing Address 3412 Knipp Drive
Suite 102

City Jefferson City State MO Zip Code 65109

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

Name of Employer AFSCME MO CN 72 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **393.75**

Date of Receipt **11 / 26 / 2012**

Transaction ID : SA11AI.280365

Amount of Each Receipt this Period **18.75**

B. JANICE K. GLENN
Full Name (Last, First, Middle Initial)

Mailing Address 1786 Larkwood Place

City Columbus State OH Zip Code 43229

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CLAIMS EXAMINER IV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.00**

Date of Receipt **10 / 19 / 2012**

Transaction ID : SA11AI.278396

Amount of Each Receipt this Period **10.00**

C. JANICE K. GLENN
Full Name (Last, First, Middle Initial)

Mailing Address 1786 Larkwood Place

City Columbus State OH Zip Code 43229

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CLAIMS EXAMINER IV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **211.00**

Date of Receipt **11 / 02 / 2012**

Transaction ID : SA11AI.278754

Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional)..... **38.75**

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 265 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JANICE K. GLENN
Full Name (Last, First, Middle Initial)

Mailing Address 1786 Larkwood Place

City Columbus State OH Zip Code 43229

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CLAIMS EXAMINER IV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 221.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279112

Amount of Each Receipt this Period 100.00

B. PATRICIA M. GLYNN
Full Name (Last, First, Middle Initial)

Mailing Address 55 Aberdeen Avenue

City Cambridge State MA Zip Code 02138-0000

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

Name of Employer AFSCME MA CN 93 Occupation AREA FIELD SERVICES DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 997.20

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276401

Amount of Each Receipt this Period 46.26

C. PATRICIA M. GLYNN
Full Name (Last, First, Middle Initial)

Mailing Address 55 Aberdeen Avenue

City Cambridge State MA Zip Code 02138-0000

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

Name of Employer AFSCME MA CN 93 Occupation AREA FIELD SERVICES DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1043.46

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276596

Amount of Each Receipt this Period 46.26

SUBTOTAL of Receipts This Page (optional).....▶ 102.52

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 266 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KATHRYN J. GOLD
Full Name (Last, First, Middle Initial)

Mailing Address 4517 Santa Clara Drive

City Springfield State IL Zip Code 62711

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

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation SYSTEMS ANALYST II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 268.82

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279416

Amount of Each Receipt this Period 31.26

B. MARK GOLDEN
Full Name (Last, First, Middle Initial)

Mailing Address 74 Ice Pond Road

City Levittown State PA Zip Code 19057

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 804.76

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.279643

Amount of Each Receipt this Period 73.16

C. RICHARD GOLLIN
Full Name (Last, First, Middle Initial)

Mailing Address 900 Randolph Place

City Union State NJ Zip Code 07083-0000

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

Name of Employer AFSCME NJ CN 52 Occupation EXECUTIVE DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1093.28

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276323

Amount of Each Receipt this Period 14.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 118.42

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 267 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. JAMES R. GOLLINGS Jr.			Date of Receipt M M / D D / Y Y Y Y Y 10 / 24 / 2012 Transaction ID : SA11AI.280171		
Mailing Address 40 Rathbone			Amount of Each Receipt this Period 38.47		
City Columbus	State OH	Zip Code 43214			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME OH LOC 4		Occupation FIELD REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 847.87			

Full Name (Last, First, Middle Initial) B. JAMES R. GOLLINGS Jr.			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2012 Transaction ID : SA11AI.280226		
Mailing Address 40 Rathbone			Amount of Each Receipt this Period 38.47		
City Columbus	State OH	Zip Code 43214			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME OH LOC 4		Occupation FIELD REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 886.34			

Full Name (Last, First, Middle Initial) C. ANGELICA U. GONZALES			Date of Receipt M M / D D / Y Y Y Y Y 10 / 25 / 2012 Transaction ID : SA11AI.276840		
Mailing Address 166 Aloe Court			Amount of Each Receipt this Period 10.50		
City Richland	State WA	Zip Code 99352			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME WA CN 28/STATE OF WA		Occupation STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00			

SUBTOTAL of Receipts This Page (optional).....▶	87.44
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 268 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ANGELICA U. GONZALES
Full Name (Last, First, Middle Initial)

Mailing Address 166 Aloe Court

City Richland	State WA	Zip Code 99352
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11Al.277131

Amount of Each Receipt this Period

10.50

B. ANGELICA U. GONZALES
Full Name (Last, First, Middle Initial)

Mailing Address 166 Aloe Court

City Richland	State WA	Zip Code 99352
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11Al.27715

Amount of Each Receipt this Period

10.50

C. JESSE GONZALEZ
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia	State WA	Zip Code 98501
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2012

Transaction ID : SA11Al.276841

Amount of Each Receipt this Period

10.50

SUBTOTAL of Receipts This Page (optional).....▶	31.50
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 269 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JESSE GONZALEZ
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.50

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277132

Amount of Each Receipt this Period
10.50

B. JESSE GONZALEZ
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.27716

Amount of Each Receipt this Period
10.50

C. LAURA A. GONZALEZ
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
10 / 25 / 2012
Transaction ID : SA11AI.276842

Amount of Each Receipt this Period
10.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 31.50

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 270 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LAURA A. GONZALEZ
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.50

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277133

Amount of Each Receipt this Period
10.50

B. LAURA A. GONZALEZ
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.27717

Amount of Each Receipt this Period
10.50

C. PHILLIP C. GOODMAN
Full Name (Last, First, Middle Initial)

Mailing Address 10 Lakeview Road

City Taylorville State IL Zip Code 62568

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

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 613.20

Date of Receipt
11 / 01 / 2012
Transaction ID : SA11AI.279543

Amount of Each Receipt this Period
61.32

SUBTOTAL of Receipts This Page (optional)..... ▶ 82.32

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 271 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. ANISSIA GOODWIN		Date of Receipt
Mailing Address 390 Worthington Road		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City State Zip Code Westerville OH 43082		Transaction ID : SA11AI.280106
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation AFSCME OH LOC 11 STAFF REPRESENTATIVE		<input type="text" value="96.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="914.00"/>

Full Name (Last, First, Middle Initial) B. GARY GORA		Date of Receipt
Mailing Address W22203 Wagner Road		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City State Zip Code Trempealeau WI 54661		Transaction ID : SA11AI.278151
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation AFSCME MN CN 5/STATE OF MN STAFF REPRESENTATIVE		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="230.00"/>

Full Name (Last, First, Middle Initial) C. LAVERNE A. GORDON		Date of Receipt
Mailing Address 4653 E 174th Street		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City State Zip Code Cleveland OH 44128		Transaction ID : SA11AI.278399
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH STAFF REPRESENTATIVE		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="210.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="126.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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 272 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LAVERNE A. GORDON
Full Name (Last, First, Middle Initial)

Mailing Address 4653 E 174th Street

City Cleveland	State OH	Zip Code 44128
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11Al.278757

Amount of Each Receipt this Period
10.00

B. LAVERNE A. GORDON
Full Name (Last, First, Middle Initial)

Mailing Address 4653 E 174th Street

City Cleveland	State OH	Zip Code 44128
-------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2012

Transaction ID : SA11Al.279115

Amount of Each Receipt this Period
10.00

C. PATRICIA GORDON
Full Name (Last, First, Middle Initial)

Mailing Address 112 Chesbrough Road

City West Roxbury	State MA	Zip Code 02132-0000
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation FIELD OFFICE ASSISTANT II
----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
508.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11Al.276402

Amount of Each Receipt this Period
25.40

SUBTOTAL of Receipts This Page (optional).....▶	45.40
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 273 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. PATRICIA GORDON		Date of Receipt
Mailing Address 112 Chesbrough Road		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.276597
West Roxbury	MA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="25.40"/>
Name of Employer	Occupation	
AFSCME INT'L	FIELD OFFICE ASSISTANT II	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="533.40"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. WILLIAM H. GORDON JR.		Date of Receipt
Mailing Address 7203 Van Kirk Avenue		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.278400
Cincinnati	OH	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="15.00"/>
Name of Employer	Occupation	
AFSCME OH LOC 11/STATE OF OH	CORRECTION OFFICER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="255.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. WILLIAM H. GORDON JR.		Date of Receipt
Mailing Address 7203 Van Kirk Avenue		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.278758
Cincinnati	OH	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="15.00"/>
Name of Employer	Occupation	
AFSCME OH LOC 11/STATE OF OH	CORRECTION OFFICER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="270.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="55.40"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 274 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. WILLIAM H. GORDON JR.
Full Name (Last, First, Middle Initial)

Mailing Address 7203 Van Kirk Avenue

City Cincinnati State OH Zip Code 45216

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279116

Amount of Each Receipt this Period 15.00

B. ERIN GORMAN
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Christopher Lane

City Springfield State IL Zip Code 62712

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

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 749.40

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279544

Amount of Each Receipt this Period 74.94

C. LOTTIE M. GOSHAY
Full Name (Last, First, Middle Initial)

Mailing Address 826 Inwood Place

City Columbus State OH Zip Code 43224

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation COOK

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 327.50

Date of Receipt 10 / 29 / 2012
Transaction ID : SA11AI.280268

Amount of Each Receipt this Period 12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 102.44

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 275 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. LOTTIE M. GOSHAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 826 Inwood Place
 City Columbus State OH Zip Code 43224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation COOK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 11 / 13 / 2012
Transaction ID : SA11AI.280298
 Amount of Each Receipt this Period 12.50

B. LOTTIE M. GOSHAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 826 Inwood Place
 City Columbus State OH Zip Code 43224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation COOK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 352.50

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.280328
 Amount of Each Receipt this Period 12.50

C. DANA M. GOUIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 9121 Knox Court
 City Laurel State MD Zip Code 20723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation SUPPORT STAFF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 456.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276403
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
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 276 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. DANA M. GOUIN			Date of Receipt
Mailing Address 9121 Knox Court			<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276598
Laurel	MD	20723	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="20.00"/>
Name of Employer	Occupation		
AFSCME INT'L	SUPPORT STAFF		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="476.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. KERRY GRABER			Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300			<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276843
Olympia	WA	98501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="12.50"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. KERRY GRABER			Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300			<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.277134
Olympia	WA	98501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="12.50"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="262.50"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="45.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 277 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. KERRY GRABER		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277718
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="12.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="275.00"/>	

Full Name (Last, First, Middle Initial) B. STEPHEN M. GRAHAM		Date of Receipt
Mailing Address 6002 Euclid Street		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City Cheverly	State MD	Zip Code 20785
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.276404
Name of Employer AFSCME INT'L		Amount of Each Receipt this Period
Occupation ASSOCIATE DIRECTOR, ACCOUNTING		<input type="text" value="51.10"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="1015.89"/>	

Full Name (Last, First, Middle Initial) C. STEPHEN M. GRAHAM		Date of Receipt
Mailing Address 6002 Euclid Street		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City Cheverly	State MD	Zip Code 20785
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.276599
Name of Employer AFSCME INT'L		Amount of Each Receipt this Period
Occupation ASSOCIATE DIRECTOR, ACCOUNTING		<input type="text" value="51.10"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="1066.99"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="114.70"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 278 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. ELIZABETH D. GRAY-LINDSLEY		Date of Receipt
Mailing Address 1302 4th Street SW		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.276405
Washington	DC	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="105.01"/>
Name of Employer	Occupation	
AFSCME INT'L	ASSIST DIRECTOR, CAPITAL STRATEGIES	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2047.69"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. ELIZABETH D. GRAY-LINDSLEY		Date of Receipt
Mailing Address 1302 4th Street SW		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.276600
Washington	DC	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="105.01"/>
Name of Employer	Occupation	
AFSCME INT'L	ASSIST DIRECTOR, CAPITAL STRATEGIES	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2152.70"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. R. SEAN GRAYSON		Date of Receipt
Mailing Address 10201 Galena Pointe Drive		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.279810
Galena	OH	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="106.30"/>
Name of Employer	Occupation	
AFSCME OH CN 8	GENERAL COUNSEL	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1061.41"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="316.32"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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 279 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JONATHAN GREBNER
Full Name (Last, First, Middle Initial)

Mailing Address 840 Randolph Avenue

City Saint Paul State MN Zip Code 55126

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

Name of Employer AFSCME MN CN 5/CN14 Occupation POLITICAL DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **753.80**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2012

Transaction ID : SA11AI.280037

Amount of Each Receipt this Period
65.74

B. LINDA J. GREEN
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 142

City Sherrard State IL Zip Code 61281

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

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation REVENUE AUDITOR III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **312.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2012

Transaction ID : SA11AI.279418

Amount of Each Receipt this Period
75.00

C. PATRICIA GREEN
Full Name (Last, First, Middle Initial)

Mailing Address 4031 Executive Park Drive

City Harrisburg State PA Zip Code 17111

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **531.90**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2012

Transaction ID : SA11AI.279644

Amount of Each Receipt this Period
48.66

SUBTOTAL of Receipts This Page (optional).....▶	189.40
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 280 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. FRANKLIN GREENE
Full Name (Last, First, Middle Initial)
Mailing Address 3709 Darcey Lane

City Flint	State MI	Zip Code 48506-5001
---------------	-------------	------------------------

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

Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
441.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2012

Transaction ID : SA11AI.279874

Amount of Each Receipt this Period
21.04

B. FRANKLIN GREENE
Full Name (Last, First, Middle Initial)
Mailing Address 3709 Darcey Lane

City Flint	State MI	Zip Code 48506-5001
---------------	-------------	------------------------

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

Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
462.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2012

Transaction ID : SA11AI.279924

Amount of Each Receipt this Period
21.04

C. SCOTT GREFE
Full Name (Last, First, Middle Initial)
Mailing Address 4020 Glendale Drive

City Excelsior	State MN	Zip Code 55331-9764
-------------------	-------------	------------------------

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

Name of Employer AFSCME MN CN 5/CN14	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2012

Transaction ID : SA11AI.280038

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....	62.08
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 281 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. MARSHA N. GRESHAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 18321 Wallingford Avenue N.
 City Shoreline State WA Zip Code 98133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2012
Transaction ID : SA11AI.276844
 Amount of Each Receipt this Period
 10.00

B. MARSHA N. GRESHAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 18321 Wallingford Avenue N.
 City Shoreline State WA Zip Code 98133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277135
 Amount of Each Receipt this Period
 10.00

C. MARSHA N. GRESHAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 18321 Wallingford Avenue N.
 City Shoreline State WA Zip Code 98133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277719
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 282 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. STEVE GRETSUK			Date of Receipt
Mailing Address 7803 Desiree Street			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276407
Alexandria	VA	22315	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="81.94"/>
Name of Employer	Occupation		
AFSCME INT'L	DIRECTOR, INFORMATION SYSTEMS		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1744.80"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. STEVE GRETSUK			Date of Receipt
Mailing Address 7803 Desiree Street			<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276602
Alexandria	VA	22315	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="81.94"/>
Name of Employer	Occupation		
AFSCME INT'L	DIRECTOR, INFORMATION SYSTEMS		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1826.74"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. KIMBERLY GRIFFIN			Date of Receipt
Mailing Address 2456 Five Fathom Circle			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276408
Woodbridge	VA	22192	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="34.08"/>
Name of Employer	Occupation		
AFSCME INT'L	ADMINISTRATIVE ASSISTANT II		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="681.60"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="197.96"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 283 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KIMBERLY GRIFFIN
Full Name (Last, First, Middle Initial)

Mailing Address 2456 Five Fathom Circle

City Woodbridge State VA Zip Code 22192

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

Name of Employer AFSCME INT'L Occupation ADMINISTRATIVE ASSISTANT II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **715.68**

Date of Receipt **11 / 15 / 2012**

Transaction ID : SA11AI.276603

Amount of Each Receipt this Period **34.08**

B. LYLE B GRIMES
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 9432

City Bridge City State LA Zip Code 70096

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

Name of Employer AFSCME INT'L Occupation ORGANIZER II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **634.50**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.276409

Amount of Each Receipt this Period **31.81**

C. LYLE B GRIMES
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 9432

City Bridge City State LA Zip Code 70096

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

Name of Employer AFSCME INT'L Occupation ORGANIZER II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **666.31**

Date of Receipt **11 / 15 / 2012**

Transaction ID : SA11AI.276604

Amount of Each Receipt this Period **31.81**

SUBTOTAL of Receipts This Page (optional)..... **97.70**

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 284 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. THEODORE RALPH GROENER
Full Name (Last, First, Middle Initial)

Mailing Address 18709 Madrona Drive

City Oregon City State OR Zip Code 97045

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

Name of Employer AFSCME OR CN 75 Occupation POLITICAL COORDINATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
10 / 31 / 2012
Transaction ID : SA11AI.279361

Amount of Each Receipt this Period
300.00

B. OTTO GROENEWALD
Full Name (Last, First, Middle Initial)

Mailing Address Route 9 Box 154

City Bloomfield State IA Zip Code 52537

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

Name of Employer AFSCME IA CN 61 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt
11 / 07 / 2012
Transaction ID : SA11AI.280074

Amount of Each Receipt this Period
60.00

C. DANIEL GROVE
Full Name (Last, First, Middle Initial)

Mailing Address 131 Scanlon Dirve

City Franklin State PA Zip Code 16323

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 746.79

Date of Receipt
11 / 14 / 2012
Transaction ID : SA11AI.279646

Amount of Each Receipt this Period
15.19

SUBTOTAL of Receipts This Page (optional).....▶ 105.19

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 285 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. SHAWN M. GRUBER

Mailing Address 1218 Adams Street

City State Zip Code
 Lima OH 45801

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

Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH CORRECTION OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 255.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278403

Amount of Each Receipt this Period
 15.00

Full Name (Last, First, Middle Initial)
B. SHAWN M. GRUBER

Mailing Address 1218 Adams Street

City State Zip Code
 Lima OH 45801

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

Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH CORRECTION OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278761

Amount of Each Receipt this Period
 15.00

Full Name (Last, First, Middle Initial)
C. SHAWN M. GRUBER

Mailing Address 1218 Adams Street

City State Zip Code
 Lima OH 45801

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

Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH CORRECTION OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 285.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279119

Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00

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 286 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. GREGG GUNTHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson Street SE
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277136
 Amount of Each Receipt this Period
 10.00

B. GREGG GUNTHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson Street SE
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277720
 Amount of Each Receipt this Period
 10.00

C. LORETTA GUTIERREZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson St., SE Suite 300
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2012
Transaction ID : SA11AI.276846
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.00
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 288 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MARIJO HAIN
Full Name (Last, First, Middle Initial)

Mailing Address 716 Bob Ehlen Drive

City Anoka State MN Zip Code 55303-1701

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

Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.278156

Amount of Each Receipt this Period 20.00

B. DONALD HAINES
Full Name (Last, First, Middle Initial)

Mailing Address 451 Walnut Street

City Columbia State PA Zip Code 17512

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

Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279725

Amount of Each Receipt this Period 20.00

C. JUDY L. HAIRE
Full Name (Last, First, Middle Initial)

Mailing Address 2955 NE 73rd Street

City Bremerton State WA Zip Code 98311

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277138

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00

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 290 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DONALD HALL
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
10 / 25 / 2012
Transaction ID : SA11AI.276849

Amount of Each Receipt this Period
10.50

B. DONALD HALL
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.50

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277140

Amount of Each Receipt this Period
10.50

C. DONALD HALL
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277724

Amount of Each Receipt this Period
10.50

SUBTOTAL of Receipts This Page (optional).....▶ 31.50

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 291 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. TERRI L. HALL

Mailing Address 1212 Jefferson St., SE
 Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2012
Transaction ID : SA11AI.276851

Amount of Each Receipt this Period
 21.00

Full Name (Last, First, Middle Initial)
B. TERRI L. HALL

Mailing Address 1212 Jefferson St., SE
 Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 531.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277142

Amount of Each Receipt this Period
 21.00

Full Name (Last, First, Middle Initial)
C. TERRI L. HALL

Mailing Address 1212 Jefferson St., SE
 Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 552.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277726

Amount of Each Receipt this Period
 21.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 63.00

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 292 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CINDY HALLSTROM
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276852

Amount of Each Receipt this Period 12.50

B. CINDY HALLSTROM
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 262.50

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277143

Amount of Each Receipt this Period 12.50

C. CINDY HALLSTROM
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277727

Amount of Each Receipt this Period 12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 37.50

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 293 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. TOMIKA C. HALSEY			Date of Receipt
Mailing Address 299 Saginaw			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276410
Calumet City	IL	60409	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="32.47"/>
Name of Employer	Occupation		
AFSCME INT'L	LEAD ORGANIZER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="739.44"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. TOMIKA C. HALSEY			Date of Receipt
Mailing Address 299 Saginaw			<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276605
Calumet City	IL	60409	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="32.47"/>
Name of Employer	Occupation		
AFSCME INT'L	LEAD ORGANIZER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="771.91"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. HELEN H. HAMADA			Date of Receipt
Mailing Address 1113 Davenport Street Unit A3			<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.280412
Honolulu	HI	96822	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="21.00"/>
Name of Employer	Occupation		
AFSCME HI LOC 152	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="340.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="85.94"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**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 294 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DANIE HAMILTON
Full Name (Last, First, Middle Initial)

Mailing Address 1417 Basswood Court

City East Lansing State MI Zip Code 48823

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2012

Transaction ID : SA11AI.279875

Amount of Each Receipt this Period
 12.50

B. DANIE HAMILTON
Full Name (Last, First, Middle Initial)

Mailing Address 1417 Basswood Court

City East Lansing State MI Zip Code 48823

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2012

Transaction ID : SA11AI.279925

Amount of Each Receipt this Period
 12.50

C. PATRICIA ANN HAMMEL
Full Name (Last, First, Middle Initial)

Mailing Address 390 Worthington Road

City Westerville State OH Zip Code 43082

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

Name of Employer AFSCME OH LOC 11 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2012

Transaction ID : SA11AI.280107

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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 295 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. YANA M. HAMMONDS
Full Name (Last, First, Middle Initial)

Mailing Address 134 S. Sixth Avenue

City Maywood	State IL	Zip Code 60153
-----------------	-------------	-------------------

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

Name of Employer AFSCME IL CN 31/STATE OF IL	Occupation CASEWORKER
---	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11AI.279420

Amount of Each Receipt this Period

2012	11	01	30.00
------	----	----	-------

B. DAWN HANDY
Full Name (Last, First, Middle Initial)

Mailing Address 2560 Edmondson Avenue

City Baltimore	State MD	Zip Code 21223
-------------------	-------------	-------------------

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

Name of Employer AFSCME MD CN 67	Occupation ADMIN ASST./TECH SUPERVISOR
-------------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	06	/	2012

Transaction ID : SA11AI.279961

Amount of Each Receipt this Period

2012	11	06	50.00
------	----	----	-------

C. KEVIN S. HANES
Full Name (Last, First, Middle Initial)

Mailing Address 176 Thunderwood Drive

City Pittsburgh	State PA	Zip Code 15102
--------------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation COMMUNICATIONS SPECIALIST II
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **598.72**

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276411

Amount of Each Receipt this Period

2012	10	31	29.94
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SUBTOTAL of Receipts This Page (optional).....▶	109.94
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 296 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KEVIN S. HANES
Full Name (Last, First, Middle Initial)

Mailing Address 176 Thunderwood Drive

City Pittsburgh State PA Zip Code 15102

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

Name of Employer AFSCME INT'L Occupation COMMUNICATIONS SPECIALIST II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **628.66**

Date of Receipt **11 / 15 / 2012**

Transaction ID : SA11AI.276606

Amount of Each Receipt this Period **29.94**

B. BARBARA HANGARTNER
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt **10 / 25 / 2012**

Transaction ID : SA11AI.276856

Amount of Each Receipt this Period **15.50**

C. BARBARA HANGARTNER
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **295.50**

Date of Receipt **11 / 09 / 2012**

Transaction ID : SA11AI.277147

Amount of Each Receipt this Period **15.50**

SUBTOTAL of Receipts This Page (optional)..... ▶ **60.94**

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 297 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BARBARA HANGARTNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson St., SE
 Suite 300
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 311.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277731
 Amount of Each Receipt this Period 15.50

B. EUGINE HANKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 296 Churchmans Road
 City New Castle State DE Zip Code 19720-9930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME DE CN 81 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 535.15

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.280144
 Amount of Each Receipt this Period 50.08

C. INGRID J. HANSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1609 Langridge Avenue NW
 City Olympia State WA Zip Code 98502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28 Occupation HEALTH SVC CNSLTNT III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276857
 Amount of Each Receipt this Period 15.50

SUBTOTAL of Receipts This Page (optional).....▶ 81.08
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 298 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. INGRID J. HANSEN
Full Name (Last, First, Middle Initial)

Mailing Address 1609 Langridge Avenue NW

City Olympia	State WA	Zip Code 98502
-----------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28	Occupation HEALTH SVC CNSLTNT III
-------------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **435.50**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11AI.277148

Amount of Each Receipt this Period

15.50

B. INGRID J. HANSEN
Full Name (Last, First, Middle Initial)

Mailing Address 1609 Langridge Avenue NW

City Olympia	State WA	Zip Code 98502
-----------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28	Occupation HEALTH SVC CNSLTNT III
-------------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **451.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.27732

Amount of Each Receipt this Period

15.50

C. MARK G. HANSEN
Full Name (Last, First, Middle Initial)

Mailing Address 2829 268th Street NE

City Arlington	State WA	Zip Code 98223
-------------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11AI.277149

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional).....▶	41.00
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 299 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MARK G. HANSEN
Full Name (Last, First, Middle Initial)

Mailing Address 2829 268th Street NE

City State Zip Code
Arlington WA 98223

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

Name of Employer Occupation
AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277733

Amount of Each Receipt this Period
10.00

B. RYAN HANSON
Full Name (Last, First, Middle Initial)

Mailing Address 300 Hardman Avenue South

City State Zip Code
South St. Paul MN 55075

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

Name of Employer Occupation
AFSCME MN CN 5/CN14 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
598.80

Date of Receipt
11 / 14 / 2012
Transaction ID : SA11AI.280039

Amount of Each Receipt this Period
54.43

C. THOMAS D. HANSON
Full Name (Last, First, Middle Initial)

Mailing Address 8501 Bay Road SE

City State Zip Code
Carrollton OH 44615

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

Name of Employer Occupation
AFSCME OH LOC 11/STATE OF OH STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
10 / 19 / 2012
Transaction ID : SA11AI.278406

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	74.43
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 300 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. THOMAS D. HANSON
Full Name (Last, First, Middle Initial)

Mailing Address 8501 Bay Road SE

City Carrollton	State OH	Zip Code 44615
--------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.278764

Amount of Each Receipt this Period
10.00

B. THOMAS D. HANSON
Full Name (Last, First, Middle Initial)

Mailing Address 8501 Bay Road SE

City Carrollton	State OH	Zip Code 44615
--------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2012

Transaction ID : SA11AI.279122

Amount of Each Receipt this Period
10.00

C. YVONNE J. HARGROVE
Full Name (Last, First, Middle Initial)

Mailing Address 12832 Evansport Place

City Woodbridge	State VA	Zip Code 22192
--------------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation ADMINISTRATIVE ASSISTANT I
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
709.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276412

Amount of Each Receipt this Period
35.45

SUBTOTAL of Receipts This Page (optional).....▶	55.45
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 301 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. YVONNE J. HARGROVE
Full Name (Last, First, Middle Initial)

Mailing Address 12832 Evansport Place

City Woodbridge State VA Zip Code 22192

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

Name of Employer AFSCME INT'L Occupation ADMINISTRATIVE ASSISTANT I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **744.45**

Date of Receipt
11 / 15 / 2012
Transaction ID : SA11AI.276607

Amount of Each Receipt this Period
35.45

B. DAVID T. HARPER
Full Name (Last, First, Middle Initial)

Mailing Address 4427 Tacoma Avenue

City Lorain State OH Zip Code 44055

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
10 / 19 / 2012
Transaction ID : SA11AI.278408

Amount of Each Receipt this Period
10.00

C. DAVID T. HARPER
Full Name (Last, First, Middle Initial)

Mailing Address 4427 Tacoma Avenue

City Lorain State OH Zip Code 44055

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
11 / 02 / 2012
Transaction ID : SA11AI.278766

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	55.45
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 302 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DAVID T. HARPER
Full Name (Last, First, Middle Initial)

Mailing Address 4427 Tacoma Avenue

City Lorain	State OH	Zip Code 44055
----------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		16		2012

Transaction ID : SA11AI.279124

Amount of Each Receipt this Period

10.00

B. ROLAND E. HARRINGTON JR.
Full Name (Last, First, Middle Initial)

Mailing Address 1248 Bermuda Avenue

City Marion	State OH	Zip Code 43302
----------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
214.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		19		2012

Transaction ID : SA11AI.278409

Amount of Each Receipt this Period

10.00

C. ROLAND E. HARRINGTON JR.
Full Name (Last, First, Middle Initial)

Mailing Address 1248 Bermuda Avenue

City Marion	State OH	Zip Code 43302
----------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2012

Transaction ID : SA11AI.278767

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 303 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ROLAND E. HARRINGTON JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1248 Bermuda Avenue
 City Marion State OH Zip Code 43302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **234.00**

Date of Receipt **11 / 16 / 2012**
Transaction ID : SA11AI.279125
 Amount of Each Receipt this Period **10.00**

B. ALLISON HARRIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1045 84th Avenue
 City Oakland State CA Zip Code 94621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation FIELD OFFICE ASSISTANT I
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **208.00**

Date of Receipt **11 / 15 / 2012**
Transaction ID : SA11AI.276608
 Amount of Each Receipt this Period **10.00**

C. LORA HARRIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 265 Forest Blvd
 City Park Forest State IL Zip Code 60466-1750
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **707.60**

Date of Receipt **11 / 01 / 2012**
Transaction ID : SA11AI.279546
 Amount of Each Receipt this Period **70.76**

SUBTOTAL of Receipts This Page (optional).....	90.76
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: (check only one)	PAGE 304 OF 846
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input 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

Full Name (Last, First, Middle Initial) A. MARTIN HARRIS		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2012 Transaction ID : SA11AI.276859
Mailing Address 1212 Jefferson St., SE Suite 300		Amount of Each Receipt this Period 10.50
City Olympia	State WA Zip Code 98501	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 210.00
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MARTIN HARRIS		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2012 Transaction ID : SA11AI.277150
Mailing Address 1212 Jefferson St., SE Suite 300		Amount of Each Receipt this Period 10.50
City Olympia	State WA Zip Code 98501	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 220.50
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MARTIN HARRIS		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11AI.277734
Mailing Address 1212 Jefferson St., SE Suite 300		Amount of Each Receipt this Period 10.50
City Olympia	State WA Zip Code 98501	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 231.00
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	31.50
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 305 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. RYAN HARRIS		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 25 / 2012 Transaction ID : SA11AI.276860
Mailing Address 1212 Jefferson St., SE Suite 300		Amount of Each Receipt this Period 10.50
City Olympia	State WA Zip Code 98501	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 210.00
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. RYAN HARRIS		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 09 / 2012 Transaction ID : SA11AI.277151
Mailing Address 1212 Jefferson St., SE Suite 300		Amount of Each Receipt this Period 10.50
City Olympia	State WA Zip Code 98501	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 220.50
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. RYAN HARRIS		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11AI.277735
Mailing Address 1212 Jefferson St., SE Suite 300		Amount of Each Receipt this Period 10.50
City Olympia	State WA Zip Code 98501	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 231.00
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	31.50
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 306 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. SHARON L. HARRIS
Full Name (Last, First, Middle Initial)

Mailing Address 677 E. 4th Avenue

City Columbus	State OH	Zip Code 43201
------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation BUS DRIVER
---	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **575.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2012

Transaction ID : SA11AI.280269

Amount of Each Receipt this Period

25.00

B. SHARON L. HARRIS
Full Name (Last, First, Middle Initial)

Mailing Address 677 E. 4th Avenue

City Columbus	State OH	Zip Code 43201
------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation BUS DRIVER
---	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2012

Transaction ID : SA11AI.280299

Amount of Each Receipt this Period

25.00

C. SHARON L. HARRIS
Full Name (Last, First, Middle Initial)

Mailing Address 677 E. 4th Avenue

City Columbus	State OH	Zip Code 43201
------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation BUS DRIVER
---	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **625.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.280329

Amount of Each Receipt this Period

25.00

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 307 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. STEPHANIE HARRISON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1640 Upshur Street NW
 City Washington State DC Zip Code 20011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation DIRECTOR, HUMAN RESOURCES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1294.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276414
 Amount of Each Receipt this Period 62.60

B. STEPHANIE HARRISON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1640 Upshur Street NW
 City Washington State DC Zip Code 20011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation DIRECTOR, HUMAN RESOURCES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1356.60

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276609
 Amount of Each Receipt this Period 62.60

C. TIMOTHY B. HARRITY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2034 Marlwood Drive
 City Somerset State PA Zip Code 15501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279727
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.20
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 308 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JANE N HART			Date of Receipt
Mailing Address 6907 Taylor Road			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276415
Sauk City	WI	53583	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="22.75"/>
Name of Employer	Occupation		
AFSCME INT'L	FIELD OFFICE ASSISTANT II		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="449.48"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. JANE N HART			Date of Receipt
Mailing Address 6907 Taylor Road			<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276610
Sauk City	WI	53583	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="22.75"/>
Name of Employer	Occupation		
AFSCME INT'L	FIELD OFFICE ASSISTANT II		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="472.23"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MICHAEL HARTEL			Date of Receipt
Mailing Address 4531 6th Street			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.278158
Minneapolis	MN	55421-2234	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="40.00"/>
Name of Employer	Occupation		
AFSCME MN CN 5/STATE OF MN	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="460.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="85.50"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 309 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JAMES A. HARTLE		Date of Receipt
Mailing Address 3172 Schell Drive		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City Marion State OH Zip Code 43302		Transaction ID : SA11AI.278410
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="12.00"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="282.00"/>	

Full Name (Last, First, Middle Initial) B. JAMES A. HARTLE		Date of Receipt
Mailing Address 3172 Schell Drive		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City Marion State OH Zip Code 43302		Transaction ID : SA11AI.278768
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="12.00"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="294.00"/>	

Full Name (Last, First, Middle Initial) C. JAMES A. HARTLE		Date of Receipt
Mailing Address 3172 Schell Drive		<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City Marion State OH Zip Code 43302		Transaction ID : SA11AI.279126
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="12.00"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="306.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="36.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 310 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. ANDREW A. HARTSEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 Park Avenue
 City London State OH Zip Code 43140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278411
 Amount of Each Receipt this Period
 20.00

B. ANDREW A. HARTSEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 Park Avenue
 City London State OH Zip Code 43140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278769
 Amount of Each Receipt this Period
 20.00

C. ANDREW A. HARTSEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 Park Avenue
 City London State OH Zip Code 43140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279127
 Amount of Each Receipt this Period
 20.00

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 311 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. RAYDENE HARWICK
Full Name (Last, First, Middle Initial)

Mailing Address 2101-27 Hill Road
Apt. #1

City Sellersville State PA Zip Code 18960

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
837.21

Date of Receipt
11 / 14 / 2012
Transaction ID : SA11AI.279647

Amount of Each Receipt this Period
62.56

B. DAVID HASLETT
Full Name (Last, First, Middle Initial)

Mailing Address 4031 Executive Park Drive

City Harrisburg State PA Zip Code 17111

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
485.12

Date of Receipt
11 / 14 / 2012
Transaction ID : SA11AI.279648

Amount of Each Receipt this Period
46.96

C. MICHAEL D. HATCHER
Full Name (Last, First, Middle Initial)

Mailing Address 1981 Hogback Road

City Albany State KY Zip Code 42602

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

Name of Employer AFSCME INT'L Occupation ASSISTANT TO REGIONAL DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
223.20

Date of Receipt
10 / 31 / 2012
Transaction ID : SA11AI.276416

Amount of Each Receipt this Period
44.64

SUBTOTAL of Receipts This Page (optional)..... ▶ 154.16

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 312 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. MICHAEL D. HATCHER		Date of Receipt
Mailing Address 1981 Hogback Road		M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2012
City Albany	State KY	Zip Code 42602
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.276611
Name of Employer AFSCME INT'L		Amount of Each Receipt this Period
Occupation ASSISTANT TO REGIONAL DIRECTOR		45.87
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	269.07	

Full Name (Last, First, Middle Initial) B. JANET L HATFIELD		Date of Receipt
Mailing Address 201 NW 52nd Street		M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2012
City Vancouver	State WA	Zip Code 98663
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.276861
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		13.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	270.00	

Full Name (Last, First, Middle Initial) C. JANET L HATFIELD		Date of Receipt
Mailing Address 201 NW 52nd Street		M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2012
City Vancouver	State WA	Zip Code 98663
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.277152
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		13.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	283.50	

SUBTOTAL of Receipts This Page (optional).....▶	72.87
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 313 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JANET L HATFIELD
Full Name (Last, First, Middle Initial)

Mailing Address 201 NW 52nd Street

City Vancouver State WA Zip Code 98663

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 297.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277736

Amount of Each Receipt this Period 13.50

B. KAREN HATHAWAY
Full Name (Last, First, Middle Initial)

Mailing Address 29 Jenny Lind Street

City Taunton State MA Zip Code 02780-0000

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

Name of Employer AFSCME MA CN 93 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 495.06

Date of Receipt 11 / 07 / 2012
Transaction ID : SA11AI.280011

Amount of Each Receipt this Period 40.46

C. JAMES HAUENSTEIN
Full Name (Last, First, Middle Initial)

Mailing Address 390 Worthington Road

City Westerville State OH Zip Code 43082

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

Name of Employer AFSCME OH LOC 11 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 24 / 2012
Transaction ID : SA11AI.280109

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 73.96

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 314 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. JANET L. HAYES
 Full Name (Last, First, Middle Initial)
 Mailing Address 1204 4th Avenue SE
 City Puyallup State WA Zip Code 98372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 219.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2012
Transaction ID : SA11AI.276863
 Amount of Each Receipt this Period
 10.00

B. JANET L. HAYES
 Full Name (Last, First, Middle Initial)
 Mailing Address 1204 4th Avenue SE
 City Puyallup State WA Zip Code 98372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 229.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277154
 Amount of Each Receipt this Period
 10.00

C. JANET L. HAYES
 Full Name (Last, First, Middle Initial)
 Mailing Address 1204 4th Avenue SE
 City Puyallup State WA Zip Code 98372
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 239.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277738
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 315 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ALISON HAYGOOD
Full Name (Last, First, Middle Initial)

Mailing Address 190 W. Ostend Street
Suite 101

City Baltimore State MD Zip Code 21230

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

Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 430.76

Date of Receipt
11 / 05 / 2012
Transaction ID : SA11AI.279982

Amount of Each Receipt this Period
39.16

B. JIMMIE HEARNS
Full Name (Last, First, Middle Initial)

Mailing Address 18509 Mendota

City Detroit State MI Zip Code 48221

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 760.41

Date of Receipt
11 / 07 / 2012
Transaction ID : SA11AI.279876

Amount of Each Receipt this Period
36.21

C. JIMMIE HEARNS
Full Name (Last, First, Middle Initial)

Mailing Address 18509 Mendota

City Detroit State MI Zip Code 48221

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 796.62

Date of Receipt
11 / 20 / 2012
Transaction ID : SA11AI.279926

Amount of Each Receipt this Period
36.21

SUBTOTAL of Receipts This Page (optional)..... ▶ 111.58

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 316 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MARK HEDBERG
Full Name (Last, First, Middle Initial)

Mailing Address 4320 NW Second Avenue

City Des Moines	State IA	Zip Code 50313
--------------------	-------------	-------------------

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

Name of Employer AFSCME IA CN 61	Occupation STAFF REPRESENTATIVE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
229.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2012

Transaction ID : SA11AI.280076

Amount of Each Receipt this Period
20.84

B. VICTORIA A. HELLMAN
Full Name (Last, First, Middle Initial)

Mailing Address 7056 SE Pine Street

City Portland	State OR	Zip Code 97215
------------------	-------------	-------------------

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

Name of Employer AFSCME OR CN 75/STATE OF OR	Occupation ATTORNEY
---	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.277972

Amount of Each Receipt this Period
20.00

C. PHILIP W. HELMS
Full Name (Last, First, Middle Initial)

Mailing Address 4108 Menton

City Flint	State MI	Zip Code 48507
---------------	-------------	-------------------

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

Name of Employer AFSCME MI CN 25	Occupation EDITOR
-------------------------------------	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1140.51

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2012

Transaction ID : SA11AI.279877

Amount of Each Receipt this Period
54.31

SUBTOTAL of Receipts This Page (optional).....	95.15
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 317 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. PHILIP W. HELMS

Mailing Address 4108 Menton

City State Zip Code
 Flint MI 48507

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

Name of Employer Occupation
 AFSCME MI CN 25 EDITOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1194.82

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2012
Transaction ID : SA11AI.279927

Amount of Each Receipt this Period
 54.31

Full Name (Last, First, Middle Initial)
B. RENITA L. HELTON

Mailing Address 2025 W Galbraith Road
 Apt. E

City State Zip Code
 Cincinnati OH 45239

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

Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH SECRETARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278413

Amount of Each Receipt this Period
 11.00

Full Name (Last, First, Middle Initial)
C. RENITA L. HELTON

Mailing Address 2025 W Galbraith Road
 Apt. E

City State Zip Code
 Cincinnati OH 45239

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

Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH SECRETARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 242.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278771

Amount of Each Receipt this Period
 11.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 76.31

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 318 OF 846
	<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	<input 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

A. RENITA L. HELTON
Full Name (Last, First, Middle Initial)

Mailing Address 2025 W Galbraith Road
Apt. E

City Cincinnati State OH Zip Code 45239

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation SECRETARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 253.00

Date of Receipt
11 / 16 / 2012
Transaction ID : SA11AI.279129

Amount of Each Receipt this Period
11.00

B. CAT D. HENDERSON
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277155

Amount of Each Receipt this Period
10.00

C. CAT D. HENDERSON
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277739

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶ 31.00

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 319 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DAVID J. HENDERSON
Full Name (Last, First, Middle Initial)

Mailing Address 2040 Spring Valley Road

City Pittsburgh State PA Zip Code 15243-1422

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1387.77

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.279650

Amount of Each Receipt this Period
 115.68

B. KAY HENDERSON
Full Name (Last, First, Middle Initial)

Mailing Address 624 S. Winnifred Street

City Tacoma State WA Zip Code 98465

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2012
Transaction ID : SA11AI.276865

Amount of Each Receipt this Period
 30.00

C. KAY HENDERSON
Full Name (Last, First, Middle Initial)

Mailing Address 624 S. Winnifred Street

City Tacoma State WA Zip Code 98465

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277156

Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional).....▶	175.68
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 320 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KAY HENDERSON
Full Name (Last, First, Middle Initial)

Mailing Address 624 S. Winnifred Street

City Tacoma State WA Zip Code 98465

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **660.00**

Date of Receipt **11 / 26 / 2012**

Transaction ID : SA11AI.277740

Amount of Each Receipt this Period **30.00**

B. TIMOTHY HENDERSON
Full Name (Last, First, Middle Initial)

Mailing Address 6987 W. Shadow Lake Drive

City Lino Lakes State MN Zip Code 55014-1931

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

Name of Employer AFSCME MN CN 5 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **484.87**

Date of Receipt **11 / 14 / 2012**

Transaction ID : SA11AI.280040

Amount of Each Receipt this Period **44.76**

C. WILMA HENDERSON
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 25 / 2012**

Transaction ID : SA11AI.276866

Amount of Each Receipt this Period **10.50**

SUBTOTAL of Receipts This Page (optional)..... **85.26**

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 321 OF 846
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. WILMA HENDERSON
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.50

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277157

Amount of Each Receipt this Period
10.50

B. WILMA HENDERSON
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277741

Amount of Each Receipt this Period
10.50

C. MONIQUE L. HENNAGAN
Full Name (Last, First, Middle Initial)

Mailing Address 505 Winter View Way

City Stockbridge State GA Zip Code 30281

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

Name of Employer AFSCME INT'L Occupation ORGANIZER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 329.11

Date of Receipt
10 / 31 / 2012
Transaction ID : SA11AI.276417

Amount of Each Receipt this Period
21.41

SUBTOTAL of Receipts This Page (optional)..... ► 42.41

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 322 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. MONIQUE L. HENNAGAN			Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2012 Transaction ID : SA11AI.276612
Mailing Address 505 Winter View Way			Amount of Each Receipt this Period 21.41
City Stockbridge	State GA	Zip Code 30281	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ORGANIZER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.52		

Full Name (Last, First, Middle Initial) B. SUSAN R. HENRICKSEN			Date of Receipt M M / D D / Y Y Y Y Y 10 / 25 / 2012 Transaction ID : SA11AI.276867
Mailing Address 16511 193rd Avenue E			Amount of Each Receipt this Period 21.00
City Bonney Lake	State WA	Zip Code 98391	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00		

Full Name (Last, First, Middle Initial) C. SUSAN R. HENRICKSEN			Date of Receipt M M / D D / Y Y Y Y Y 11 / 09 / 2012 Transaction ID : SA11AI.277158
Mailing Address 16511 193rd Avenue E			Amount of Each Receipt this Period 21.00
City Bonney Lake	State WA	Zip Code 98391	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 441.00		

SUBTOTAL of Receipts This Page (optional).....▶	63.41
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 323 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. SUSAN R. HENRICKSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 16511 193rd Avenue E
 City Bonney Lake State WA Zip Code 98391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 462.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277742
 Amount of Each Receipt this Period 21.00

B. MICHELLE C. HENRY
 Full Name (Last, First, Middle Initial)
 Mailing Address 5614 S 147th Street
 City Tukwila State WA Zip Code 98168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/COMM COLLEGE Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.277334
 Amount of Each Receipt this Period 15.00

C. MICHELLE C. HENRY
 Full Name (Last, First, Middle Initial)
 Mailing Address 5614 S 147th Street
 City Tukwila State WA Zip Code 98168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/COMM COLLEGE Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277345
 Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 51.00
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 324 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MICHELLE C. HENRY
Full Name (Last, First, Middle Initial)

Mailing Address 5614 S 147th Street

City Tukwila State WA Zip Code 98168

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

Name of Employer AFSCME WA CN 28/COMM COLLEGE Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 26 / 2012**

Transaction ID : SA11AI.277925

Amount of Each Receipt this Period **15.00**

B. JOHN HENSON
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 88593

City Steilacoom State WA Zip Code 98388

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **10 / 25 / 2012**

Transaction ID : SA11AI.276868

Amount of Each Receipt this Period **12.50**

C. JOHN HENSON
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 88593

City Steilacoom State WA Zip Code 98388

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **262.50**

Date of Receipt **11 / 09 / 2012**

Transaction ID : SA11AI.277159

Amount of Each Receipt this Period **12.50**

SUBTOTAL of Receipts This Page (optional)..... **40.00**

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 325 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOHN HENSON
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 88593

City Steilacoom State WA Zip Code 98388

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **11 / 26 / 2012**

Transaction ID : SA11AI.277743

Amount of Each Receipt this Period **12.50**

B. RICK HENSON
Full Name (Last, First, Middle Initial)

Mailing Address 317 South F Street

City Springfield State OR Zip Code 97477

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

Name of Employer AFSCME OR CN 75 Occupation COUNCIL REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.279362

Amount of Each Receipt this Period **85.00**

C. EMERALD HERNANDEZ
Full Name (Last, First, Middle Initial)

Mailing Address 1542 Presidential Dr.

City Columbus State OH Zip Code 46212

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

Name of Employer AFSCME OH LOC 11 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt **10 / 24 / 2012**

Transaction ID : SA11AI.280110

Amount of Each Receipt this Period **80.00**

SUBTOTAL of Receipts This Page (optional)..... **177.50**

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 326 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. SHERRY HEWITT
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson St., SE
 Suite 300
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2012
Transaction ID : SA11AI.276871
 Amount of Each Receipt this Period
 12.00

B. SHERRY HEWITT
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson St., SE
 Suite 300
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277162
 Amount of Each Receipt this Period
 12.00

C. SHERRY HEWITT
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson St., SE
 Suite 300
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277746
 Amount of Each Receipt this Period
 12.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 36.00
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 327 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)
A. DEBORAH C. HILL

Mailing Address 4021 E Street SE

City Washington State DC Zip Code 20019

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

Name of Employer AFSCME INT'L Occupation HUMAN RESOURCES ASSISTANT III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : SA11AI.276614

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. DENNIS HILL

Mailing Address 4 Hickory Street

City Farmington State MN Zip Code 55024-9124

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

Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1150.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.278161

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. KEVIN E. HILL

Mailing Address 541 Coconut Street

City Satellite Beach State FL Zip Code 32937

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

Name of Employer AFSCME INT'L Occupation FIELD COORDINATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **976.27**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.276420

Amount of Each Receipt this Period
51.37

SUBTOTAL of Receipts This Page (optional)..... ▶ **161.37**

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 328 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KEVIN E. HILL
Full Name (Last, First, Middle Initial)

Mailing Address 541 Coconut Street

City State Zip Code
Satellite Beach FL 32937

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

Name of Employer Occupation
AFSCME INT'L FIELD COORDINATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1027.64

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012
Transaction ID : SA11AI.276615

Amount of Each Receipt this Period
51.37

B. PHILLIP E. HILL
Full Name (Last, First, Middle Initial)

Mailing Address 3346 Heatherdowns Blvd.

City State Zip Code
Toledo OH 43614

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

Name of Employer Occupation
AFSCME OH LOC 11/STATE OF OH JUVENILE CORRECTION OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 19 / 2012
Transaction ID : SA11AI.278417

Amount of Each Receipt this Period
10.00

C. PHILLIP E. HILL
Full Name (Last, First, Middle Initial)

Mailing Address 3346 Heatherdowns Blvd.

City State Zip Code
Toledo OH 43614

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

Name of Employer Occupation
AFSCME OH LOC 11/STATE OF OH JUVENILE CORRECTION OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2012
Transaction ID : SA11AI.278775

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 71.37

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 329 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. PHILLIP E. HILL
Full Name (Last, First, Middle Initial)

Mailing Address 3346 Heatherdowns Blvd.

City Toledo	State OH	Zip Code 43614
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation JUVENILE CORRECTION OFFICER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279133

Amount of Each Receipt this Period
 10.00

B. MATT HILTON
Full Name (Last, First, Middle Initial)

Mailing Address 1418 SW Moss Street

City Portland	State OR	Zip Code 97219
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OR CN 75/STATE OF OR	Occupation STAFF REPRESENTATIVE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.277974

Amount of Each Receipt this Period
 22.00

C. SEAN HINGA
Full Name (Last, First, Middle Initial)

Mailing Address 3137 Fulton Street

City Denver	State CO	Zip Code 80238
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation POLITICAL ACTION REPRESENTATIVE III
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
774.77

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276421

Amount of Each Receipt this Period
 39.15

SUBTOTAL of Receipts This Page (optional).....▶	71.15
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 330 OF 846
	<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	<input 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

Full Name (Last, First, Middle Initial) A. SEAN HINGA		Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2012 Transaction ID : SA11AI.276616
Mailing Address 3137 Fulton Street		Amount of Each Receipt this Period 39.15
City Denver	State CO	Zip Code 80238
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation POLITICAL ACTION REPRESENTATIVE III	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 813.92	

Full Name (Last, First, Middle Initial) B. THOMAS C. HINKLE		Date of Receipt M M / D D / Y Y Y Y Y 10 / 19 / 2012 Transaction ID : SA11AI.278418
Mailing Address P.O. Box 600		Amount of Each Receipt this Period 20.00
City Orwell	State OH	Zip Code 44076
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) C. THOMAS C. HINKLE		Date of Receipt M M / D D / Y Y Y Y Y 11 / 02 / 2012 Transaction ID : SA11AI.278776
Mailing Address P.O. Box 600		Amount of Each Receipt this Period 20.00
City Orwell	State OH	Zip Code 44076
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

SUBTOTAL of Receipts This Page (optional).....▶	79.15
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 331 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. THOMAS C. HINKLE
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 600

City Orwell State OH Zip Code 44076

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt **11 / 16 / 2012**
Transaction ID : **SA11AI.279134**

Amount of Each Receipt this Period **20.00**

B. CLARICE D. HINRICHS
Full Name (Last, First, Middle Initial)

Mailing Address 4909 Gordon Avenue Apt. 314

City Monona State WI Zip Code 53716

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

Name of Employer AFSCME INT'L Occupation FIELD OFFICE ASSISTANT I

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **299.99**

Date of Receipt **10 / 31 / 2012**
Transaction ID : **SA11AI.276422**

Amount of Each Receipt this Period **6.44**

C. SAMUEL L. HISLE
Full Name (Last, First, Middle Initial)

Mailing Address 3660 Third Avenue

City Grove City State OH Zip Code 43123

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation CUSTODIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **575.00**

Date of Receipt **10 / 29 / 2012**
Transaction ID : **SA11AI.280270**

Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional)..... **51.44**

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 332 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. SAMUEL L. HISLE			Date of Receipt																				
Mailing Address 3660 Third Avenue			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>11</td><td></td><td></td><td>13</td><td></td><td></td><td>2012</td><td></td><td></td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	11			13			2012			
M	M	/	D	D	/	Y	Y	Y	Y														
11			13			2012																	
City	State	Zip Code	Transaction ID : SA11AI.280300																				
Grove City	OH	43123	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.	C		25.00																				
Name of Employer	Occupation																						
AFSCME OH LOC 4/COLUMBUS CITY	CUSTODIAN																						
Receipt For:	Aggregate Year-to-Date ▼																						
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	600.00																						

Full Name (Last, First, Middle Initial) B. SAMUEL L. HISLE			Date of Receipt																				
Mailing Address 3660 Third Avenue			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>11</td><td></td><td></td><td>26</td><td></td><td></td><td>2012</td><td></td><td></td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	11			26			2012			
M	M	/	D	D	/	Y	Y	Y	Y														
11			26			2012																	
City	State	Zip Code	Transaction ID : SA11AI.280330																				
Grove City	OH	43123	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.	C		25.00																				
Name of Employer	Occupation																						
AFSCME OH LOC 4/COLUMBUS CITY	CUSTODIAN																						
Receipt For:	Aggregate Year-to-Date ▼																						
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	625.00																						

Full Name (Last, First, Middle Initial) C. ELIZABETH C. HO			Date of Receipt																				
Mailing Address 1511 Kalaniewai Street			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>10</td><td></td><td></td><td>31</td><td></td><td></td><td>2012</td><td></td><td></td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	10			31			2012			
M	M	/	D	D	/	Y	Y	Y	Y														
10			31			2012																	
City	State	Zip Code	Transaction ID : SA11AI.276423																				
Honolulu	HI	96821	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.	C		46.26																				
Name of Employer	Occupation																						
AFSCME INT'L	AREA FIELD SERVICES DIRECTOR																						
Receipt For:	Aggregate Year-to-Date ▼																						
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	1041.20																						

SUBTOTAL of Receipts This Page (optional).....▶	96.26
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 333 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. ELIZABETH C. HO			Date of Receipt
Mailing Address 1511 Kalaniewai Street			<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276617
Honolulu	HI	96821	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="46.26"/>
Name of Employer	Occupation		
AFSCME INT'L	AREA FIELD SERVICES DIRECTOR		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1087.46"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MARGARET HOAK			Date of Receipt
Mailing Address P.O. Box 264			<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279652
Warren	PA	16365	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="75.26"/>
Name of Employer	Occupation		
AFSCME PA CN 13	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="822.68"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. KARLA HODGE			Date of Receipt
Mailing Address 1212 N. 14th Street			<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279653
Harrisburg	PA	17103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="73.16"/>
Name of Employer	Occupation		
AFSCME PA CN 13	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="804.76"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="194.68"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 334 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MONIQUE P. HODGES
 Full Name (Last, First, Middle Initial)
 Mailing Address 3346 Craig Drive #K244
 City Hammond State IN Zip Code 46323
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31/STATE OF IL Occupation ADMIN ASSISTANT II
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **211.42**

Date of Receipt **11 / 01 / 2012**
Transaction ID : SA11AI.279423
 Amount of Each Receipt this Period **19.22**

B. MARY A. HODGSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1306 S. 6th Street
 City Springfield State IL Zip Code 62703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31/STATE OF IL Occupation OFFICE SPECIALIST
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **218.82**

Date of Receipt **11 / 01 / 2012**
Transaction ID : SA11AI.279424
 Amount of Each Receipt this Period **31.26**

C. DONNA L. HOF LAND
 Full Name (Last, First, Middle Initial)
 Mailing Address 4032 Division Avenue W
 City Bremerton State WA Zip Code 98312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation SUPPLY OFFICE I
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **460.00**

Date of Receipt **10 / 25 / 2012**
Transaction ID : SA11AI.276873
 Amount of Each Receipt this Period **23.00**

SUBTOTAL of Receipts This Page (optional)..... **73.48**
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 335 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DONNA L. HOFLAND
Full Name (Last, First, Middle Initial)

Mailing Address 4032 Division Avenue W

City State Zip Code
Bremerton WA 98312

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

Name of Employer Occupation
AFSCME WA CN 28/STATE OF WA SUPPLY OFFICE I

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **483.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2012

Transaction ID : SA11AI.277164

Amount of Each Receipt this Period
23.00

B. DONNA L. HOFLAND
Full Name (Last, First, Middle Initial)

Mailing Address 4032 Division Avenue W

City State Zip Code
Bremerton WA 98312

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

Name of Employer Occupation
AFSCME WA CN 28/STATE OF WA SUPPLY OFFICE I

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **506.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.277748

Amount of Each Receipt this Period
23.00

C. KAREN S HOLDRIDGE
Full Name (Last, First, Middle Initial)

Mailing Address 3511 Huntingbrook Drive #207

City State Zip Code
Columbus OH 43213

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

Name of Employer Occupation
AFSCME OH LOC 4/COLUMBUS CITY BUS DRIVER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **575.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 29 / 2012

Transaction ID : SA11AI.280271

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... **71.00**

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 336 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KAREN S HOLDRIDGE
 Full Name (Last, First, Middle Initial)
 Mailing Address 3511 Huntingbrook Drive #207
 City Columbus State OH Zip Code 43213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation BUS DRIVER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **600.00**

Date of Receipt **11 / 13 / 2012**
Transaction ID : SA11AI.280301
 Amount of Each Receipt this Period **25.00**

B. KAREN S HOLDRIDGE
 Full Name (Last, First, Middle Initial)
 Mailing Address 3511 Huntingbrook Drive #207
 City Columbus State OH Zip Code 43213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation BUS DRIVER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **625.00**

Date of Receipt **11 / 26 / 2012**
Transaction ID : SA11AI.280331
 Amount of Each Receipt this Period **25.00**

C. THOMAS M. HOLSINGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1014 Franklin Street
 City Roaring Spring State PA Zip Code 16673
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **330.00**

Date of Receipt **10 / 31 / 2012**
Transaction ID : SA11AI.279731
 Amount of Each Receipt this Period **30.00**

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: (check only one)	PAGE 337 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. COLLEEN HOMAN		Date of Receipt
Mailing Address 6515 Forest Court		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/>
City Windsor Heights State IA Zip Code 50324		Transaction ID : SA11AI.280077
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer AFSCME IA CN 61 Occupation DELEGATE		<input type="text" value="200.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="497.00"/>	

Full Name (Last, First, Middle Initial) B. DANNY J. HOMAN		Date of Receipt
Mailing Address 4320 NW Second Avenue		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City Des Moines State IA Zip Code 50313		Transaction ID : SA11AI.276325
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer AFSCME IA CN 61 Occupation PRESIDENT		<input type="text" value="70.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="1500.00"/>	

Full Name (Last, First, Middle Initial) C. DANNY J. HOMAN		Date of Receipt
Mailing Address 4320 NW Second Avenue		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/>
City Des Moines State IA Zip Code 50313		Transaction ID : SA11AI.280078
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer AFSCME IA CN 61 Occupation PRESIDENT		<input type="text" value="80.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="1580.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="170.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 338 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. FRANCINE W. HONDA
 Full Name (Last, First, Middle Initial)
 Mailing Address 888 Mililani Street
 Suite 601
 City Honolulu State HI Zip Code 96813-2991
 Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.280414
 Amount of Each Receipt this Period 25.00

B. CHRISTOPHER HOOSER
 Full Name (Last, First, Middle Initial)
 Mailing Address 615 South Second Street
 City Decatur State IL Zip Code 62526
 Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 292.92

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279547
 Amount of Each Receipt this Period 34.44

C. JOHN D. HORN
 Full Name (Last, First, Middle Initial)
 Mailing Address 8615 Maineville Road
 City Maineville State OH Zip Code 45039
 Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 404.04

Date of Receipt 10 / 24 / 2012
Transaction ID : SA11AI.280173
 Amount of Each Receipt this Period 19.24

SUBTOTAL of Receipts This Page (optional)..... ▶ 78.68
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 339 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOHN D. HORN
Full Name (Last, First, Middle Initial)

Mailing Address 8615 Maineville Road

City Maineville State OH Zip Code 45039

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

Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **423.28**

Date of Receipt **11 / 06 / 2012**

Transaction ID : SA11AI.280228

Amount of Each Receipt this Period **19.24**

B. DEANNA M. HORNE
Full Name (Last, First, Middle Initial)

Mailing Address 1214 SE Umatilla Street

City Portland State OR Zip Code 97202

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

Name of Employer AFSCME OR CN 75/STATE OF OR Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.277976

Amount of Each Receipt this Period **20.00**

C. TIMOTHY M. HOSHAL
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 239

City Coleraine State MN Zip Code 55722

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

Name of Employer AFSCME MN CN 65 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **724.68**

Date of Receipt **11 / 07 / 2012**

Transaction ID : SA11AI.280375

Amount of Each Receipt this Period **65.88**

SUBTOTAL of Receipts This Page (optional)..... **105.12**

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 340 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CHRISTINE R. HOSKINS
Full Name (Last, First, Middle Initial)

Mailing Address 8306 James Street

City Upper Marlboro State MD Zip Code 20772

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

Name of Employer AFSCME INT'L Occupation MEMBER SERVICES COORDINATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 793.02

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276424

Amount of Each Receipt this Period 40.38

B. CHRISTINE R. HOSKINS
Full Name (Last, First, Middle Initial)

Mailing Address 8306 James Street

City Upper Marlboro State MD Zip Code 20772

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

Name of Employer AFSCME INT'L Occupation MEMBER SERVICES COORDINATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 833.40

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276618

Amount of Each Receipt this Period 40.38

C. MICHAEL J. HOUSE
Full Name (Last, First, Middle Initial)

Mailing Address 1400 Tandem Avenue NE

City Salem State OR Zip Code 97301

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

Name of Employer AFSCME OR CN 75/STATE OF OR Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.277977

Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.76

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 341 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. DONNA R. HOWARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2462 Meredith Drive
 City Columbus State OH Zip Code 43219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CUSTOMER SERVICE ASSOCIATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278425
 Amount of Each Receipt this Period
 10.00

B. DONNA R. HOWARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2462 Meredith Drive
 City Columbus State OH Zip Code 43219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CUSTOMER SERVICE ASSOCIATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278783
 Amount of Each Receipt this Period
 10.00

C. DONNA R. HOWARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2462 Meredith Drive
 City Columbus State OH Zip Code 43219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CUSTOMER SERVICE ASSOCIATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279141
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 342 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. MARQUETTA L. HOWARD		Date of Receipt
Mailing Address 6662 Bennell Drive		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City	State	Zip Code
Reynoldsburg	OH	43068
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.278426
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME OH LOC 11/STATE OF OH	OFFICE ASSISTANT I	<input type="text" value="10.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="210.00"/>	

Full Name (Last, First, Middle Initial) B. MARQUETTA L. HOWARD		Date of Receipt
Mailing Address 6662 Bennell Drive		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Zip Code
Reynoldsburg	OH	43068
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.278784
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME OH LOC 11/STATE OF OH	OFFICE ASSISTANT I	<input type="text" value="10.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) C. MARQUETTA L. HOWARD		Date of Receipt
Mailing Address 6662 Bennell Drive		<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City	State	Zip Code
Reynoldsburg	OH	43068
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.279142
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME OH LOC 11/STATE OF OH	OFFICE ASSISTANT I	<input type="text" value="10.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="230.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="30.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

**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 343 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. RONALD J. HOWARD
Full Name (Last, First, Middle Initial)

Mailing Address 2002 SW Willow Pkwy.

City Gresham State OR Zip Code 97080

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

Name of Employer AFSCME OR CN 75/STATE OF OR Occupation OFFICE SPECIALIST 2

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.277978

Amount of Each Receipt this Period
 200.00

B. GLORIA J HOWELL
Full Name (Last, First, Middle Initial)

Mailing Address 1801 E Dunedin Road

City Columbus State OH Zip Code 43224

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation CUSTODIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 327.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2012
Transaction ID : SA11AI.280272

Amount of Each Receipt this Period
 12.50

C. GLORIA J HOWELL
Full Name (Last, First, Middle Initial)

Mailing Address 1801 E Dunedin Road

City Columbus State OH Zip Code 43224

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation CUSTODIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2012
Transaction ID : SA11AI.280302

Amount of Each Receipt this Period
 12.50

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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 344 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. GLORIA J HOWELL		Date of Receipt
Mailing Address 1801 E Dunedin Road		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code
Columbus	OH	43224
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.280332
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME OH LOC 4/COLUMBUS CITY	CUSTODIAN	<input type="text" value="12.50"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="352.50"/>	

Full Name (Last, First, Middle Initial) B. MELANIE S. HOYLE		Date of Receipt
Mailing Address P.O. Box 2331		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City	State	Zip Code
Springfield	IL	62705
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.279426
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME IL CN 31/STATE OF IL	ADMIN ASSISTANT I	<input type="text" value="67.44"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="472.08"/>	

Full Name (Last, First, Middle Initial) C. ROBERT J. HUBBARD		Date of Receipt
Mailing Address 55 Pioneer Road		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Weiser	ID	83672
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.277979
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME OR CN 75/STATE OF OR	SECURITY GUARD	<input type="text" value="40.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="420.82"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="119.94"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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 345 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. REGINA G. HUDSON			Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300			<input type="text" value="M M"/> / <input type="text" value="D D"/> / <input type="text" value="Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.276876
Olympia	WA	98501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="12.00"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. REGINA G. HUDSON			Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300			<input type="text" value="M M"/> / <input type="text" value="D D"/> / <input type="text" value="Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.277167
Olympia	WA	98501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="12.00"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="252.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. REGINA G. HUDSON			Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300			<input type="text" value="M M"/> / <input type="text" value="D D"/> / <input type="text" value="Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.277751
Olympia	WA	98501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="12.00"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="264.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="36.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 346 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. RONALD HUDSON		Date of Receipt
Mailing Address 29 N Wacker		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City	State	Zip Code
Chicago	IL	60606
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.279548
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="60.80"/>
Name of Employer	Occupation	
AFSCME IL CN 31	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="592.30"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. ELIZABETH K. HUFFMAN		Date of Receipt
Mailing Address 7429 Inman Ave South		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Cottage Grove	MN	55016
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.276425
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="17.02"/>
Name of Employer	Occupation	
AFSCME INT'L	FIELD OFFICE ASSISTANT I	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="332.76"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. ELIZABETH K. HUFFMAN		Date of Receipt
Mailing Address 7429 Inman Ave South		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Cottage Grove	MN	55016
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.276619
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="17.02"/>
Name of Employer	Occupation	
AFSCME INT'L	FIELD OFFICE ASSISTANT I	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="349.78"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="94.84"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 347 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. SAMUEL M. HUGGINS
 Full Name (Last, First, Middle Initial)
 Mailing Address 235 Scenic Hill Drive
 City Carnegie State PA Zip Code 15106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation REGIONAL FIELD ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 390.69

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276426
 Amount of Each Receipt this Period 33.34

B. SAMUEL M. HUGGINS
 Full Name (Last, First, Middle Initial)
 Mailing Address 235 Scenic Hill Drive
 City Carnegie State PA Zip Code 15106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation REGIONAL FIELD ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 424.03

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276620
 Amount of Each Receipt this Period 33.34

C. JACK E. HUGHES
 Full Name (Last, First, Middle Initial)
 Mailing Address 190 W. Ostend Street Suite 101
 City Baltimore State MD Zip Code 21230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 559.24

Date of Receipt 11 / 05 / 2012
Transaction ID : SA11AI.279984
 Amount of Each Receipt this Period 50.84

SUBTOTAL of Receipts This Page (optional)..... ▶ 117.52
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 348 OF 846
	(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"/> 17	<input 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

Full Name (Last, First, Middle Initial) A. JEFFREY HUGHES			Date of Receipt M M / D D / Y Y Y Y Y 11 / 05 / 2012 Transaction ID : SA11AI.279985		
Mailing Address 190 W. Ostend Street Suite 101			Amount of Each Receipt this Period 56.84		
City Baltimore	State MD	Zip Code 21230			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME MD CN 982		Occupation STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 625.24			

Full Name (Last, First, Middle Initial) B. CHUNG HUI			Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2012 Transaction ID : SA11AI.276427		
Mailing Address 21235 Bunyan Circle			Amount of Each Receipt this Period 41.33		
City Germantown	State MD	Zip Code 20876			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME INT'L		Occupation POLITICAL FINANCE COORDINATOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 826.60			

Full Name (Last, First, Middle Initial) C. CHUNG HUI			Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2012 Transaction ID : SA11AI.276621		
Mailing Address 21235 Bunyan Circle			Amount of Each Receipt this Period 41.33		
City Germantown	State MD	Zip Code 20876			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME INT'L		Occupation POLITICAL FINANCE COORDINATOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 867.93			

SUBTOTAL of Receipts This Page (optional).....▶	139.50
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 349 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DAN HUNT
Full Name (Last, First, Middle Initial)

Mailing Address 35992 Woodbridge Circle #8

City Farmington Hills State MI Zip Code 48535

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.50

Date of Receipt 11 / 07 / 2012
Transaction ID : SA11AI.279878

Amount of Each Receipt this Period 10.50

B. DAN HUNT
Full Name (Last, First, Middle Initial)

Mailing Address 35992 Woodbridge Circle #8

City Farmington Hills State MI Zip Code 48535

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt 11 / 20 / 2012
Transaction ID : SA11AI.279928

Amount of Each Receipt this Period 10.50

C. MICHELLE R. HUNTER
Full Name (Last, First, Middle Initial)

Mailing Address 436 S. Kilmer Street

City Dayton State OH Zip Code 45408

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation THERAPUTIC PROGRAM TECH

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278430

Amount of Each Receipt this Period 11.00

SUBTOTAL of Receipts This Page (optional).....▶ 32.00

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 350 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. MICHELLE R. HUNTER		Date of Receipt
Mailing Address 436 S. Kilmer Street		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City State Zip Code Dayton OH 45408		Transaction ID : SA11AI.278788
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="11.00"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation THERAPUTIC PROGRAM TECH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="242.00"/>	

Full Name (Last, First, Middle Initial) B. MICHELLE R. HUNTER		Date of Receipt
Mailing Address 436 S. Kilmer Street		<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City State Zip Code Dayton OH 45408		Transaction ID : SA11AI.279146
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="11.00"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation THERAPUTIC PROGRAM TECH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="253.00"/>	

Full Name (Last, First, Middle Initial) C. DEBBIE L. HUSSEY		Date of Receipt
Mailing Address 13944 Venice Court		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City State Zip Code Oregon City OR 97045		Transaction ID : SA11AI.277981
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer AFSCME OR CN 75/STATE OF OR	Occupation EMERG COMMUN DISPATC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="273.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="42.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 351 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. DOUGLAS B. INMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2490 Wilshire Road
 City Cortland State OH Zip Code 44410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278431
 Amount of Each Receipt this Period
 10.00

B. DOUGLAS B. INMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2490 Wilshire Road
 City Cortland State OH Zip Code 44410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278789
 Amount of Each Receipt this Period
 10.00

C. DOUGLAS B. INMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2490 Wilshire Road
 City Cortland State OH Zip Code 44410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279147
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 352 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CARLA INSINGA-MINSER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4287 South Carolina Drive
 City State Zip Code
 Blue Ridge PA 17112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME PA CN 13 ORGANIZING DIRECTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1335.26

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.279654
 Amount of Each Receipt this Period
 98.18

B. ANNE IRVING
 Full Name (Last, First, Middle Initial)
 Mailing Address 5243 N. Lind Avenue
 City State Zip Code
 Chicago IL 60630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME IL CN 31 DIRECTOR OF PUBLIC POLICY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 733.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.279549
 Amount of Each Receipt this Period
 73.34

C. LISA L. IRWIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 402 Hamilton Street
 City State Zip Code
 McKees Rock PA 15136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME PA CN 13/STATE OF PA TUNNEL MANAGER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 307.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.279733
 Amount of Each Receipt this Period
 12.00

SUBTOTAL of Receipts This Page (optional).....▶	183.52
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 353 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. RUSSELL H. IRWIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 952 N. 1st Street
 City Springfield State IL Zip Code 62702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31/STATE OF IL Occupation ENVIRONMENTALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.279429
 Amount of Each Receipt this Period
 50.00

B. WILLIAM ISLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 7708 Quest Lane
 City Bowie State MD Zip Code 20720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation MANAGER, GENERAL SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276428
 Amount of Each Receipt this Period
 42.52

C. WILLIAM ISLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 7708 Quest Lane
 City Bowie State MD Zip Code 20720
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation MANAGER, GENERAL SERVICES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 892.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : SA11AI.276622
 Amount of Each Receipt this Period
 42.52

SUBTOTAL of Receipts This Page (optional)..... ▶ 135.04
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 354 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. GNA M. ISON
Full Name (Last, First, Middle Initial)

Mailing Address 390 Worthington Road

City Westerville State OH Zip Code 43082

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

Name of Employer AFSCME OH LOC 11 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2012
Transaction ID : SA11AI.280112

Amount of Each Receipt this Period
 200.00

B. ALBERT JACKSON
Full Name (Last, First, Middle Initial)

Mailing Address 3690 Orange Place Suite 550

City Beachwood State OH Zip Code 44122

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

Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 404.04

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2012
Transaction ID : SA11AI.280174

Amount of Each Receipt this Period
 19.24

C. ALBERT JACKSON
Full Name (Last, First, Middle Initial)

Mailing Address 3690 Orange Place Suite 550

City Beachwood State OH Zip Code 44122

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

Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 423.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2012
Transaction ID : SA11AI.280229

Amount of Each Receipt this Period
 19.24

SUBTOTAL of Receipts This Page (optional).....▶	58.48
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 355 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. DARREN A. JACKSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 4713 E. 86th Street
 City State Zip Code
 Garfield Height OH 44125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH WKRS COMPENSATION SPECIALIST
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278432
 Amount of Each Receipt this Period
 10.00

B. DARREN A. JACKSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 4713 E. 86th Street
 City State Zip Code
 Garfield Height OH 44125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH WKRS COMPENSATION SPECIALIST
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278790
 Amount of Each Receipt this Period
 10.00

C. DARREN A. JACKSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 4713 E. 86th Street
 City State Zip Code
 Garfield Height OH 44125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH WKRS COMPENSATION SPECIALIST
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279148
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 356 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. GRETA JACKSON
Full Name (Last, First, Middle Initial)

Mailing Address 190 W. Ostend Street
Suite 101

City Baltimore State MD Zip Code 21230

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

Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
513.26

Date of Receipt
11 / 05 / 2012
Transaction ID : SA11AI.279986

Amount of Each Receipt this Period
46.66

B. JERRY JACKSON-FOWLKES
Full Name (Last, First, Middle Initial)

Mailing Address 3385 Penfield Road

City Columbus State OH Zip Code 44327

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
251.00

Date of Receipt
10 / 19 / 2012
Transaction ID : SA11AI.278434

Amount of Each Receipt this Period
15.00

C. JERRY JACKSON-FOWLKES
Full Name (Last, First, Middle Initial)

Mailing Address 3385 Penfield Road

City Columbus State OH Zip Code 44327

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
266.00

Date of Receipt
11 / 02 / 2012
Transaction ID : SA11AI.278792

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional).....▶	76.66
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 357 OF 846
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JERRY JACKSON-FOWLKES
Full Name (Last, First, Middle Initial)
Mailing Address 3385 Penfield Road
City Columbus State OH Zip Code 44327
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **281.00**

Date of Receipt **11 / 16 / 2012**
Transaction ID : SA11AI.279150
Amount of Each Receipt this Period **15.00**

B. CHERYL JAMES
Full Name (Last, First, Middle Initial)
Mailing Address 1234 Mass Avenue Apt 404
City Washington State DC Zip Code 20005
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME INT'L Occupation OFFICE ASSISTANT III
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **224.00**

Date of Receipt **10 / 31 / 2012**
Transaction ID : SA11AI.276429
Amount of Each Receipt this Period **5.50**

C. CHERYL JAMES
Full Name (Last, First, Middle Initial)
Mailing Address 1234 Mass Avenue Apt 404
City Washington State DC Zip Code 20005
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME INT'L Occupation OFFICE ASSISTANT III
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **229.50**

Date of Receipt **11 / 15 / 2012**
Transaction ID : SA11AI.276623
Amount of Each Receipt this Period **5.50**

SUBTOTAL of Receipts This Page (optional)..... **26.00**
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 358 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JUSTUS JAMES		Date of Receipt
Mailing Address 1705 Platt Court		<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
City	State	Zip Code
Allentown	PA	18104
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.279655
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME PA CN 13	STAFF REPRESENTATIVE	<input type="text" value="67.70"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="698.35"/>	

Full Name (Last, First, Middle Initial) B. STEVEN E. JAMES		Date of Receipt
Mailing Address 2044 Kensington Street		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Harrisburg	PA	17104-1924
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.279734
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME PA CN 13/STATE OF PA	STAFF REPRESENTATIVE	<input type="text" value="40.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="440.00"/>	

Full Name (Last, First, Middle Initial) C. RODNEY E. JARRELLS		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
Olympia	WA	98501
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276880
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE	<input type="text" value="10.50"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="210.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="118.20"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 359 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. RODNEY E. JARRELLS
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.50

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277171

Amount of Each Receipt this Period
10.50

B. RODNEY E. JARRELLS
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277755

Amount of Each Receipt this Period
10.50

C. EDWIN S. JAYNE
Full Name (Last, First, Middle Initial)

Mailing Address 3304 Alabama Avenue

City Alexandria State VA Zip Code 22305

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

Name of Employer AFSCME INT'L Occupation ASSOCIATE DIRECTOR, LEGISLATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1138.80

Date of Receipt
10 / 31 / 2012
Transaction ID : SA11AI.276430

Amount of Each Receipt this Period
56.94

SUBTOTAL of Receipts This Page (optional)..... ▶ 77.94

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 360 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. EDWIN S. JAYNE
Full Name (Last, First, Middle Initial)

Mailing Address 3304 Alabama Avenue

City Alexandria State VA Zip Code 22305

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

Name of Employer AFSCME INT'L Occupation ASSOCIATE DIRECTOR, LEGISLATION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1195.74

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11Al.276624

Amount of Each Receipt this Period 56.94

B. HOLLY A. JENKINS
Full Name (Last, First, Middle Initial)

Mailing Address 11 Whitney Drive

City Fremont State OH Zip Code 43420

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11Al.278435

Amount of Each Receipt this Period 12.00

C. HOLLY A. JENKINS
Full Name (Last, First, Middle Initial)

Mailing Address 11 Whitney Drive

City Fremont State OH Zip Code 43420

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11Al.278793

Amount of Each Receipt this Period 12.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.94

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 361 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. HOLLY A. JENKINS
Full Name (Last, First, Middle Initial)

Mailing Address 11 Whitney Drive

City Fremont State OH Zip Code 43420

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **276.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 16 / 2012

Transaction ID : SA11AI.279151

Amount of Each Receipt this Period
12.00

B. PAMELA L. JENKINS
Full Name (Last, First, Middle Initial)

Mailing Address 47604 Sandbank Square

City Potomac Falls State VA Zip Code 20165

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

Name of Employer AFSCME INT'L Occupation SPECIAL ASSISTANT TO THE PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1071.92**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.276431

Amount of Each Receipt this Period
57.73

C. PAMELA L. JENKINS
Full Name (Last, First, Middle Initial)

Mailing Address 47604 Sandbank Square

City Potomac Falls State VA Zip Code 20165

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

Name of Employer AFSCME INT'L Occupation SPECIAL ASSISTANT TO THE PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1129.65**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : SA11AI.276625

Amount of Each Receipt this Period
57.73

SUBTOTAL of Receipts This Page (optional).....▶	127.46
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 362 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BRIAN JENNINGS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1104 26th Street
 City Des Moines State IA Zip Code 50311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IA CN 61 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 257.64

Date of Receipt 11 / 07 / 2012
Transaction ID : SA11AI.280079
 Amount of Each Receipt this Period 48.00

B. KATHY JENNINGS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson Street SE
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277172
 Amount of Each Receipt this Period 10.00

C. KATHY JENNINGS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson Street SE
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277756
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional).....▶	68.00
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 363 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. LYNDIA JENNINGS		Date of Receipt
Mailing Address 1649 Franklin Park S.		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City	State	Zip Code
Columbus	OH	43205
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.278436
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME OH LOC 11/STATE OF OH	ADMINISTRATIVE SECRETARY	<input type="text" value="12.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="252.00"/>	

Full Name (Last, First, Middle Initial) B. LYNDIA JENNINGS		Date of Receipt
Mailing Address 1649 Franklin Park S.		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Zip Code
Columbus	OH	43205
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.278794
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME OH LOC 11/STATE OF OH	ADMINISTRATIVE SECRETARY	<input type="text" value="12.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="264.00"/>	

Full Name (Last, First, Middle Initial) C. LYNDIA JENNINGS		Date of Receipt
Mailing Address 1649 Franklin Park S.		<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City	State	Zip Code
Columbus	OH	43205
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.279152
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME OH LOC 11/STATE OF OH	ADMINISTRATIVE SECRETARY	<input type="text" value="12.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="276.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="36.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 364 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. THERESA L. JENSEN
Full Name (Last, First, Middle Initial)

Mailing Address E1814 Dayton Road

City Waupaca State WI Zip Code 54981

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

Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 22 / 2012

Transaction ID : SA11AI.277554

Amount of Each Receipt this Period
10.00

B. THERESA L. JENSEN
Full Name (Last, First, Middle Initial)

Mailing Address E1814 Dayton Road

City Waupaca State WI Zip Code 54981

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

Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2012

Transaction ID : SA11AI.277555

Amount of Each Receipt this Period
10.00

C. THERESA L. JENSEN
Full Name (Last, First, Middle Initial)

Mailing Address E1814 Dayton Road

City Waupaca State WI Zip Code 54981

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

Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 16 / 2012

Transaction ID : SA11AI.277556

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 365 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. FRANK X. JEREZ		Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2012 Transaction ID : SA11AI.276432
Mailing Address 94 Karatzas Avenue		Amount of Each Receipt this Period 42.52
City Manchester	State NH	Zip Code 03014-0000
FEC ID number of contributing federal political committee. C	Name of Employer AFSCME INT'L	Occupation FIELD COORDINATOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 865.58	

Full Name (Last, First, Middle Initial) B. FRANK X. JEREZ		Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2012 Transaction ID : SA11AI.276626
Mailing Address 94 Karatzas Avenue		Amount of Each Receipt this Period 42.52
City Manchester	State NH	Zip Code 03014-0000
FEC ID number of contributing federal political committee. C	Name of Employer AFSCME INT'L	Occupation FIELD COORDINATOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 908.10	

Full Name (Last, First, Middle Initial) C. LOUELLA JETER		Date of Receipt M M / D D / Y Y Y Y Y 10 / 19 / 2012 Transaction ID : SA11AI.278437
Mailing Address 1620 Tendril Court		Amount of Each Receipt this Period 10.00
City Columbus	State OH	Zip Code 43229
FEC ID number of contributing federal political committee. C	Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CUSTOMER SERVICE REP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 555.00	

SUBTOTAL of Receipts This Page (optional).....▶	95.04
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 366 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LOUELLA JETER
Full Name (Last, First, Middle Initial)

Mailing Address 1620 Tendril Court

City Columbus	State OH	Zip Code 43229
------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CUSTOMER SERVICE REP
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
565.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.278795

Amount of Each Receipt this Period

10.00

B. LOUELLA JETER
Full Name (Last, First, Middle Initial)

Mailing Address 1620 Tendril Court

City Columbus	State OH	Zip Code 43229
------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CUSTOMER SERVICE REP
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
575.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2012

Transaction ID : SA11AI.279153

Amount of Each Receipt this Period

10.00

C. CARRIE V. JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 10561 Cranwood Court

City Cincinnati	State OH	Zip Code 45240
--------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation SECRETARY
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.278439

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 367 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. CARRIE V. JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 10561 Cranwood Court
 City State Zip Code
 Cincinnati OH 45240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278797
 Amount of Each Receipt this Period
 10.00

B. CARRIE V. JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 10561 Cranwood Court
 City State Zip Code
 Cincinnati OH 45240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 230.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279155
 Amount of Each Receipt this Period
 10.00

C. CHARLES A. JOHNSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 366 Strouse Lane
 City State Zip Code
 South Salem OH 45681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH TRANSPORTATION TECHN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278440
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 368 OF 846
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input 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

A. CHARLES A. JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 366 Strouse Lane

City South Salem State OH Zip Code 45681

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation TRANSPORTATION TECHN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278798

Amount of Each Receipt this Period 10.00

B. CHARLES A. JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 366 Strouse Lane

City South Salem State OH Zip Code 45681

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation TRANSPORTATION TECHN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279156

Amount of Each Receipt this Period 10.00

C. HELEN J. JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 837 Koebel Avenue

City Columbus State OH Zip Code 43207

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

Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 372.33

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279811

Amount of Each Receipt this Period 41.88

SUBTOTAL of Receipts This Page (optional)..... ▶ 61.88

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 369 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KENYA JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 1934 Berkeley Road

City Columbus State OH Zip Code 43207

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278444

Amount of Each Receipt this Period 12.00

B. KENYA JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 1934 Berkeley Road

City Columbus State OH Zip Code 43207

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278802

Amount of Each Receipt this Period 12.00

C. KENYA JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 1934 Berkeley Road

City Columbus State OH Zip Code 43207

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279160

Amount of Each Receipt this Period 12.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 36.00

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 370 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KIMBERLY JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 1727 207th Lane NE

City East Bethel State MN Zip Code 55011

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

Name of Employer AFSCME MN CN 5 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt
10 / 31 / 2012

Transaction ID : SA11AI.278173

Amount of Each Receipt this Period
20.00

B. RICHARD JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 157 Rose

City Plymouth State MI Zip Code 48170

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
11 / 07 / 2012

Transaction ID : SA11AI.279879

Amount of Each Receipt this Period
10.00

C. RICHARD JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 157 Rose

City Plymouth State MI Zip Code 48170

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

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
11 / 20 / 2012

Transaction ID : SA11AI.279929

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... **40.00**

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 371 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. SETH M JOHNSON		Date of Receipt										
Mailing Address 727 7th Street NE		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>31</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		31		2012
M M	/	D D	/	Y Y Y Y								
10		31		2012								
City Washington State DC Zip Code 20002		Transaction ID : SA11AI.276433										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period										
Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, POLITICAL ACTION		102.20										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	2035.03											

Full Name (Last, First, Middle Initial) B. SETH M JOHNSON		Date of Receipt										
Mailing Address 727 7th Street NE		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>15</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		15		2012
M M	/	D D	/	Y Y Y Y								
11		15		2012								
City Washington State DC Zip Code 20002		Transaction ID : SA11AI.276627										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period										
Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, POLITICAL ACTION		102.20										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	2137.23											

Full Name (Last, First, Middle Initial) C. TAUREAN J. JOHNSON		Date of Receipt										
Mailing Address 1057 Hartford Avenue		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>31</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		31		2012
M M	/	D D	/	Y Y Y Y								
10		31		2012								
City Akron State OH Zip Code 44320		Transaction ID : SA11AI.279813										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period										
Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE		16.70										
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼											
	222.62											

SUBTOTAL of Receipts This Page (optional).....▶	221.10
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 372 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. WINSTON JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 14574 Longacre

City State Zip Code
Detroit MI 48227-1448

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

Name of Employer Occupation
AFSCME MI CN 25 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
611.52

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2012
Transaction ID : SA11AI.279880

Amount of Each Receipt this Period
29.12

B. WINSTON JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 14574 Longacre

City State Zip Code
Detroit MI 48227-1448

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

Name of Employer Occupation
AFSCME MI CN 25 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
640.64

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2012
Transaction ID : SA11AI.279930

Amount of Each Receipt this Period
29.12

C. YVETTE M. JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 6917 So. Wabash Avenue

City State Zip Code
Chicago IL 60637

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

Name of Employer Occupation
AFSCME IL CN 31/STATE OF IL OFFICE COORDINATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
218.61

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2012
Transaction ID : SA11AI.279430

Amount of Each Receipt this Period
31.23

SUBTOTAL of Receipts This Page (optional)..... ▶ 89.47

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 373 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. STEVEN JOINER
Full Name (Last, First, Middle Initial)

Mailing Address 247 Maple Street

City Chester State IL Zip Code 62233

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

Name of Employer AFSCME IL CN 31 Occupation CONTRACT ADMINISTRATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **637.74**

Date of Receipt **11 / 01 / 2012**

Transaction ID : SA11AI.279550

Amount of Each Receipt this Period **70.76**

B. GERARD P. JOLLY
Full Name (Last, First, Middle Initial)

Mailing Address 2107 Twin Flower Circle

City Grove City State OH Zip Code 43123

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation FISCAL SPECIALIST I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt **10 / 19 / 2012**

Transaction ID : SA11AI.278447

Amount of Each Receipt this Period **25.00**

C. GERARD P. JOLLY
Full Name (Last, First, Middle Initial)

Mailing Address 2107 Twin Flower Circle

City Grove City State OH Zip Code 43123

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation FISCAL SPECIALIST I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt **11 / 02 / 2012**

Transaction ID : SA11AI.278805

Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional)..... **120.76**

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: (check only one)	PAGE 374 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. GERARD P. JOLLY
Full Name (Last, First, Middle Initial)

Mailing Address 2107 Twin Flower Circle

City Grove City	State OH	Zip Code 43123
--------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation FISCAL SPECIALIST I
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **575.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2012

Transaction ID : SA11AI.279163

Amount of Each Receipt this Period

575.00

B. GRACE E. JONES
Full Name (Last, First, Middle Initial)

Mailing Address 2604 Brookview Drive

City Burnsville	State MN	Zip Code 55337
--------------------	-------------	-------------------

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

Name of Employer AFSCME MN CN 5/STATE OF MN	Occupation STAFF REPRESENTATIVE
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.278276

Amount of Each Receipt this Period

230.00

C. IDA M. JONES
Full Name (Last, First, Middle Initial)

Mailing Address 619 E. Markison Avenue

City Columbus	State OH	Zip Code 43207
------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation TEACHER AIDE
---	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **327.50**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2012

Transaction ID : SA11AI.280273

Amount of Each Receipt this Period

327.50

SUBTOTAL of Receipts This Page (optional).....▶	57.50
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 375 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. IDA M. JONES
 Full Name (Last, First, Middle Initial)
 Mailing Address 619 E. Markison Avenue
 City Columbus State OH Zip Code 43207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation TEACHER AIDE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 11 / 13 / 2012
Transaction ID : SA11AI.280303
 Amount of Each Receipt this Period 12.50

B. IDA M. JONES
 Full Name (Last, First, Middle Initial)
 Mailing Address 619 E. Markison Avenue
 City Columbus State OH Zip Code 43207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation TEACHER AIDE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 352.50

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.280333
 Amount of Each Receipt this Period 12.50

C. JACQUELYN P. JONES
 Full Name (Last, First, Middle Initial)
 Mailing Address 190 W. Ostend Street Suite 101
 City Baltimore State MD Zip Code 21230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 462.88

Date of Receipt 11 / 05 / 2012
Transaction ID : SA11AI.279987
 Amount of Each Receipt this Period 42.08

SUBTOTAL of Receipts This Page (optional)..... ▶ 67.08
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 376 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LORETTA L. JONES
Full Name (Last, First, Middle Initial)

Mailing Address 109 E. Iroquois Trail

City Sandusky State OH Zip Code 44870

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation OFFICE ASSISTANT I

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278448

Amount of Each Receipt this Period 12.00

B. LORETTA L. JONES
Full Name (Last, First, Middle Initial)

Mailing Address 109 E. Iroquois Trail

City Sandusky State OH Zip Code 44870

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation OFFICE ASSISTANT I

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278806

Amount of Each Receipt this Period 12.00

C. LORETTA L. JONES
Full Name (Last, First, Middle Initial)

Mailing Address 109 E. Iroquois Trail

City Sandusky State OH Zip Code 44870

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation OFFICE ASSISTANT I

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279164

Amount of Each Receipt this Period 12.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 36.00

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 377 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. MICHAEL J. JONES
 Full Name (Last, First, Middle Initial)
 Mailing Address 390 Worthington Road
 City State Zip Code
 Westerville OH 43082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11 STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 748.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2012
Transaction ID : SA11AI.280113
 Amount of Each Receipt this Period
 68.00

B. ROBERT D. JONES
 Full Name (Last, First, Middle Initial)
 Mailing Address 5036 S. K Street
 City State Zip Code
 Tacoma WA 98408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277173
 Amount of Each Receipt this Period
 10.00

C. ROBERT D. JONES
 Full Name (Last, First, Middle Initial)
 Mailing Address 5036 S. K Street
 City State Zip Code
 Tacoma WA 98408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277757
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 88.00
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 378 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. TOAYIA JONES
Full Name (Last, First, Middle Initial)

Mailing Address 7571 Bayview Club Drive
Apt. 2D

City Indianapolis State IN Zip Code 46250

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

Name of Employer AFSCME INT'L Occupation FIELD ADMINISTRATIVE ASSISTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
545.60

Date of Receipt
10 / 31 / 2012
Transaction ID : SA11AI.276434

Amount of Each Receipt this Period
26.85

B. TOAYIA JONES
Full Name (Last, First, Middle Initial)

Mailing Address 7571 Bayview Club Drive
Apt. 2D

City Indianapolis State IN Zip Code 46250

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

Name of Employer AFSCME INT'L Occupation FIELD ADMINISTRATIVE ASSISTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
572.45

Date of Receipt
11 / 15 / 2012
Transaction ID : SA11AI.276628

Amount of Each Receipt this Period
26.85

C. RENITA JONES-STREET
Full Name (Last, First, Middle Initial)

Mailing Address 853 Glasgow Drive

City Cincinnati State OH Zip Code 45240

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

Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.08

Date of Receipt
10 / 31 / 2012
Transaction ID : SA11AI.279814

Amount of Each Receipt this Period
16.70

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.40

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 379 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JACQUELINE L. JONES-WALSH		Date of Receipt
Mailing Address 12401 Renton Avenue S. Apt. 307		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City Seattle	State WA	Zip Code 98178
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276883
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="21.00"/>
	<input type="text" value="420.00"/>	

Full Name (Last, First, Middle Initial) B. JACQUELINE L. JONES-WALSH		Date of Receipt
Mailing Address 12401 Renton Avenue S. Apt. 307		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City Seattle	State WA	Zip Code 98178
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.277174
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="21.00"/>
	<input type="text" value="441.00"/>	

Full Name (Last, First, Middle Initial) C. JACQUELINE L. JONES-WALSH		Date of Receipt
Mailing Address 12401 Renton Avenue S. Apt. 307		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Seattle	State WA	Zip Code 98178
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.277758
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="21.00"/>
	<input type="text" value="462.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="63.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 380 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. TERESA JOPPA
Full Name (Last, First, Middle Initial)
Mailing Address 3911 7th Street
City Moorehead State MN Zip Code 56560
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME MN CN 65 Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **248.00**

Date of Receipt **11 / 07 / 2012**
Transaction ID : SA11AI.280376
Amount of Each Receipt this Period **18.00**

B. RACHEL JORDAN
Full Name (Last, First, Middle Initial)
Mailing Address 7836 Peachmont Avenue NW
City North Canton State OH Zip Code 44720
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **420.00**

Date of Receipt **10 / 24 / 2012**
Transaction ID : SA11AI.280175
Amount of Each Receipt this Period **20.00**

C. RACHEL JORDAN
Full Name (Last, First, Middle Initial)
Mailing Address 7836 Peachmont Avenue NW
City North Canton State OH Zip Code 44720
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **440.00**

Date of Receipt **11 / 06 / 2012**
Transaction ID : SA11AI.280230
Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional)..... **58.00**
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 381 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. PEGGY A. JOSEPH
 Full Name (Last, First, Middle Initial)
 Mailing Address 5266 Dillon Hills Drive
 City State Zip Code
 Nashport OH 43830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 297.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278451
 Amount of Each Receipt this Period
 17.00

B. PEGGY A. JOSEPH
 Full Name (Last, First, Middle Initial)
 Mailing Address 5266 Dillon Hills Drive
 City State Zip Code
 Nashport OH 43830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 314.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278809
 Amount of Each Receipt this Period
 17.00

C. PEGGY A. JOSEPH
 Full Name (Last, First, Middle Initial)
 Mailing Address 5266 Dillon Hills Drive
 City State Zip Code
 Nashport OH 43830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 331.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279167
 Amount of Each Receipt this Period
 17.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 51.00
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 382 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ANDREW B. JOSHU
Full Name (Last, First, Middle Initial)

Mailing Address 4201 N. 8th Street Road

City Springfield State IL Zip Code 62707

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

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation INFORMATION SYSTEMS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 218.82

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279431

Amount of Each Receipt this Period 31.26

B. CHARLES JURGONIS
Full Name (Last, First, Middle Initial)

Mailing Address 11704 Bobs Ford Road

City Fairfax State VA Zip Code 22030

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

Name of Employer AFSCME INT'L Occupation DIRECTOR, FINANCIAL SERVICES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3277.60

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276435

Amount of Each Receipt this Period 163.88

C. CHARLES JURGONIS
Full Name (Last, First, Middle Initial)

Mailing Address 11704 Bobs Ford Road

City Fairfax State VA Zip Code 22030

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

Name of Employer AFSCME INT'L Occupation DIRECTOR, FINANCIAL SERVICES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3441.48

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276629

Amount of Each Receipt this Period 163.88

SUBTOTAL of Receipts This Page (optional)..... ▶ 359.02

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 383 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. SHERI L. KAESER		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2012 Transaction ID : SA11AI.276884
Mailing Address 1722 211th Street East #30		Amount of Each Receipt this Period 10.50
City Spanaway State WA Zip Code 98387	FEC ID number of contributing federal political committee. C	
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) B. SHERI L. KAESER		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2012 Transaction ID : SA11AI.277175
Mailing Address 1722 211th Street East #30		Amount of Each Receipt this Period 10.50
City Spanaway State WA Zip Code 98387	FEC ID number of contributing federal political committee. C	
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.50	

Full Name (Last, First, Middle Initial) C. SHERI L. KAESER		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11AI.277759
Mailing Address 1722 211th Street East #30		Amount of Each Receipt this Period 10.50
City Spanaway State WA Zip Code 98387	FEC ID number of contributing federal political committee. C	
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.00	

SUBTOTAL of Receipts This Page (optional).....▶	31.50
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 384 OF 846
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. IWALANI P. KAHEIKI			Date of Receipt		
Mailing Address 171 Desha Avenue			M M M / D D D / Y Y Y Y Y Y 11 / 02 / 2012		
City State Zip Code Hilo HI 96720			Transaction ID : SA11AI.280416		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 200.00		
Name of Employer AFSCME HI LOC 152		Occupation STAFF REPRESENTATIVE			
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. CHRISTINA P. KAOH			Date of Receipt		
Mailing Address 3607 10th Street NW Apt. A			M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2012		
City State Zip Code Washington DC 20010			Transaction ID : SA11AI.276436		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 15.00		
Name of Employer AFSCME INT'L		Occupation LABOR ECONOMIST I			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 295.00			

Full Name (Last, First, Middle Initial) C. CHRISTINA P. KAOH			Date of Receipt		
Mailing Address 3607 10th Street NW Apt. A			M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2012		
City State Zip Code Washington DC 20010			Transaction ID : SA11AI.276630		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 15.00		
Name of Employer AFSCME INT'L		Occupation LABOR ECONOMIST I			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 310.00			

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 385 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. RONALD G. KAPUNIAI		Date of Receipt
Mailing Address 45-222 Keana Road		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Zip Code
Kaneohe	HI	96744-2318
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.280417
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="21.00"/>
Name of Employer	Occupation	
AFSCME HI LOC 152	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="286.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. CASEY L. KARNS		Date of Receipt
Mailing Address 1214 Buffalo Street		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Franklin	PA	16323
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.279736
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="40.00"/>
Name of Employer	Occupation	
AFSCME PA CN 13/STATE OF PA	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="440.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. STUART KATZENBERG		Date of Receipt
Mailing Address 190 W. Ostend Street Suite 101		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City	State	Zip Code
Baltimore	MD	21230
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.279988
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="55.84"/>
Name of Employer	Occupation	
AFSCME MD CN 982	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="614.24"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="116.84"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 386 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JASON KAY
Full Name (Last, First, Middle Initial)

Mailing Address 2000 Cleveland

City Evanston State IL Zip Code 60202

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

Name of Employer AFSCME IL CN 31 Occupation POLITICAL ACTION DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **733.40**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2012

Transaction ID : SA11AI.279551

Amount of Each Receipt this Period
73.34

B. ALAN E. KEARNEY
Full Name (Last, First, Middle Initial)

Mailing Address 9254 Highland Creek Road

City Bloomington State MN Zip Code 55437

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

Name of Employer AFSCME MN CN 5/CN14 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **663.74**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2012

Transaction ID : SA11AI.280041

Amount of Each Receipt this Period
60.34

C. EDWARD KEEFE
Full Name (Last, First, Middle Initial)

Mailing Address 208 Elm Street

City Amesbury State MA Zip Code 01913-0000

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

Name of Employer AFSCME MA CN 93 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2012

Transaction ID : SA11AI.280012

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... **153.68**

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 387 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. WENDY A. KELLY
 Full Name (Last, First, Middle Initial)
 Mailing Address 13303 Alvin Avenue
 City State Zip Code
 Garfield Height OH 44105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH WKRS COMPENSATION SPECIALIST
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11Al.278454
 Amount of Each Receipt this Period
 10.00

B. WENDY A. KELLY
 Full Name (Last, First, Middle Initial)
 Mailing Address 13303 Alvin Avenue
 City State Zip Code
 Garfield Height OH 44105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH WKRS COMPENSATION SPECIALIST
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11Al.278812
 Amount of Each Receipt this Period
 10.00

C. WENDY A. KELLY
 Full Name (Last, First, Middle Initial)
 Mailing Address 13303 Alvin Avenue
 City State Zip Code
 Garfield Height OH 44105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH WKRS COMPENSATION SPECIALIST
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11Al.279170
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 388 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. LYNN E. KEMP		Date of Receipt
Mailing Address 390 Worthington Road		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City State Zip Code Westerville OH 43082		Transaction ID : SA11AI.280114
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="40.00"/>
Name of Employer AFSCME OH LOC 11	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="260.00"/>	

Full Name (Last, First, Middle Initial) B. MARGARET A. KEMRER		Date of Receipt
Mailing Address 1125 12th Avenue SE Apt. A105		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City State Zip Code Olympia WA 98501		Transaction ID : SA11AI.277176
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	

Full Name (Last, First, Middle Initial) C. MARGARET A. KEMRER		Date of Receipt
Mailing Address 1125 12th Avenue SE Apt. A105		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City State Zip Code Olympia WA 98501		Transaction ID : SA11AI.277760
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 389 OF 846
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. FALISHA D. KENNEBREW
Full Name (Last, First, Middle Initial)
Mailing Address 815 Burns Street

City Mansfield	State OH	Zip Code 44903
-------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.278455

Amount of Each Receipt this Period
10.00

B. FALISHA D. KENNEBREW
Full Name (Last, First, Middle Initial)
Mailing Address 815 Burns Street

City Mansfield	State OH	Zip Code 44903
-------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.278813

Amount of Each Receipt this Period
10.00

C. FALISHA D. KENNEBREW
Full Name (Last, First, Middle Initial)
Mailing Address 815 Burns Street

City Mansfield	State OH	Zip Code 44903
-------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2012

Transaction ID : SA11AI.279171

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 390 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. NADINE KENNEDY
Full Name (Last, First, Middle Initial)

Mailing Address 735 G U.S. Route 4E

City Rutland	State VT	Zip Code 05701-9029
-----------------	-------------	------------------------

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

Name of Employer AFSCME MA CN 93	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2012

Transaction ID : SA11AI.280013

Amount of Each Receipt this Period
20.00

B. ADRIENNE J. KERN
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 44

City Hawthorne	State WI	Zip Code 54842
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/CN14	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
568.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2012

Transaction ID : SA11AI.280042

Amount of Each Receipt this Period
51.70

C. KAREN E. KERVIN
Full Name (Last, First, Middle Initial)

Mailing Address 318 Hane Avenue

City Marion	State OH	Zip Code 43302
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.278456

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	81.70
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 391 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KAREN E. KERVIN
Full Name (Last, First, Middle Initial)

Mailing Address 318 Hane Avenue

City Marion State OH Zip Code 43302

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 02 / 2012**

Transaction ID : SA11AI.278814

Amount of Each Receipt this Period **10.00**

B. KAREN E. KERVIN
Full Name (Last, First, Middle Initial)

Mailing Address 318 Hane Avenue

City Marion State OH Zip Code 43302

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 16 / 2012**

Transaction ID : SA11AI.279172

Amount of Each Receipt this Period **10.00**

C. JOANNE KICKEN
Full Name (Last, First, Middle Initial)

Mailing Address 271 W. Mason Avenue

City Buckley State WA Zip Code 98321

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **10 / 25 / 2012**

Transaction ID : SA11AI.276887

Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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 392 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOANNE KICKEN
Full Name (Last, First, Middle Initial)

Mailing Address 271 W. Mason Avenue

City Buckley	State WA	Zip Code 98321
-----------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11AI.277178

Amount of Each Receipt this Period

25.00

B. JOANNE KICKEN
Full Name (Last, First, Middle Initial)

Mailing Address 271 W. Mason Avenue

City Buckley	State WA	Zip Code 98321
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.27762

Amount of Each Receipt this Period

25.00

C. JILL KIELBLOCK
Full Name (Last, First, Middle Initial)

Mailing Address 581 Gotzian Street

City Saint Paul	State MN	Zip Code 55106
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/CN14	Occupation BUSINESS REPRESENTATIVE
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **782.32**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	14	/	2012

Transaction ID : SA11AI.280043

Amount of Each Receipt this Period

71.12

SUBTOTAL of Receipts This Page (optional).....▶	121.12
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 393 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. PATRICIA S. KIMBALL		Date of Receipt
Mailing Address 322 S. Peoria Upper North		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code
Dixon	IL	61021
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.279434
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME IL CN 31/STATE OF IL	MENTAL HEALTH TECH II	<input type="text" value=""/>
Receipt For:	Aggregate Year-to-Date ▼	<input type="text" value="30.00"/>
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="210.00"/>	

Full Name (Last, First, Middle Initial) B. GREGORY J. KING		Date of Receipt
Mailing Address 147 W Linvale Street		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code
Baltimore	MD	21217
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276437
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME INT'L	ASSOCIATE DIRECTOR, COMMUNICATIONS	<input type="text" value="56.94"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1168.80"/>	

Full Name (Last, First, Middle Initial) C. GREGORY J. KING		Date of Receipt
Mailing Address 147 W Linvale Street		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code
Baltimore	MD	21217
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276631
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME INT'L	ASSOCIATE DIRECTOR, COMMUNICATIONS	<input type="text" value="56.94"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1225.74"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="143.88"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 394 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. MONA L. KING		Date of Receipt
Mailing Address 929 Rye Drive		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
La Plata	MD	20646
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276395
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME INT'L	RECORDS OFFICE ASSISTANT	<input type="text" value="25.96"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="596.20"/>	

Full Name (Last, First, Middle Initial) B. MONA L. KING		Date of Receipt
Mailing Address 929 Rye Drive		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
La Plata	MD	20646
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276590
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME INT'L	RECORDS OFFICE ASSISTANT	<input type="text" value="25.96"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="622.16"/>	

Full Name (Last, First, Middle Initial) C. SPENCER KING		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
Olympia	WA	98501
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276889
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE	<input type="text" value="15.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="287.50"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="66.92"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 395 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. SPENCER KING
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 302.50

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277180

Amount of Each Receipt this Period 15.00

B. SPENCER KING
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 317.50

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.27764

Amount of Each Receipt this Period 15.00

C. DEBRA L. KING-HUTCHINSON
Full Name (Last, First, Middle Initial)

Mailing Address 1545 Smith Road

City Columbus State OH Zip Code 43207

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation LABOR MARKET ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278458

Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00

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 396 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DEBRA L. KING-HUTCHINSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1545 Smith Road
 City Columbus State OH Zip Code 43207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation LABOR MARKET ANALYST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **266.00**

Date of Receipt **11 / 02 / 2012**
Transaction ID : SA11AI.278816
 Amount of Each Receipt this Period **15.00**

B. DEBRA L. KING-HUTCHINSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1545 Smith Road
 City Columbus State OH Zip Code 43207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation LABOR MARKET ANALYST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **281.00**

Date of Receipt **11 / 16 / 2012**
Transaction ID : SA11AI.279174
 Amount of Each Receipt this Period **15.00**

C. SHARON A. KIRSCHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 8406 Red Oak Drive
 City Mounds View State MN Zip Code 55112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **241.00**

Date of Receipt **10 / 31 / 2012**
Transaction ID : SA11AI.278181
 Amount of Each Receipt this Period **12.00**

SUBTOTAL of Receipts This Page (optional).....	42.00
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 397 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JEFFREY S. KLATKE
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 40530
 City Portland State OR Zip Code 97240-0530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OR CN 75/STATE OF OR Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **225.00**

Date of Receipt **10 / 31 / 2012**
Transaction ID : SA11AI.277986
 Amount of Each Receipt this Period **250.00**

B. ERIKA A. KLEVEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1266 250th Avenue
 City Avoca State MN Zip Code 56114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **230.00**

Date of Receipt **10 / 31 / 2012**
Transaction ID : SA11AI.278182
 Amount of Each Receipt this Period **20.00**

C. KELLIE A. KLIMCZAK
 Full Name (Last, First, Middle Initial)
 Mailing Address 11602 203rd Avenue E.
 City Bonney Lake State WA Zip Code 98391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/SOWA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **10 / 25 / 2012**
Transaction ID : SA11AI.276891
 Amount of Each Receipt this Period **12.50**

SUBTOTAL of Receipts This Page (optional)..... **57.50**
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 398 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KELLIE A. KLIMCZAK
 Full Name (Last, First, Middle Initial)
 Mailing Address 11602 203rd Avenue E.
 City Bonney Lake State WA Zip Code 98391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/SOWA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277182
 Amount of Each Receipt this Period
 12.50

B. KELLIE A. KLIMCZAK
 Full Name (Last, First, Middle Initial)
 Mailing Address 11602 203rd Avenue E.
 City Bonney Lake State WA Zip Code 98391
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/SOWA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277766
 Amount of Each Receipt this Period
 12.50

C. CAROLYN KLINGLESMTIH
 Full Name (Last, First, Middle Initial)
 Mailing Address 10700 Grecian Road
 City Louisville State KY Zip Code 40272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation AREA ORGANIZING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1847.37

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276438
 Amount of Each Receipt this Period
 103.09

SUBTOTAL of Receipts This Page (optional).....▶	128.09
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 399 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CAROLYN KLINGLESMTIH
Full Name (Last, First, Middle Initial)

Mailing Address 10700 Grecian Road

City Louisville State KY Zip Code 40272

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

Name of Employer AFSCME INT'L Occupation AREA ORGANIZING DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1950.46**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : SA11AI.276632

Amount of Each Receipt this Period
103.09

B. BRIAN W. KLOPP
Full Name (Last, First, Middle Initial)

Mailing Address 6711 Queens Chapel Road

City University Park State MD Zip Code 20782

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

Name of Employer AFSCME INT'L Occupation LABOR ECONOMIST III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **813.84**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.276439

Amount of Each Receipt this Period
41.33

C. BRIAN W. KLOPP
Full Name (Last, First, Middle Initial)

Mailing Address 6711 Queens Chapel Road

City University Park State MD Zip Code 20782

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

Name of Employer AFSCME INT'L Occupation LABOR ECONOMIST III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **855.17**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : SA11AI.276633

Amount of Each Receipt this Period
41.33

SUBTOTAL of Receipts This Page (optional).....▶	185.75
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 400 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CHRISTINE KNAPP
Full Name (Last, First, Middle Initial)

Mailing Address 255 Trail East

City Pataskala	State OH	Zip Code 43062
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4	Occupation FIELD SECRETARY
-------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **316.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2012

Transaction ID : SA11AI.280176

Amount of Each Receipt this Period

10.00

B. CHRISTINE KNAPP
Full Name (Last, First, Middle Initial)

Mailing Address 255 Trail East

City Pataskala	State OH	Zip Code 43062
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4	Occupation FIELD SECRETARY
-------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **326.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2012

Transaction ID : SA11AI.280231

Amount of Each Receipt this Period

10.00

C. DAVID C. KNARR
Full Name (Last, First, Middle Initial)

Mailing Address 4245 Tonsing Drive

City Ravenna	State OH	Zip Code 44266
-----------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation HIGHWAY TECHNICIAN III
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.278461

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 401 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. DAVID C. KNARR			Date of Receipt
Mailing Address 4245 Tonsing Drive			<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.278819
Ravenna	OH	44266	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		
AFSCME OH LOC 11/STATE OF OH	HIGHWAY TECHNICIAN III		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. DAVID C. KNARR			Date of Receipt
Mailing Address 4245 Tonsing Drive			<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279177
Ravenna	OH	44266	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		
AFSCME OH LOC 11/STATE OF OH	HIGHWAY TECHNICIAN III		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="230.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. NANCY KNEPP			Date of Receipt
Mailing Address 22 Edgewood Drive			<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279649
Mechanicsburg	PA	17055	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="73.16"/>
Name of Employer	Occupation		
AFSCME PA CN 13	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="823.05"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="93.16"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 402 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. SHELLEY I. KOHASHIKAWA		Date of Receipt M M / D D / Y Y Y Y Y 11 / 02 / 2012 Transaction ID : SA11AI.280419
Mailing Address 888 Mililani Street Suite 601		Amount of Each Receipt this Period 20.00
City Honolulu	State HI	Zip Code 96813-2991
FEC ID number of contributing federal political committee. C	Name of Employer AFSCME HI LOC 152	Occupation STAFF REPRESENTATIVE
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. JOHN KOHLHEPP		Date of Receipt M M / D D / Y Y Y Y Y 11 / 01 / 2012 Transaction ID : SA11AI.279552
Mailing Address 615 S. 2nd Street		Amount of Each Receipt this Period 67.74
City Springfield	State IL	Zip Code 62705
FEC ID number of contributing federal political committee. C	Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 677.40	

Full Name (Last, First, Middle Initial) C. DOUGLAS M. KORBA		Date of Receipt M M / D D / Y Y Y Y Y 10 / 19 / 2012 Transaction ID : SA11AI.278463
Mailing Address P.O. Box 172		Amount of Each Receipt this Period 11.00
City Bannock	State OH	Zip Code 43972
FEC ID number of contributing federal political committee. C	Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.00	

SUBTOTAL of Receipts This Page (optional).....▶	98.74
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 403 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. DOUGLAS M. KORBA		Date of Receipt
Mailing Address P.O. Box 172		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City State Zip Code Bannock OH 43972		Transaction ID : SA11AI.278821
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="11.00"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="242.00"/>	

Full Name (Last, First, Middle Initial) B. DOUGLAS M. KORBA		Date of Receipt
Mailing Address P.O. Box 172		<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City State Zip Code Bannock OH 43972		Transaction ID : SA11AI.279179
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="11.00"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="253.00"/>	

Full Name (Last, First, Middle Initial) C. KERRY KORPI		Date of Receipt
Mailing Address 8913 First Avenue		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City State Zip Code Silver Spring MD 20910		Transaction ID : SA11AI.276440
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="72.96"/>
Name of Employer AFSCME INT'L	Occupation DIRECTOR, RESEARCH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1459.20"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="94.96"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 404 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KERRY KORPI
Full Name (Last, First, Middle Initial)

Mailing Address 8913 First Avenue

City Silver Spring State MD Zip Code 20910

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

Name of Employer AFSCME INT'L Occupation DIRECTOR, RESEARCH

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1532.16

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : SA11AI.276634

Amount of Each Receipt this Period
 72.96

B. CAROL J. KOYNE
Full Name (Last, First, Middle Initial)

Mailing Address 1410 N. Grand Avenue W.

City Springfield State IL Zip Code 62702

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

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation CASEWORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.279437

Amount of Each Receipt this Period
 31.32

C. LORETTA K. KREIGER
Full Name (Last, First, Middle Initial)

Mailing Address 55 Circle Drive

City Medina State OH Zip Code 44256

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation ACCOUNT CLERK II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278465

Amount of Each Receipt this Period
 12.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 116.28

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 405 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LORETTA K. KREIGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 Circle Drive
 City Medina State OH Zip Code 44256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation ACCOUNT CLERK II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278823
 Amount of Each Receipt this Period
 12.00

B. LORETTA K. KREIGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 55 Circle Drive
 City Medina State OH Zip Code 44256
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation ACCOUNT CLERK II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279181
 Amount of Each Receipt this Period
 12.00

C. STEVEN KREISBERG
 Full Name (Last, First, Middle Initial)
 Mailing Address 9954 Whitewater Drive
 City Burke State VA Zip Code 22015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ASSOCIATE DIRECTOR, RESEARCH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1138.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276441
 Amount of Each Receipt this Period
 56.94

SUBTOTAL of Receipts This Page (optional).....▶	80.94
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 406 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. STEVEN KREISBERG
Full Name (Last, First, Middle Initial)

Mailing Address 9954 Whitewater Drive

City State Zip Code
Burke VA 22015

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

Name of Employer Occupation
AFSCME INT'L ASSOCIATE DIRECTOR, RESEARCH

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1195.74

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012
Transaction ID : SA11AI.276635

Amount of Each Receipt this Period
56.94

B. BARBARA KREMP
Full Name (Last, First, Middle Initial)

Mailing Address 302 Donnelly Avenue

City State Zip Code
Aston PA 19014

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

Name of Employer Occupation
AFSCME PA CN 13 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
841.34

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2012
Transaction ID : SA11AI.279656

Amount of Each Receipt this Period
73.16

C. CAROLEE C KUBO
Full Name (Last, First, Middle Initial)

Mailing Address 1919 Young Street

City State Zip Code
Honolulu HI 96826

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

Name of Employer Occupation
AFSCME HI LOC 152 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2012
Transaction ID : SA11AI.280420

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.10

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 407 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. RONALD D. KUCHLER		Date of Receipt
Mailing Address P.O. Box 3019		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City State Zip Code Port Angeles WA 98362		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/> Transaction ID : SA11AI.276892
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="35.00"/>
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="700.00"/>	

Full Name (Last, First, Middle Initial) B. RONALD D. KUCHLER		Date of Receipt
Mailing Address P.O. Box 3019		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City State Zip Code Port Angeles WA 98362		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/> Transaction ID : SA11AI.277183
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="35.00"/>
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="735.00"/>	

Full Name (Last, First, Middle Initial) C. RONALD D. KUCHLER		Date of Receipt
Mailing Address P.O. Box 3019		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City State Zip Code Port Angeles WA 98362		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> Transaction ID : SA11AI.277767
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="35.00"/>
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="770.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="105.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 408 OF 846
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MICHAEL G. KUCHTA
Full Name (Last, First, Middle Initial)

Mailing Address 300 Hardman Avenue South

City South St. Paul State MN Zip Code 55075

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

Name of Employer AFSCME MN CN 5/CN14 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2012

Transaction ID : SA11AI.280044

Amount of Each Receipt this Period
300.00

B. JAMIE G. KUHNER
Full Name (Last, First, Middle Initial)

Mailing Address 390 Worthington Road

City Westerville State OH Zip Code 43082

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

Name of Employer AFSCME OH LOC 11 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 24 / 2012

Transaction ID : SA11AI.280116

Amount of Each Receipt this Period
40.00

C. ANDREW KUJAN
Full Name (Last, First, Middle Initial)

Mailing Address 190 W. Ostend Street Suite 101

City Baltimore State MD Zip Code 21230

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

Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **462.88**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2012

Transaction ID : SA11AI.279989

Amount of Each Receipt this Period
42.08

SUBTOTAL of Receipts This Page (optional).....▶	112.08
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 409 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. STEVEN F. KULLMAN		Date of Receipt
Mailing Address 310 Timber Run Road		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City Zanesville State OH Zip Code 43701		Transaction ID : SA11AI.278468
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation ENVIRONMENTAL SPECIALIST		<input type="text" value="15.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="315.00"/>	

Full Name (Last, First, Middle Initial) B. STEVEN F. KULLMAN		Date of Receipt
Mailing Address 310 Timber Run Road		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City Zanesville State OH Zip Code 43701		Transaction ID : SA11AI.278826
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation ENVIRONMENTAL SPECIALIST		<input type="text" value="15.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="330.00"/>	

Full Name (Last, First, Middle Initial) C. STEVEN F. KULLMAN		Date of Receipt
Mailing Address 310 Timber Run Road		<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City Zanesville State OH Zip Code 43701		Transaction ID : SA11AI.279184
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation ENVIRONMENTAL SPECIALIST		<input type="text" value="15.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="345.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="45.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 410 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LEANNE KUNZE
Full Name (Last, First, Middle Initial)

Mailing Address 8155 Scandia Road

City Waconia	State MN	Zip Code 55387
-----------------	-------------	-------------------

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

Name of Employer AFSCME MN CN 65	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.25

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2012

Transaction ID : SA11AI.280378

Amount of Each Receipt this Period
31.25

B. RANDALL KURTZ
Full Name (Last, First, Middle Initial)

Mailing Address 8019 64th Drive NE

City Marysville	State WA	Zip Code 98270
--------------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation FSS III
---	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
911.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		25		2012

Transaction ID : SA11AI.276893

Amount of Each Receipt this Period
45.00

C. RANDALL KURTZ
Full Name (Last, First, Middle Initial)

Mailing Address 8019 64th Drive NE

City Marysville	State WA	Zip Code 98270
--------------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation FSS III
---	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
956.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		09		2012

Transaction ID : SA11AI.277184

Amount of Each Receipt this Period
45.00

SUBTOTAL of Receipts This Page (optional).....▶	121.25
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 411 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. RANDALL KURTZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 8019 64th Drive NE
 City Marysville State WA Zip Code 98270
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation FSS III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1001.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277768
 Amount of Each Receipt this Period 45.00

B. JUDY K. KUSCHEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 118 NE 147th Street
 City Vancouver State WA Zip Code 98685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 214.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276894
 Amount of Each Receipt this Period 11.00

C. JUDY K. KUSCHEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 118 NE 147th Street
 City Vancouver State WA Zip Code 98685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277185
 Amount of Each Receipt this Period 11.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 67.00
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 412 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JUDY K. KUSCHEL		Date of Receipt
Mailing Address 118 NE 147th Street		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code
Vancouver	WA	98685
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.277769
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="11.00"/>
Name of Employer	Occupation	
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="236.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. PATRICIA K. KWIATKOWSKI		Date of Receipt
Mailing Address 17420 Aquasco Farm Road		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Aquasco	MD	20608
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.276442
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="39.05"/>
Name of Employer	Occupation	
AFSCME INT'L	EXECUTIVE OFFICE ASSISTANT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="781.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. PATRICIA K. KWIATKOWSKI		Date of Receipt
Mailing Address 17420 Aquasco Farm Road		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Aquasco	MD	20608
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.276636
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="39.05"/>
Name of Employer	Occupation	
AFSCME INT'L	EXECUTIVE OFFICE ASSISTANT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="820.05"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="89.10"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 413 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CYNTHIA Z. LAISURE-BANKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 10708 Elmerge Avenue
 City Cleveland State OH Zip Code 44105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation BWC FRAUD ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278470
 Amount of Each Receipt this Period
 10.00

B. CYNTHIA Z. LAISURE-BANKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 10708 Elmerge Avenue
 City Cleveland State OH Zip Code 44105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation BWC FRAUD ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278828
 Amount of Each Receipt this Period
 10.00

C. CYNTHIA Z. LAISURE-BANKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 10708 Elmerge Avenue
 City Cleveland State OH Zip Code 44105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation BWC FRAUD ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279186
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 414 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. FRANCIS M. LALLY III
Full Name (Last, First, Middle Initial)

Mailing Address 5 Vasant Rd., Deacon's Walk

City Newark	State DE	Zip Code 19711
----------------	-------------	-------------------

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

Name of Employer AFSCME DE CN 81	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **720.22**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SA11AI.280145

Amount of Each Receipt this Period

				65.34
--	--	--	--	-------

B. JOSE A. LALUZ JR.
Full Name (Last, First, Middle Initial)

Mailing Address 6255 Bent Pine Drive Apt. 722A

City Orlando	State FL	Zip Code 32822
-----------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation AREA FIELD SERVICES DIRECTOR
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1203.80**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276443

Amount of Each Receipt this Period

				60.19
--	--	--	--	-------

C. JOSE A. LALUZ JR.
Full Name (Last, First, Middle Initial)

Mailing Address 6255 Bent Pine Drive Apt. 722A

City Orlando	State FL	Zip Code 32822
-----------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation AREA FIELD SERVICES DIRECTOR
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1263.99**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SA11AI.276637

Amount of Each Receipt this Period

				60.19
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SUBTOTAL of Receipts This Page (optional).....▶	185.72
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 415 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ANGELA LAMANNA
Full Name (Last, First, Middle Initial)

Mailing Address 296 Churchmans Road

City New Castle State DE Zip Code 19720

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

Name of Employer AFSCME DE CN 81 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **530.87**

Date of Receipt
11 / 15 / 2012
Transaction ID : SA11AI.280146

Amount of Each Receipt this Period
50.08

B. MATTHEW LANGE
Full Name (Last, First, Middle Initial)

Mailing Address 832 N Greenview Avenue

City Chicago State IL Zip Code 60642

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

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **458.90**

Date of Receipt
11 / 01 / 2012
Transaction ID : SA11AI.279553

Amount of Each Receipt this Period
47.16

C. MATTHEW L. LAPIERRE
Full Name (Last, First, Middle Initial)

Mailing Address 1173 Regent Drive

City Mundelein State IL Zip Code 60060-2000

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

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **782.60**

Date of Receipt
11 / 01 / 2012
Transaction ID : SA11AI.279554

Amount of Each Receipt this Period
69.76

SUBTOTAL of Receipts This Page (optional)..... **167.00**

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 416 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. EDWARD LAPORTE
Full Name (Last, First, Middle Initial)

Mailing Address 5622 Columbia

City St. Louis State MO Zip Code 63139

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

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.22

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.279555

Amount of Each Receipt this Period
 32.13

B. DANA LARSON
Full Name (Last, First, Middle Initial)

Mailing Address 8111 Lake Plesant Rd

City Erie State PA Zip Code 16509

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 432.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.279657

Amount of Each Receipt this Period
 39.30

C. DONALD W. LARSON
Full Name (Last, First, Middle Initial)

Mailing Address 452 W Scott Street

City Fond du Lac State WI Zip Code 54937

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

Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2012
Transaction ID : SA11AI.277560

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	91.43
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 417 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. DONALD W. LARSON			Date of Receipt
Mailing Address 452 W Scott Street			<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.277561
Fond du Lac	WI	54937	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
AFSCME WI CN 24/STATE OF WI	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="440.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. DONALD W. LARSON			Date of Receipt
Mailing Address 452 W Scott Street			<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.277562
Fond du Lac	WI	54937	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
AFSCME WI CN 24/STATE OF WI	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="460.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. SUSAN J. LARUE			Date of Receipt
Mailing Address 106 Haskell Drive			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279738
Lancaster	PA	17601	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="30.00"/>
Name of Employer	Occupation		
AFSCME PA CN 13/STATE OF PA	CLERICAL/ADMINISTRATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="330.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="70.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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 418 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. TERRISA A. LASHMETT
Full Name (Last, First, Middle Initial)

Mailing Address 595 Moore Road

City Winchester State IL Zip Code 62694

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

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation PUBLIC SVC ADMIN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279439

Amount of Each Receipt this Period 30.00

B. BRENDA R. LATHAM
Full Name (Last, First, Middle Initial)

Mailing Address 3140 Scottwood Road

City Columbus State OH Zip Code 43227

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation OFFICE ASSISTANT III

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278473

Amount of Each Receipt this Period 10.00

C. BRENDA R. LATHAM
Full Name (Last, First, Middle Initial)

Mailing Address 3140 Scottwood Road

City Columbus State OH Zip Code 43227

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation OFFICE ASSISTANT III

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278831

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00

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 419 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BRENDA R. LATHAM
Full Name (Last, First, Middle Initial)

Mailing Address 3140 Scottwood Road

City Columbus State OH Zip Code 43227

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation OFFICE ASSISTANT III

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279189

Amount of Each Receipt this Period 100.00

B. RHONDA L LATHON
Full Name (Last, First, Middle Initial)

Mailing Address 8521 Moon Glass Court

City Columbia State MD Zip Code 21045

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

Name of Employer AFSCME INT'L Occupation BUSINESS ANALYST III

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276444

Amount of Each Receipt this Period 30.00

C. RHONDA L LATHON
Full Name (Last, First, Middle Initial)

Mailing Address 8521 Moon Glass Court

City Columbia State MD Zip Code 21045

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

Name of Employer AFSCME INT'L Occupation BUSINESS ANALYST III

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 830.00

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276638

Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 420 OF 846
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. TIMOTHY F. LAVELLE
Full Name (Last, First, Middle Initial)
Mailing Address 14 Pawnee Court

City Putnam	State IL	Zip Code 61560
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **434.68**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2012

Transaction ID : SA11AI.279556

Amount of Each Receipt this Period
34.60

B. JOSEPH LAWRENCE
Full Name (Last, First, Middle Initial)
Mailing Address 2724 St. Paul Street #1

City Baltimore	State MD	Zip Code 21218
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation COMMUNICATIONS SPECIALIST III
----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **946.20**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.276445

Amount of Each Receipt this Period
47.31

C. JOSEPH LAWRENCE
Full Name (Last, First, Middle Initial)
Mailing Address 2724 St. Paul Street #1

City Baltimore	State MD	Zip Code 21218
-------------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation COMMUNICATIONS SPECIALIST III
----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **993.51**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : SA11AI.276639

Amount of Each Receipt this Period
47.31

SUBTOTAL of Receipts This Page (optional).....▶	129.22
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 421 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JEANETTE LEBRECHT
 Full Name (Last, First, Middle Initial)
 Mailing Address 6071 Ravenswicke Terrace
 City State Zip Code
 Davie FL 33331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME INT'L AREA FIELD SERVICES DIRECTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 900.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276446
 Amount of Each Receipt this Period
 45.03

B. JEANETTE LEBRECHT
 Full Name (Last, First, Middle Initial)
 Mailing Address 6071 Ravenswicke Terrace
 City State Zip Code
 Davie FL 33331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME INT'L AREA FIELD SERVICES DIRECTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 945.63

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : SA11AI.276640
 Amount of Each Receipt this Period
 45.03

C. ALAN L LEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 950 Seven Hills Drive #522
 City State Zip Code
 Henderson NV 89052
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME INT'L ASSISTANT TO REGIONAL DIRECTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 862.09

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276447
 Amount of Each Receipt this Period
 43.45

SUBTOTAL of Receipts This Page (optional).....▶	133.51
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 422 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ALAN L LEE
Full Name (Last, First, Middle Initial)

Mailing Address 950 Seven Hills Drive
#522

City Henderson State NV Zip Code 89052

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

Name of Employer AFSCME INT'L Occupation ASSISTANT TO REGIONAL DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
905.54

Date of Receipt
11 / 15 / 2012
Transaction ID : SA11AI.276641

Amount of Each Receipt this Period
43.45

B. SUE C. LEE-ALLEN
Full Name (Last, First, Middle Initial)

Mailing Address 7935 SW Santolina Place

City Beaverton State OR Zip Code 97008-6272

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

Name of Employer AFSCME OR CN 75 Occupation ORGANIZING DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
763.00

Date of Receipt
10 / 31 / 2012
Transaction ID : SA11AI.279363

Amount of Each Receipt this Period
70.00

C. ERIC N. LEHTO
Full Name (Last, First, Middle Initial)

Mailing Address 2122 West 2nd Street
Apt. #2

City Duluth State MN Zip Code 55086

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

Name of Employer AFSCME MN CN 5/CN14 Occupation DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1207.42

Date of Receipt
11 / 14 / 2012
Transaction ID : SA11AI.280045

Amount of Each Receipt this Period
103.22

SUBTOTAL of Receipts This Page (optional).....▶ 216.67

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 423 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LORRAINE K. LEICHNER
Full Name (Last, First, Middle Initial)

Mailing Address 590 S. Everett Avenue

City Columbus State OH Zip Code 43213

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation RECORDS MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278476

Amount of Each Receipt this Period 11.00

B. LORRAINE K. LEICHNER
Full Name (Last, First, Middle Initial)

Mailing Address 590 S. Everett Avenue

City Columbus State OH Zip Code 43213

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation RECORDS MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 242.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278834

Amount of Each Receipt this Period 11.00

C. LORRAINE K. LEICHNER
Full Name (Last, First, Middle Initial)

Mailing Address 590 S. Everett Avenue

City Columbus State OH Zip Code 43213

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation RECORDS MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 253.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279192

Amount of Each Receipt this Period 11.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 33.00

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 424 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ROBERT M. LELIS
Full Name (Last, First, Middle Initial)

Mailing Address 7805 Normandie Blvd.
Apt. E

City Cleveland State OH Zip Code 44130

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt
10 / 19 / 2012

Transaction ID : SA11AI.278477

Amount of Each Receipt this Period
15.00

B. ROBERT M. LELIS
Full Name (Last, First, Middle Initial)

Mailing Address 7805 Normandie Blvd.
Apt. E

City Cleveland State OH Zip Code 44130

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
11 / 02 / 2012

Transaction ID : SA11AI.278835

Amount of Each Receipt this Period
15.00

C. ROBERT M. LELIS
Full Name (Last, First, Middle Initial)

Mailing Address 7805 Normandie Blvd.
Apt. E

City Cleveland State OH Zip Code 44130

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt
11 / 16 / 2012

Transaction ID : SA11AI.279193

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... **45.00**

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 425 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DINO LEONE
Full Name (Last, First, Middle Initial)

Mailing Address 9115 Turkey Hollow Rd.

City Taylor Ridge	State IL	Zip Code 61284
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
697.60

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11AI.279557

Amount of Each Receipt this Period
69.76

B. DAVID J. LEVIN
Full Name (Last, First, Middle Initial)

Mailing Address 41 Florence Place

City Pittsburgh	State PA	Zip Code 15228
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13/STATE OF PA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.279739

Amount of Each Receipt this Period
28.00

C. ROGER LEVINGS
Full Name (Last, First, Middle Initial)

Mailing Address 206 East Dunklin Street

City Jefferson City	State MO	Zip Code 65101
------------------------	-------------	-------------------

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

Name of Employer AFSCME MO CN 72	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
528.01

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.280350

Amount of Each Receipt this Period
19.79

SUBTOTAL of Receipts This Page (optional).....▶	117.55
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 426 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ROGER LEVINGS
Full Name (Last, First, Middle Initial)

Mailing Address 206 East Dunklin Street

City Jefferson City State MO Zip Code 65101

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

Name of Employer AFSCME MO CN 72 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **547.80**

Date of Receipt **11 / 05 / 2012**

Transaction ID : SA11AI.280358

Amount of Each Receipt this Period **19.79**

B. ROGER LEVINGS
Full Name (Last, First, Middle Initial)

Mailing Address 206 East Dunklin Street

City Jefferson City State MO Zip Code 65101

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

Name of Employer AFSCME MO CN 72 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **567.59**

Date of Receipt **11 / 26 / 2012**

Transaction ID : SA11AI.280366

Amount of Each Receipt this Period **19.79**

C. SUSAN T. LEVITAN
Full Name (Last, First, Middle Initial)

Mailing Address 2650 Worrell Court

City Crofton State MD Zip Code 21114

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

Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, POLITICAL ACTION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **943.81**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.276448

Amount of Each Receipt this Period **48.41**

SUBTOTAL of Receipts This Page (optional)..... **87.99**

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 427 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. SUSAN T. LEVITAN
Full Name (Last, First, Middle Initial)

Mailing Address 2650 Worrell Court

City Crofton	State MD	Zip Code 21114
-----------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, POLITICAL ACTION
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
992.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SA11AI.276642

Amount of Each Receipt this Period
48.41

B. KAREN S. LEVY-MCCANNA
Full Name (Last, First, Middle Initial)

Mailing Address 221 East 13th

City Lockport	State IL	Zip Code 60441
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31/STATE OF IL	Occupation EXECUTIVE II
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11AI.279441

Amount of Each Receipt this Period
90.00

C. SARAH LEWERENZ
Full Name (Last, First, Middle Initial)

Mailing Address 6997 West Van Road

City Duluth	State MN	Zip Code 55803-9359
----------------	-------------	------------------------

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

Name of Employer AFSCME MN CN 65	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
791.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2012

Transaction ID : SA11AI.280380

Amount of Each Receipt this Period
70.12

SUBTOTAL of Receipts This Page (optional).....▶	208.53
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 428 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CORDELIA M. LEWIS
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 5149

City Boston State MA Zip Code 02206-5149

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

Name of Employer AFSCME INT'L/STATE STREET Occupation RETIREE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **335.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2012

Transaction ID : SA11AI.276739

Amount of Each Receipt this Period
35.00

B. GREG LEWIS
Full Name (Last, First, Middle Initial)

Mailing Address 1816 E. 22nd Street

City Des Moines State IA Zip Code 50317

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

Name of Employer AFSCME IA CN 61 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **660.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2012

Transaction ID : SA11AI.280080

Amount of Each Receipt this Period
60.00

C. JENNIE A. LEWIS
Full Name (Last, First, Middle Initial)

Mailing Address 390 Worthington Road

City Westerville State OH Zip Code 43082

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

Name of Employer AFSCME OH LOC 11 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 24 / 2012

Transaction ID : SA11AI.280117

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **135.00**

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 429 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MICHELE LEWIS
Full Name (Last, First, Middle Initial)

Mailing Address 205 Franklin Avenue

City Silver Spring State MD Zip Code 20901

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

Name of Employer AFSCME INT'L Occupation DIRECTOR, CONF & TRAVEL SVCS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1082.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276449

Amount of Each Receipt this Period
 47.31

B. MICHELE LEWIS
Full Name (Last, First, Middle Initial)

Mailing Address 205 Franklin Avenue

City Silver Spring State MD Zip Code 20901

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

Name of Employer AFSCME INT'L Occupation DIRECTOR, CONF & TRAVEL SVCS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1129.51

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : SA11AI.276643

Amount of Each Receipt this Period
 47.31

C. MARGARET R. LEWIS-SIDIME
Full Name (Last, First, Middle Initial)

Mailing Address 722 S Lyman Avenue

City Oak Park State IL Zip Code 60304

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

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
677.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.279558

Amount of Each Receipt this Period
 67.74

SUBTOTAL of Receipts This Page (optional).....▶	162.36
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 430 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ANN LIEBERMAN
Full Name (Last, First, Middle Initial)

Mailing Address 1329 Carlisle Avenue

City Dayton State OH Zip Code 45420

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

Name of Employer AFSCME OH CN 8/CITY OF DAYTON Occupation TRAFFIC ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **326.18**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.279818

Amount of Each Receipt this Period **9.50**

B. VALERY LIGHT
Full Name (Last, First, Middle Initial)

Mailing Address 32 Barley Lane

City Palmyra State PA Zip Code 17078

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **875.00**

Date of Receipt **11 / 14 / 2012**

Transaction ID : SA11AI.279659

Amount of Each Receipt this Period **78.28**

C. ELLEN H. LIM
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 1977

City Waianae State HI Zip Code 96792

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

Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **11 / 02 / 2012**

Transaction ID : SA11AI.280423

Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional)..... **112.78**

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 431 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ANDERS LINDALL
 Full Name (Last, First, Middle Initial)
 Mailing Address 2524 West Hutchinson
 City Chicago State IL Zip Code 60618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 753.60

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.279559
 Amount of Each Receipt this Period
 75.36

B. BRIAN J. LINDHOLT
 Full Name (Last, First, Middle Initial)
 Mailing Address 2311 McKinley Street NE
 City Minneapolis State MN Zip Code 55418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.278192
 Amount of Each Receipt this Period
 50.00

C. MICHAEL LINDHOLT
 Full Name (Last, First, Middle Initial)
 Mailing Address 2752 Randolph Street NE
 City Minneapolis State MN Zip Code 55418-2622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1380.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.278193
 Amount of Each Receipt this Period
 120.00

SUBTOTAL of Receipts This Page (optional).....▶	245.36
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 432 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOHN LINDSEY
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson Street SE

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277189

Amount of Each Receipt this Period 10.00

B. JOHN LINDSEY
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson Street SE

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277773

Amount of Each Receipt this Period 10.00

C. THERESA LIPKO
Full Name (Last, First, Middle Initial)

Mailing Address 117 South Main Street

City Carbondale State PA Zip Code 18407

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 658.39

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.279660

Amount of Each Receipt this Period 62.56

SUBTOTAL of Receipts This Page (optional)..... ▶ 82.56

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 433 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. TOM LIPKO		Date of Receipt
Mailing Address 117 South Main Street		<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
City	State	Zip Code
Carbondale	PA	18407
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.279661
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="38.54"/>
Name of Employer	Occupation	
AFSCME PA CN 13	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="401.27"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. JAMECIA L. LITTLE		Date of Receipt
Mailing Address 3237 Stirling Bridge		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City	State	Zip Code
Canal Winchester	OH	43110
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.280118
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="60.00"/>
Name of Employer	Occupation	
AFSCME OH LOC 11/STATE OF OH	MANAGEMENT ANALYST	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="660.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. EARL W. LITTLEFIELD		Date of Receipt
Mailing Address 1322 Seymour Avenue		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City	State	Zip Code
Columbus	OH	43206
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.278480
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="15.00"/>
Name of Employer	Occupation	
AFSCME OH LOC 11/STATE OF OH	OFFICE SERVICES SUPERVISOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="315.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="113.54"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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 434 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. EARL W. LITTLEFIELD
Full Name (Last, First, Middle Initial)

Mailing Address 1322 Seymour Avenue

City Columbus State OH Zip Code 43206

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation OFFICE SERVICES SUPERVISOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt **11 / 02 / 2012**

Transaction ID : SA11AI.278838

Amount of Each Receipt this Period **15.00**

B. EARL W. LITTLEFIELD
Full Name (Last, First, Middle Initial)

Mailing Address 1322 Seymour Avenue

City Columbus State OH Zip Code 43206

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation OFFICE SERVICES SUPERVISOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt **11 / 16 / 2012**

Transaction ID : SA11AI.279196

Amount of Each Receipt this Period **15.00**

C. RICHARD H. LLOYD
Full Name (Last, First, Middle Initial)

Mailing Address 2916 Kipling Court

City Springfield State IL Zip Code 62711

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

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation PUBLIC SERVICE ADMIN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **11 / 01 / 2012**

Transaction ID : SA11AI.279442

Amount of Each Receipt this Period **30.00**

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 435 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. COREY LOCKARD			Date of Receipt
Mailing Address P.O. Box 22			<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279662
Benton	PA	17814	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="73.16"/>
Name of Employer	Occupation		
AFSCME PA CN 13	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="823.05"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. KENNETH H LOEFFLER-KEMP			Date of Receipt
Mailing Address 2902 Bald Eagle Trail			<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.280046
Duluth	MN	55804	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="65.74"/>
Name of Employer	Occupation		
AFSCME MN CN 5	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="723.14"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. PAUL LONG			Date of Receipt
Mailing Address P.O. Box 310864			<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279881
Flint	MI	48531	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="22.34"/>
Name of Employer	Occupation		
AFSCME MI CN 25	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="427.37"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="161.24"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 436 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. PAUL LONG			Date of Receipt
Mailing Address P.O. Box 310864			<input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279931
Flint	MI	48531	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
AFSCME MI CN 25	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="447.37"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. DAMIAN LONNEE			Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300			<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276900
Olympia	WA	98501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.50"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. DAMIAN LONNEE			Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300			<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.277191
Olympia	WA	98501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.50"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.50"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="41.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 437 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DAMIAN LONNEE
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277775

Amount of Each Receipt this Period
10.50

B. MAGGIE LORENC
Full Name (Last, First, Middle Initial)

Mailing Address 1700 W Summerdale Avenue

City Chicago State IL Zip Code 60640

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

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 521.00

Date of Receipt
11 / 01 / 2012
Transaction ID : SA11AI.279560

Amount of Each Receipt this Period
60.80

C. SABRINA LOVE
Full Name (Last, First, Middle Initial)

Mailing Address 23 Chadwick Drive

City Stafford State VA Zip Code 22556

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

Name of Employer AFSCME INT'L Occupation ADMINISTRATIVE ASSISTANT I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 470.53

Date of Receipt
10 / 31 / 2012
Transaction ID : SA11AI.276450

Amount of Each Receipt this Period
21.85

SUBTOTAL of Receipts This Page (optional).....▶	93.15
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 438 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. SABRINA LOVE			Date of Receipt
Mailing Address 23 Chadwick Drive			<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276644
Stafford	VA	22556	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="22.85"/>
Name of Employer	Occupation		
AFSCME INT'L	ADMINISTRATIVE ASSISTANT I		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="493.38"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. CHARLES M. LOVELESS			Date of Receipt
Mailing Address 2100 11th Street NW #206			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276451
Washington	DC	20001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="77.81"/>
Name of Employer	Occupation		
AFSCME INT'L	DIRECTOR, FED GOVT AFFAIRS		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1556.20"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. CHARLES M. LOVELESS			Date of Receipt
Mailing Address 2100 11th Street NW #206			<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276645
Washington	DC	20001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="77.81"/>
Name of Employer	Occupation		
AFSCME INT'L	DIRECTOR, FED GOVT AFFAIRS		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1634.01"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="178.47"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 439 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. GEORGE LOVELL
Full Name (Last, First, Middle Initial)

Mailing Address RR 3 Box 3403

City Goshen State VT Zip Code 05733-0000

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

Name of Employer AFSCME MA CN 93 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **668.36**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2012

Transaction ID : SA11AI.280014

Amount of Each Receipt this Period
60.76

B. EARL M. LUCERO
Full Name (Last, First, Middle Initial)

Mailing Address 1896 Kinoole Street C Apt. C

City Hilo State HI Zip Code 96720

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

Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2012

Transaction ID : SA11AI.280424

Amount of Each Receipt this Period
20.00

C. SALVATORE LUCIANO
Full Name (Last, First, Middle Initial)

Mailing Address 947 Bunker Hill Road

City Watertown State CT Zip Code 06795-0000

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

Name of Employer AFSCME CT CN 4 Occupation EXECUTIVE DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1160.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.276326

Amount of Each Receipt this Period
14.00

SUBTOTAL of Receipts This Page (optional)..... **94.76**

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 440 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. WILLIAM LUCY

Mailing Address 1831 Sudbury Lane NW

City Washington State DC Zip Code 20012-2202

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

Name of Employer AFSCME INT'L/STATE STREET Occupation RETIREE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1939.52**

Date of Receipt **11 / 02 / 2012**

Transaction ID : SA11AI.276740

Amount of Each Receipt this Period **176.32**

Full Name (Last, First, Middle Initial)
B. THERESA LUDWICK

Mailing Address 1212 Jefferson Street SE

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **11 / 09 / 2012**

Transaction ID : SA11AI.277192

Amount of Each Receipt this Period **10.00**

Full Name (Last, First, Middle Initial)
C. THERESA LUDWICK

Mailing Address 1212 Jefferson Street SE

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 26 / 2012**

Transaction ID : SA11AI.277776

Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **196.32**

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 441 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. ROSANNE LUGO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson Street SE
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277193
 Amount of Each Receipt this Period
 10.00

B. ROSANNE LUGO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson Street SE
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277777
 Amount of Each Receipt this Period
 10.00

C. MATTHEW A. LUKOW
 Full Name (Last, First, Middle Initial)
 Mailing Address 9 Whisperglan Lane
 City Springfield State IL Zip Code 62704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31/STATE OF IL Occupation CORRECTIONS OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.279443
 Amount of Each Receipt this Period
 20.84

SUBTOTAL of Receipts This Page (optional)..... ▶ 40.84
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 442 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. DENISE ANN LUNDA			Date of Receipt		
Mailing Address 38 River Lane			M M M / D D D / Y Y Y Y Y Y 11 / 14 / 2012		
City State Zip Code Levittown PA 19055			Transaction ID : SA11AI.279663		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 41.72		
Name of Employer AFSCME PA CN 13		Occupation COURT CLERK ADMINISTRATOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 485.10			

Full Name (Last, First, Middle Initial) B. CHARLES H. LUNDY			Date of Receipt		
Mailing Address 2024 SW 173 Avenue			M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2012		
City State Zip Code Miramar FL 33029			Transaction ID : SA11AI.276452		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 41.52		
Name of Employer AFSCME INT'L		Occupation AREA ORGANIZING DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 828.64			

Full Name (Last, First, Middle Initial) C. CHARLES H. LUNDY			Date of Receipt		
Mailing Address 2024 SW 173 Avenue			M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2012		
City State Zip Code Miramar FL 33029			Transaction ID : SA11AI.276646		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 41.52		
Name of Employer AFSCME INT'L		Occupation AREA ORGANIZING DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 870.16			

SUBTOTAL of Receipts This Page (optional).....▶	124.76
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 443 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. BENJAMIN LUPO

Mailing Address 1212 Jefferson Street SE

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **11 / 09 / 2012**
Transaction ID : SA11AI.277194

Amount of Each Receipt this Period **10.00**

Full Name (Last, First, Middle Initial)
B. BENJAMIN LUPO

Mailing Address 1212 Jefferson Street SE

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 26 / 2012**
Transaction ID : SA11AI.277778

Amount of Each Receipt this Period **10.00**

Full Name (Last, First, Middle Initial)
C. JOHN A. LYALL

Mailing Address 383 Ashmoore Circle East

City Powell State OH Zip Code 43065

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

Name of Employer AFSCME OH CN 8 Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1303.27**

Date of Receipt **10 / 31 / 2012**
Transaction ID : SA11AI.276327

Amount of Each Receipt this Period **14.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **34.00**

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 444 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOHN A. LYALL
Full Name (Last, First, Middle Initial)

Mailing Address 383 Ashmoore Circle East

City Powell	State OH	Zip Code 43065
----------------	-------------	-------------------

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

Name of Employer AFSCME OH CN 8	Occupation PRESIDENT
------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1415.13**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.279819

Amount of Each Receipt this Period

111.86

B. RANDELL LYNCH
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 3311

City Peoria	State IL	Zip Code 61612
----------------	-------------	-------------------

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

Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **469.71**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11AI.279561

Amount of Each Receipt this Period

8.40

C. ROBERTA LYNCH
Full Name (Last, First, Middle Initial)

Mailing Address 4650 N. Hermitage Street

City Chicago	State IL	Zip Code 60640
-----------------	-------------	-------------------

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

Name of Employer AFSCME IL CN 31	Occupation DEPUTY DIRECTOR
-------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1118.84**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276328

Amount of Each Receipt this Period

14.00

SUBTOTAL of Receipts This Page (optional).....▶	134.26
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 445 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ROBERTA LYNCH
Full Name (Last, First, Middle Initial)

Mailing Address 4650 N. Hermitage Street

City Chicago	State IL	Zip Code 60640
-----------------	-------------	-------------------

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

Name of Employer AFSCME IL CN 31	Occupation DEPUTY DIRECTOR
-------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1227.60

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11AI.279562

Amount of Each Receipt this Period
108.76

B. ROBERT LYONS
Full Name (Last, First, Middle Initial)

Mailing Address 1605 Parmenter Street

City Middleton	State WI	Zip Code 53562
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L/STATE STREET	Occupation RETIREE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.276741

Amount of Each Receipt this Period
20.00

C. BRENDA L. MABE
Full Name (Last, First, Middle Initial)

Mailing Address 34291 Brokaw Road

City Columbia Station	State OH	Zip Code 44028
--------------------------	-------------	-------------------

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

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
365.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.278483

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	148.76
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: (check only one)	PAGE 446 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. BRENDA L. MABE		Date of Receipt
Mailing Address 34291 Brokaw Road		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City Columbia Station State OH Zip Code 44028		Transaction ID : SA11AI.278841
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="385.00"/>	

Full Name (Last, First, Middle Initial) B. BRENDA L. MABE		Date of Receipt
Mailing Address 34291 Brokaw Road		<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City Columbia Station State OH Zip Code 44028		Transaction ID : SA11AI.279199
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="405.00"/>	

Full Name (Last, First, Middle Initial) C. CHRISTOPHER A. MABE		Date of Receipt
Mailing Address 34291 Brokaw Road		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City Columbia Station State OH Zip Code 44028		Transaction ID : SA11AI.278484
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION SERGEANT		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="525.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="65.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 447 OF 846
	<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	<input 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

A. CHRISTOPHER A. MABE
Full Name (Last, First, Middle Initial)

Mailing Address 34291 Brokaw Road

City Columbia Station State OH Zip Code 44028

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION SERGEANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278842

Amount of Each Receipt this Period 25.00

B. CHRISTOPHER A. MABE
Full Name (Last, First, Middle Initial)

Mailing Address 34291 Brokaw Road

City Columbia Station State OH Zip Code 44028

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION SERGEANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 575.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279200

Amount of Each Receipt this Period 25.00

C. MICHAEL P. MAGUIRE
Full Name (Last, First, Middle Initial)

Mailing Address 20 Duffield Drive

City Lititz State PA Zip Code 17543

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 894.37

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.279664

Amount of Each Receipt this Period 78.28

SUBTOTAL of Receipts This Page (optional)..... ▶ 128.28

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 448 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LOUIS J. MAHOLIC
 Full Name (Last, First, Middle Initial)
 Mailing Address 2726 Juno Place
 Apt. #2
 City Fairlawn State OH Zip Code 44333
 Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 628.52

Date of Receipt 10 / 31 / 2012
 Transaction ID : SA11AI.279820
 Amount of Each Receipt this Period 64.18

B. DEANGELO MALCOLM
 Full Name (Last, First, Middle Initial)
 Mailing Address 1034 N. Washington Avenue
 City Lansing State MI Zip Code 48906
 Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 611.52

Date of Receipt 11 / 07 / 2012
 Transaction ID : SA11AI.279882
 Amount of Each Receipt this Period 29.12

C. DEANGELO MALCOLM
 Full Name (Last, First, Middle Initial)
 Mailing Address 1034 N. Washington Avenue
 City Lansing State MI Zip Code 48906
 Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.64

Date of Receipt 11 / 20 / 2012
 Transaction ID : SA11AI.279932
 Amount of Each Receipt this Period 29.12

SUBTOTAL of Receipts This Page (optional).....▶ 122.42
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 449 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JULIA C. C. MALETTE
 Full Name (Last, First, Middle Initial)
 Mailing Address 190 W. Ostend Street
 Suite 101
 City Baltimore State MD Zip Code 21230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 495.00

Date of Receipt 11 / 05 / 2012
Transaction ID : SA11AI.279990
 Amount of Each Receipt this Period 45.00

B. ALETHA L. MALINDA
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 1642
 City Medical Lake State WA Zip Code 99022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276906
 Amount of Each Receipt this Period 27.00

C. ALETHA L. MALINDA
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 1642
 City Medical Lake State WA Zip Code 99022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 567.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277197
 Amount of Each Receipt this Period 27.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 99.00
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 450 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ALETHA L. MALINDA
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 1642

City Medical Lake State WA Zip Code 99022

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **594.00**

Date of Receipt **11 / 26 / 2012**

Transaction ID : SA11Al.277781

Amount of Each Receipt this Period **27.00**

B. KENNETH MALLERY
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **209.00**

Date of Receipt **11 / 26 / 2012**

Transaction ID : SA11Al.277782

Amount of Each Receipt this Period **9.50**

C. CURTICE A. MALONE
Full Name (Last, First, Middle Initial)

Mailing Address 29509 Fairway Blvd.

City Willowick State OH Zip Code 44095

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation TRANSPORTATION TECHN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt **10 / 19 / 2012**

Transaction ID : SA11Al.278488

Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional)..... **56.50**

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 451 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CURTICE A. MALONE
Full Name (Last, First, Middle Initial)

Mailing Address 29509 Fairway Blvd.

City Willowick State OH Zip Code 44095

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation TRANSPORTATION TECHN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278846

Amount of Each Receipt this Period 20.00

B. CURTICE A. MALONE
Full Name (Last, First, Middle Initial)

Mailing Address 29509 Fairway Blvd.

City Willowick State OH Zip Code 44095

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation TRANSPORTATION TECHN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279204

Amount of Each Receipt this Period 20.00

C. KATHRYN S. MALONE
Full Name (Last, First, Middle Initial)

Mailing Address 988 Circle on the Green

City Columbus State OH Zip Code 43235

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

Name of Employer AFSCME OH LOC 4 Occupation DIRECTOR, POLITICAL ACTION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 938.50

Date of Receipt 10 / 24 / 2012
Transaction ID : SA11AI.280177

Amount of Each Receipt this Period 38.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 78.50

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 452 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KATHRYN S. MALONE
Full Name (Last, First, Middle Initial)

Mailing Address 988 Circle on the Green

City Columbus State OH Zip Code 43235

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

Name of Employer AFSCME OH LOC 4 Occupation DIRECTOR, POLITICAL ACTION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **977.00**

Date of Receipt **11 / 06 / 2012**

Transaction ID : SA11AI.280232

Amount of Each Receipt this Period **38.50**

B. LARRY MALONE
Full Name (Last, First, Middle Initial)

Mailing Address 5185 Horseshoe Falls Drive

City Dublin State OH Zip Code 43016

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

Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **955.50**

Date of Receipt **10 / 24 / 2012**

Transaction ID : SA11AI.280178

Amount of Each Receipt this Period **38.50**

C. LARRY MALONE
Full Name (Last, First, Middle Initial)

Mailing Address 5185 Horseshoe Falls Drive

City Dublin State OH Zip Code 43016

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

Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **994.00**

Date of Receipt **11 / 06 / 2012**

Transaction ID : SA11AI.280233

Amount of Each Receipt this Period **38.50**

SUBTOTAL of Receipts This Page (optional)..... **115.50**

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 453 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KENT O. MANAOIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 632 Pumehana Street
 City Wailuku State HI Zip Code 96793-1334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **11 / 02 / 2012**
Transaction ID : SA11AI.280426
 Amount of Each Receipt this Period **200.00**

B. MICHAEL A. MARETTE
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 25731
 City Woodbury State MN Zip Code 55125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ASST. DIRECTOR, ORG & FIELD SERVICES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1050.00**

Date of Receipt **10 / 31 / 2012**
Transaction ID : SA11AI.276453
 Amount of Each Receipt this Period **52.50**

C. MICHAEL A. MARETTE
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 25731
 City Woodbury State MN Zip Code 55125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ASST. DIRECTOR, ORG & FIELD SERVICES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1102.50**

Date of Receipt **11 / 15 / 2012**
Transaction ID : SA11AI.276647
 Amount of Each Receipt this Period **52.50**

SUBTOTAL of Receipts This Page (optional)..... **125.00**
TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 454 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. TINA A. MARKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 577 Price Road
 City Newark State OH Zip Code 43055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation ACCOUNTANT/EXAMINER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278491
 Amount of Each Receipt this Period 10.00

B. TINA A. MARKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 577 Price Road
 City Newark State OH Zip Code 43055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation ACCOUNTANT/EXAMINER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278849
 Amount of Each Receipt this Period 10.00

C. TINA A. MARKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 577 Price Road
 City Newark State OH Zip Code 43055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation ACCOUNTANT/EXAMINER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279207
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
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 455 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. MELLISA C. MARKSTROM
 Full Name (Last, First, Middle Initial)
 Mailing Address 4123 N. 18th Place
 City Phoenix State AZ Zip Code 85016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ORGANIZER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 428.20

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276454
 Amount of Each Receipt this Period 21.41

B. MELLISA C. MARKSTROM
 Full Name (Last, First, Middle Initial)
 Mailing Address 4123 N. 18th Place
 City Phoenix State AZ Zip Code 85016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ORGANIZER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 449.61

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276648
 Amount of Each Receipt this Period 21.41

C. ALIXETTA M. MARLOW
 Full Name (Last, First, Middle Initial)
 Mailing Address 3937 Blueberry Hollow Road
 City Gahanna State OH Zip Code 43230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4 Occupation ADMINISTRATIVE ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 898.50

Date of Receipt 10 / 24 / 2012
Transaction ID : SA11AI.280179
 Amount of Each Receipt this Period 38.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 81.32
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 456 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ALIXETTA M. MARLOW
Full Name (Last, First, Middle Initial)

Mailing Address 3937 Blueberry Hollow Road

City State Zip Code
Gahanna OH 43230

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

Name of Employer Occupation
AFSCME OH LOC 4 ADMINISTRATIVE ASSISTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **937.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2012

Transaction ID : SA11AI.280234

Amount of Each Receipt this Period
38.50

B. DAVID MARLOW
Full Name (Last, First, Middle Initial)

Mailing Address 1040 W Adams Street
Unit 432

City State Zip Code
Chicago IL 60607

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

Name of Employer Occupation
AFSCME IL CN 31 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **747.80**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2012

Transaction ID : SA11AI.279563

Amount of Each Receipt this Period
74.78

C. CHARLES H. MARTIN
Full Name (Last, First, Middle Initial)

Mailing Address 707 Russell Avenue N.

City State Zip Code
Minneapolis MN 55411

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

Name of Employer Occupation
AFSCME MN CN 5/CN14 STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **782.49**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2012

Transaction ID : SA11AI.280048

Amount of Each Receipt this Period
71.13

SUBTOTAL of Receipts This Page (optional)..... **184.41**

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 457 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ELIZA MARTIN
Full Name (Last, First, Middle Initial)
Mailing Address 91-208 Kekepania Place E.
City Kapolei State HI Zip Code 96707-2721
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **550.00**

Date of Receipt **11 / 02 / 2012**
Transaction ID : SA11AI.280427
Amount of Each Receipt this Period **50.00**

B. GARY MARTIN
Full Name (Last, First, Middle Initial)
Mailing Address 255 Trail East
City Pataskala State OH Zip Code 43062
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME OH LOC 4 Occupation ASSOCIATE DIRECTOR
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **880.00**

Date of Receipt **10 / 24 / 2012**
Transaction ID : SA11AI.280180
Amount of Each Receipt this Period **40.00**

C. GARY MARTIN
Full Name (Last, First, Middle Initial)
Mailing Address 255 Trail East
City Pataskala State OH Zip Code 43062
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME OH LOC 4 Occupation ASSOCIATE DIRECTOR
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **920.00**

Date of Receipt **11 / 06 / 2012**
Transaction ID : SA11AI.280235
Amount of Each Receipt this Period **40.00**

SUBTOTAL of Receipts This Page (optional)..... **130.00**
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 458 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. LISA G. MARTIN		Date of Receipt
Mailing Address 5450 Whitley Park Terrace #102		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City Bethesda	State MD	Zip Code 20814
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276455
Name of Employer AFSCME INT'L	Occupation ADMINISTRATIVE ASSISTANT II	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="39.05"/>
	<input type="text" value="741.22"/>	

Full Name (Last, First, Middle Initial) B. LISA G. MARTIN		Date of Receipt
Mailing Address 5450 Whitley Park Terrace #102		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City Bethesda	State MD	Zip Code 20814
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276649
Name of Employer AFSCME INT'L	Occupation ADMINISTRATIVE ASSISTANT II	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="39.05"/>
	<input type="text" value="780.27"/>	

Full Name (Last, First, Middle Initial) C. SUSAN J. MARTINEZ		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.277200
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="10.00"/>
	<input type="text" value="210.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="88.10"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 459 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. SUSAN J. MARTINEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson St., SE
 Suite 300
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **11 / 26 / 2012**
Transaction ID : SA11AI.277784
 Amount of Each Receipt this Period **100.00**

B. KIMBERLY A. MASSENGILL-BERNARDIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 8000 Brookpoint Place
 City Westerville State OH Zip Code 43081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH CN 8 Occupation ASSOCIATE COUNSEL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **714.74**

Date of Receipt **10 / 31 / 2012**
Transaction ID : SA11AI.279821
 Amount of Each Receipt this Period **71.58**

C. ROBERT E. MASTERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3407 4th Street
 City Union Gap State WA Zip Code 98903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt **10 / 25 / 2012**
Transaction ID : SA11AI.276910
 Amount of Each Receipt this Period **21.00**

SUBTOTAL of Receipts This Page (optional)..... **102.58**
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 460 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. ROBERT E. MASTERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3407 4th Street
 City Union Gap State WA Zip Code 98903
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 441.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277201
 Amount of Each Receipt this Period 21.00

B. ROBERT E. MASTERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3407 4th Street
 City Union Gap State WA Zip Code 98903
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 462.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277785
 Amount of Each Receipt this Period 21.00

C. HARVEY S. MATSUI
 Full Name (Last, First, Middle Initial)
 Mailing Address 33 Wailuku Lane Unit 104
 City Wailuku State HI Zip Code 96793
 Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.280428
 Amount of Each Receipt this Period 21.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 63.00
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 461 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JILLIAN J MATUNDAN
Full Name (Last, First, Middle Initial)

Mailing Address 134 North Pine Avenue

City Albany State NY Zip Code 12203

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

Name of Employer AFSCME INT'L Occupation FIELD COORDINATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1201.15

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012

Transaction ID : SA11AI.276456

Amount of Each Receipt this Period
 52.78

B. JILLIAN J MATUNDAN
Full Name (Last, First, Middle Initial)

Mailing Address 134 North Pine Avenue

City Albany State NY Zip Code 12203

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

Name of Employer AFSCME INT'L Occupation FIELD COORDINATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1253.93

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2012

Transaction ID : SA11AI.276650

Amount of Each Receipt this Period
 52.78

C. MARSHALL L. MAXWELL
Full Name (Last, First, Middle Initial)

Mailing Address 10409 19th Avenue CT Apt.C

City Tacoma State WA Zip Code 98444

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012

Transaction ID : SA11AI.277203

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.56

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 462 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. MARSHALL L. MAXWELL

Mailing Address 10409 19th Avenue CT
Apt.C

City Tacoma State WA Zip Code 98444

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

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 26 / 2012**

Transaction ID : SA11AI.277787

Amount of Each Receipt this Period **100.00**

Full Name (Last, First, Middle Initial)
B. MATTHEW MAYERS

Mailing Address 1833 Ontario Place NW

City Washington State DC Zip Code 20009

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

Name of Employer AFSCME INT'L Occupation MANAGER, STRATEGIC RESEARCH

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **907.80**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.276457

Amount of Each Receipt this Period **45.39**

Full Name (Last, First, Middle Initial)
C. MATTHEW MAYERS

Mailing Address 1833 Ontario Place NW

City Washington State DC Zip Code 20009

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

Name of Employer AFSCME INT'L Occupation MANAGER, STRATEGIC RESEARCH

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **953.19**

Date of Receipt **11 / 15 / 2012**

Transaction ID : SA11AI.276651

Amount of Each Receipt this Period **45.39**

SUBTOTAL of Receipts This Page (optional)..... **100.78**

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 463 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. JEFF MAZUR
 Full Name (Last, First, Middle Initial)
 Mailing Address 503 Redwing Drive
 City Ashland State MO Zip Code 65010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MO CN 72 Occupation COUNCIL DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **672.98**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 19 / 2012
Transaction ID : SA11AI.280351
 Amount of Each Receipt this Period
35.42

B. JEFF MAZUR
 Full Name (Last, First, Middle Initial)
 Mailing Address 503 Redwing Drive
 City Ashland State MO Zip Code 65010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MO CN 72 Occupation COUNCIL DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **708.40**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 05 / 2012
Transaction ID : SA11AI.280359
 Amount of Each Receipt this Period
35.42

C. JEFF MAZUR
 Full Name (Last, First, Middle Initial)
 Mailing Address 503 Redwing Drive
 City Ashland State MO Zip Code 65010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MO CN 72 Occupation COUNCIL DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **743.82**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2012
Transaction ID : SA11AI.280367
 Amount of Each Receipt this Period
35.42

SUBTOTAL of Receipts This Page (optional)..... **106.26**
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 464 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. TIMOTHY W. MCALLISTER
Full Name (Last, First, Middle Initial)

Mailing Address 5379 Red Wynne Lane

City Hilliard State OH Zip Code 43026

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

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation PROGRAMMER/ANALYST 5

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279212

Amount of Each Receipt this Period 9.00

B. ELISSA MCBRIDE
Full Name (Last, First, Middle Initial)

Mailing Address 9 Sherman Avenue

City Takoma Park State MD Zip Code 20912

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

Name of Employer AFSCME INT'L Occupation DIRECTOR, EDUCATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2243.80

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276458

Amount of Each Receipt this Period 109.44

C. ELISSA MCBRIDE
Full Name (Last, First, Middle Initial)

Mailing Address 9 Sherman Avenue

City Takoma Park State MD Zip Code 20912

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

Name of Employer AFSCME INT'L Occupation DIRECTOR, EDUCATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2353.24

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276652

Amount of Each Receipt this Period 109.44

SUBTOTAL of Receipts This Page (optional)..... ▶ 227.88

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 465 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. CYNTHIA R. MCCABE		Date of Receipt
Mailing Address 4608 Harvard Road		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City State Zip Code College Park MD 20740		Transaction ID : SA11AI.276459
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="47.12"/>
Name of Employer AFSCME INT'L	Occupation ASSIST. DIRECTOR, EDITORIAL/PRODUCTI	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="985.03"/>	

Full Name (Last, First, Middle Initial) B. CYNTHIA R. MCCABE		Date of Receipt
Mailing Address 4608 Harvard Road		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City State Zip Code College Park MD 20740		Transaction ID : SA11AI.276653
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="47.12"/>
Name of Employer AFSCME INT'L	Occupation ASSIST. DIRECTOR, EDITORIAL/PRODUCTI	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1032.15"/>	

Full Name (Last, First, Middle Initial) C. BOYD B. MCCAMISH		Date of Receipt
Mailing Address 1004 Woodtown Drive		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City State Zip Code Gahanna OH 43230		Transaction ID : SA11AI.276460
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="43.71"/>
Name of Employer AFSCME INT'L	Occupation FIELD EDUCATION COORDINATOR II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="874.20"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="137.95"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 466 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BOYD B. MCCAMISH
Full Name (Last, First, Middle Initial)

Mailing Address 1004 Woodtown Drive

City Gahanna State OH Zip Code 43230

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

Name of Employer AFSCME INT'L Occupation FIELD EDUCATION COORDINATOR II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **917.91**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : SA11AI.276654

Amount of Each Receipt this Period
43.71

B. MARGARET MCCANN
Full Name (Last, First, Middle Initial)

Mailing Address 103 Lynnmore Drive

City Silver Spring State MD Zip Code 20901

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

Name of Employer AFSCME INT'L Occupation ASSOCIATE GENERAL COUNSEL II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.276461

Amount of Each Receipt this Period
60.50

C. MARGARET MCCANN
Full Name (Last, First, Middle Initial)

Mailing Address 103 Lynnmore Drive

City Silver Spring State MD Zip Code 20901

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

Name of Employer AFSCME INT'L Occupation ASSOCIATE GENERAL COUNSEL II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1270.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : SA11AI.276655

Amount of Each Receipt this Period
60.50

SUBTOTAL of Receipts This Page (optional).....▶	164.71
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 467 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ANDY MCCANTS
Full Name (Last, First, Middle Initial)
Mailing Address 1210 195th Street E.
City Spanaway State WA Zip Code 98387
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **420.00**

Date of Receipt **10 / 25 / 2012**
Transaction ID : SA11AI.276913
Amount of Each Receipt this Period **21.00**

B. ANDY MCCANTS
Full Name (Last, First, Middle Initial)
Mailing Address 1210 195th Street E.
City Spanaway State WA Zip Code 98387
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **441.00**

Date of Receipt **11 / 09 / 2012**
Transaction ID : SA11AI.277204
Amount of Each Receipt this Period **21.00**

C. ANDY MCCANTS
Full Name (Last, First, Middle Initial)
Mailing Address 1210 195th Street E.
City Spanaway State WA Zip Code 98387
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **462.00**

Date of Receipt **11 / 26 / 2012**
Transaction ID : SA11AI.277788
Amount of Each Receipt this Period **21.00**

SUBTOTAL of Receipts This Page (optional)..... **63.00**
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 468 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JOSH MCCARROLL		Date of Receipt
Mailing Address 3412 Knipp Drive Suite 102		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City	State	Zip Code
Jefferson City	MO	65109
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.280352
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME MO CN 72	STAFF REPRESENTATIVE	<input type="text" value="19.17"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="364.23"/>	

Full Name (Last, First, Middle Initial) B. JOSH MCCARROLL		Date of Receipt
Mailing Address 3412 Knipp Drive Suite 102		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City	State	Zip Code
Jefferson City	MO	65109
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.280360
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME MO CN 72	STAFF REPRESENTATIVE	<input type="text" value="19.17"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="383.40"/>	

Full Name (Last, First, Middle Initial) C. JOSH MCCARROLL		Date of Receipt
Mailing Address 3412 Knipp Drive Suite 102		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code
Jefferson City	MO	65109
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.280368
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME MO CN 72	STAFF REPRESENTATIVE	<input type="text" value="19.17"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="402.57"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="57.51"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 469 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. WILLIAM J. MCCARRON
Full Name (Last, First, Middle Initial)

Mailing Address 436 Lamb Road

City Carbondale State IL Zip Code 62902

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

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation SEC THERAPY AIDE I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **218.82**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2012

Transaction ID : SA11AI.279444

Amount of Each Receipt this Period
31.26

B. TARA MCCAULEY
Full Name (Last, First, Middle Initial)

Mailing Address 29 N. Wacker Drive Suite 800

City Chicago State IL Zip Code 60606

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

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **677.40**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2012

Transaction ID : SA11AI.279564

Amount of Each Receipt this Period
67.74

C. WILLIAM J. MCCLUNG
Full Name (Last, First, Middle Initial)

Mailing Address 5507 7th Avenue SE

City Salem State OR Zip Code 97306

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

Name of Employer AFSCME OR CN 75/STATE OF OR Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.278000

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... **129.00**

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 470 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LEO B. MCCONNELL
Full Name (Last, First, Middle Initial)

Mailing Address 620 Tunnelhill Street

City Gallitzin State PA Zip Code 16641

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

Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279743

Amount of Each Receipt this Period 24.00

B. SUZANNE MCCORMICK
Full Name (Last, First, Middle Initial)

Mailing Address 32 Harvest Lane

City West Grove State PA Zip Code 19390

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 698.35

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.279665

Amount of Each Receipt this Period 67.70

C. THOMAS F. MCCRACKEN
Full Name (Last, First, Middle Initial)

Mailing Address 343 East Main Street

City Mahaffey State PA Zip Code 15757-0000

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

Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STATE SUPERVISOR DISTR 2

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279745

Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 121.70

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 471 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. CHERYL MCCREARY
 Full Name (Last, First, Middle Initial)
 Mailing Address 6682 Congress
 City State Zip Code
 Belleville MI 48111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME MI CN 25 STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 262.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2012
Transaction ID : SA11AI.279883
 Amount of Each Receipt this Period
 12.50

B. CHERYL MCCREARY
 Full Name (Last, First, Middle Initial)
 Mailing Address 6682 Congress
 City State Zip Code
 Belleville MI 48111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME MI CN 25 STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2012
Transaction ID : SA11AI.279933
 Amount of Each Receipt this Period
 12.50

C. TONY MCCUBBIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7740 Cordova Road
 City State Zip Code
 Erie IL 61250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME IL CN 31 STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 475.51

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.279565
 Amount of Each Receipt this Period
 14.20

SUBTOTAL of Receipts This Page (optional)..... ▶ 39.20
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 472 OF 846
	<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

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

A. BRIAN P. MCDONNELL
Full Name (Last, First, Middle Initial)

Mailing Address 56 Chestnut Lane

City Niskayuna State NY Zip Code 12309

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

Name of Employer AFSCME INT'L Occupation POLITICAL ACTION COORDINATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **968.20**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.276462

Amount of Each Receipt this Period
48.41

B. BRIAN P. MCDONNELL
Full Name (Last, First, Middle Initial)

Mailing Address 56 Chestnut Lane

City Niskayuna State NY Zip Code 12309

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

Name of Employer AFSCME INT'L Occupation POLITICAL ACTION COORDINATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1016.61**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : SA11AI.276656

Amount of Each Receipt this Period
48.41

C. GERALD MCENTEE
Full Name (Last, First, Middle Initial)

Mailing Address 800 25th Street NW Apt. #406

City Washington State DC Zip Code 20037-2207

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

Name of Employer AFSCME INT'L/STATE STREET Occupation RETIREE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1994.64**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2012

Transaction ID : SA11AI.276743

Amount of Each Receipt this Period
137.05

SUBTOTAL of Receipts This Page (optional)..... **233.87**

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 473 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JERI MCEWEN
Full Name (Last, First, Middle Initial)

Mailing Address 4031 Executive Park Drive

City Harrisburg State PA Zip Code 17111-1599

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 543.95

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.279666

Amount of Each Receipt this Period
 48.66

B. KATHLEEN MCGAVIN
Full Name (Last, First, Middle Initial)

Mailing Address 665 Shannon Hill Road

City Meshoppen State PA Zip Code 18630

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

Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.279746

Amount of Each Receipt this Period
 16.00

C. NANCY MCGOVERN
Full Name (Last, First, Middle Initial)

Mailing Address 8 Beacon Street

City Boston State MA Zip Code 02108-0000

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

Name of Employer AFSCME MA CN 93 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2012
Transaction ID : SA11AI.280016

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 114.66

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 474 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. LYNNE E. MCGRAW		Date of Receipt
Mailing Address 1258 Smerset way		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City Pickerington	State OH	Zip Code 43147
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.280181
Name of Employer AFSCME OH LOC 4		Amount of Each Receipt this Period
Occupation DIRECTOR OF ACCOUNTING		<input type="text" value=""/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="30.00"/>
		<input type="text" value="760.00"/>

Full Name (Last, First, Middle Initial) B. LYNNE E. MCGRAW		Date of Receipt
Mailing Address 1258 Smerset way		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City Pickerington	State OH	Zip Code 43147
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.280236
Name of Employer AFSCME OH LOC 4		Amount of Each Receipt this Period
Occupation DIRECTOR OF ACCOUNTING		<input type="text" value=""/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="30.00"/>
		<input type="text" value="790.00"/>

Full Name (Last, First, Middle Initial) C. CARROLL J. MCGUIRE		Date of Receipt
Mailing Address 306 E. Marion		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City Marion	State IL	Zip Code 62959
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.279445
Name of Employer AFSCME IL CN 31/STATE OF IL		Amount of Each Receipt this Period
Occupation PUBLIC AID INVESTIGATOR		<input type="text" value=""/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="45.00"/>
		<input type="text" value="315.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="105.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 475 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. MICHAEL MCGUIRE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson Street SE
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277206
 Amount of Each Receipt this Period 10.00

B. MICHAEL MCGUIRE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson Street SE
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277789
 Amount of Each Receipt this Period 10.00

C. DAVID W. MCINTOSH
 Full Name (Last, First, Middle Initial)
 Mailing Address 115 Mound Street
 City Lebanon State OH Zip Code 45036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.58

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279822
 Amount of Each Receipt this Period 8.34

SUBTOTAL of Receipts This Page (optional)..... ▶ 28.34
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 476 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CHAD MCKENNA
 Full Name (Last, First, Middle Initial)
 Mailing Address 623 N. 39th Avenue W.
 City Duluth State MN Zip Code 56817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MN CN 5 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 441.98

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.280049
 Amount of Each Receipt this Period 40.18

B. KRISTEN E. MCKINLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 3656 Cannongate Drive
 City Columbus State OH Zip Code 43228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4 Occupation STAFF ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 404.04

Date of Receipt 10 / 24 / 2012
Transaction ID : SA11AI.280182
 Amount of Each Receipt this Period 19.24

C. KRISTEN E. MCKINLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 3656 Cannongate Drive
 City Columbus State OH Zip Code 43228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4 Occupation STAFF ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.28

Date of Receipt 11 / 06 / 2012
Transaction ID : SA11AI.280237
 Amount of Each Receipt this Period 19.24

SUBTOTAL of Receipts This Page (optional).....▶	78.66
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 477 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CHERYL L. MCKINNEY
Full Name (Last, First, Middle Initial)

Mailing Address 230 E 65th Street

City Tacoma	State WA	Zip Code 98404
----------------	-------------	-------------------

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

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
203.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		25		2012

Transaction ID : SA11Al.276916

Amount of Each Receipt this Period

13.00

B. CHERYL L. MCKINNEY
Full Name (Last, First, Middle Initial)

Mailing Address 230 E 65th Street

City Tacoma	State WA	Zip Code 98404
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
216.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		09		2012

Transaction ID : SA11Al.277207

Amount of Each Receipt this Period

13.00

C. CHERYL L. MCKINNEY
Full Name (Last, First, Middle Initial)

Mailing Address 230 E 65th Street

City Tacoma	State WA	Zip Code 98404
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
229.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		26		2012

Transaction ID : SA11Al.277790

Amount of Each Receipt this Period

13.00

SUBTOTAL of Receipts This Page (optional).....▶	39.00
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 478 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. PETER M. MCLINDEN			Date of Receipt
Mailing Address 935 Pamela Road			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.279823
Cincinnati	OH	45255	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="87.32"/>
Name of Employer	Occupation		
AFSCME OH CN 8	ASSOCIATE COUNSEL		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="871.89"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. JUDITH L. MCMAHON			Date of Receipt
Mailing Address P.O. Box 1808			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.277208
Poulsbo	WA	98370	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. JUDITH L. MCMAHON			Date of Receipt
Mailing Address P.O. Box 1808			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.277791
Poulsbo	WA	98370	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="107.32"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 479 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. MARILYN MCMAHON			Date of Receipt
Mailing Address 7717 28th NW			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.276918
Seattle	WA	98117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="15.00"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	NURSE CONSULTANT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MARILYN MCMAHON			Date of Receipt
Mailing Address 7717 28th NW			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.277209
Seattle	WA	98117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="15.00"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	NURSE CONSULTANT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="315.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MARILYN MCMAHON			Date of Receipt
Mailing Address 7717 28th NW			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.277792
Seattle	WA	98117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="15.00"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	NURSE CONSULTANT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="330.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="45.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 480 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BARBARA A. MCMASTER
Full Name (Last, First, Middle Initial)

Mailing Address 2555-Royal County Dn.

City Uniontown	State OH	Zip Code 44685
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH CN 8	Occupation STAFF REPRESENTATIVE
------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **398.66**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.279824

Amount of Each Receipt this Period

62.15

B. DINAH MCMILLON
Full Name (Last, First, Middle Initial)

Mailing Address 3059 Blue Ridge Road

City Columbus	State OH	Zip Code 43219
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4	Occupation RECEPTIONIST
-------------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2012

Transaction ID : SA11AI.280183

Amount of Each Receipt this Period

10.00

C. DINAH MCMILLON
Full Name (Last, First, Middle Initial)

Mailing Address 3059 Blue Ridge Road

City Columbus	State OH	Zip Code 43219
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4	Occupation RECEPTIONIST
-------------------------------------	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2012

Transaction ID : SA11AI.280238

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional).....▶	62.15
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 481 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CATHEY A. MCMURRY
Full Name (Last, First, Middle Initial)

Mailing Address 556 Mill Creek Road

City Raymond State WA Zip Code 98577

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277210

Amount of Each Receipt this Period
 10.00

B. CATHEY A. MCMURRY
Full Name (Last, First, Middle Initial)

Mailing Address 556 Mill Creek Road

City Raymond State WA Zip Code 98577

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277793

Amount of Each Receipt this Period
 10.00

C. KEVIN L. MCMURRY
Full Name (Last, First, Middle Initial)

Mailing Address 556 Mill Creek Road

City Raymond State WA Zip Code 98577

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 212.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2012
Transaction ID : SA11AI.276920

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00

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 482 OF 846
	<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	<input 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

A. KEVIN L. MCMURRY
 Full Name (Last, First, Middle Initial)
 Mailing Address 556 Mill Creek Road
 City Raymond State WA Zip Code 98577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 222.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277211
 Amount of Each Receipt this Period
 10.00

B. KEVIN L. MCMURRY
 Full Name (Last, First, Middle Initial)
 Mailing Address 556 Mill Creek Road
 City Raymond State WA Zip Code 98577
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277794
 Amount of Each Receipt this Period
 10.00

C. EDWARD MCNEIL
 Full Name (Last, First, Middle Initial)
 Mailing Address 2546 Edison
 City Detroit State MI Zip Code 48206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 861.21

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2012
Transaction ID : SA11AI.279884
 Amount of Each Receipt this Period
 41.01

SUBTOTAL of Receipts This Page (optional).....▶	61.01
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 483 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. EDWARD MCNEIL			Date of Receipt M M / D D / Y Y Y Y Y 11 / 20 / 2012 Transaction ID : SA11AI.279934
Mailing Address 2546 Edison			Amount of Each Receipt this Period 41.01
City Detroit	State MI	Zip Code 48206	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 902.22		

Full Name (Last, First, Middle Initial) B. EVARN A. MCRAE			Date of Receipt M M / D D / Y Y Y Y Y 10 / 19 / 2012 Transaction ID : SA11AI.278499
Mailing Address 802 N. Drexel Avenue			Amount of Each Receipt this Period 12.00
City Columbus	State OH	Zip Code 43219	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation UNEMPLOYMENT CLAIMS REP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00		

Full Name (Last, First, Middle Initial) C. EVARN A. MCRAE			Date of Receipt M M / D D / Y Y Y Y Y 11 / 02 / 2012 Transaction ID : SA11AI.278857
Mailing Address 802 N. Drexel Avenue			Amount of Each Receipt this Period 12.00
City Columbus	State OH	Zip Code 43219	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation UNEMPLOYMENT CLAIMS REP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.00		

SUBTOTAL of Receipts This Page (optional).....▶	65.01
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 484 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. EVARN A. MCRAE
Full Name (Last, First, Middle Initial)

Mailing Address 802 N. Drexel Avenue

City Columbus State OH Zip Code 43219

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation UNEMPLOYMENT CLAIMS REP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279215

Amount of Each Receipt this Period 12.00

B. BRENDA S. MCTURNER
Full Name (Last, First, Middle Initial)

Mailing Address 61 Clairdon Drive

City Lucasville State OH Zip Code 45648

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation SECRETARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278500

Amount of Each Receipt this Period 12.00

C. BRENDA S. MCTURNER
Full Name (Last, First, Middle Initial)

Mailing Address 61 Clairdon Drive

City Lucasville State OH Zip Code 45648

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation SECRETARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278858

Amount of Each Receipt this Period 12.00

SUBTOTAL of Receipts This Page (optional).....▶	36.00
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 485 OF 846

(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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BRENDA S. MCTURNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 61 Clairdon Drive
 City Lucasville State OH Zip Code 45648
 Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279216
 Amount of Each Receipt this Period 12.00
 FEC ID number of contributing federal political committee. C
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation SECRETARY
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 276.00

B. SALLY MECKLING
 Full Name (Last, First, Middle Initial)
 Mailing Address 390 Worthington Road
 City Westerville State OH Zip Code 43082
 Date of Receipt 10 / 24 / 2012
Transaction ID : SA11AI.280119
 Amount of Each Receipt this Period 67.46
 FEC ID number of contributing federal political committee. C
 Name of Employer AFSCME OH LOC 11 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 742.06

C. RUDO M. MEDA
 Full Name (Last, First, Middle Initial)
 Mailing Address 7507 Parkwood Court Apt #304
 City Falls Church State VA Zip Code 22042
 Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276463
 Amount of Each Receipt this Period 21.41
 FEC ID number of contributing federal political committee. C
 Name of Employer AFSCME INT'L Occupation ORGANIZER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 396.58

SUBTOTAL of Receipts This Page (optional).....▶

100.87

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 486 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. RUDO M. MEDA
Full Name (Last, First, Middle Initial)

Mailing Address 7507 Parkwood Court
Apt #304

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation ORGANIZER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
417.99

Date of Receipt
11 / 15 / 2012
Transaction ID : SA11AI.276657

Amount of Each Receipt this Period
21.41

B. DONALD MEHREN
Full Name (Last, First, Middle Initial)

Mailing Address 6925 Woodland Blvd.

City Minnesota City State MN Zip Code 55959

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt
10 / 31 / 2012
Transaction ID : SA11AI.278199

Amount of Each Receipt this Period
40.00

C. NANINE MEIKLEJOHN
Full Name (Last, First, Middle Initial)

Mailing Address 4909 Aurora Drive

City Kensington State MD Zip Code 20895

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation LEGISLATIVE AFFAIRS SPECIALIST III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
946.20

Date of Receipt
10 / 31 / 2012
Transaction ID : SA11AI.276464

Amount of Each Receipt this Period
47.31

SUBTOTAL of Receipts This Page (optional)..... ▶ 108.72

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 487 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. NANINE MEIKLEJOHN
 Full Name (Last, First, Middle Initial)
 Mailing Address 4909 Aurora Drive
 City Kensington State MD Zip Code 20895
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation LEGISLATIVE AFFAIRS SPECIALIST III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 993.51

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276658
 Amount of Each Receipt this Period 47.31

B. JANICE MELDRUM
 Full Name (Last, First, Middle Initial)
 Mailing Address 2904 Sue Drive
 City Jefferson City State MO Zip Code 65109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MO CN 72 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 299.63

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.280353
 Amount of Each Receipt this Period 15.77

C. JANICE MELDRUM
 Full Name (Last, First, Middle Initial)
 Mailing Address 2904 Sue Drive
 City Jefferson City State MO Zip Code 65109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MO CN 72 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.40

Date of Receipt 11 / 05 / 2012
Transaction ID : SA11AI.280361
 Amount of Each Receipt this Period 15.77

SUBTOTAL of Receipts This Page (optional)..... ▶ 78.85
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 488 OF 846
	<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	<input 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

Full Name (Last, First, Middle Initial) A. JANICE MELDRUM			Date of Receipt
Mailing Address 2904 Sue Drive			<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.280369
Jefferson City	MO	65109	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="15.77"/>
Name of Employer	Occupation		
AFSCME MO CN 72	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="331.17"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. JONATHAN D. MELEGRITO			Date of Receipt
Mailing Address 3511 Frederick Place			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276465
Kensington	MD	20895	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="37.41"/>
Name of Employer	Occupation		
AFSCME INT'L	PUBLICATIONS ASSOCIATE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="748.20"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. JONATHAN D. MELEGRITO			Date of Receipt
Mailing Address 3511 Frederick Place			<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276659
Kensington	MD	20895	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="37.41"/>
Name of Employer	Occupation		
AFSCME INT'L	PUBLICATIONS ASSOCIATE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="785.61"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="90.59"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 489 OF 846

(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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. DAVID A MENDOZA		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2012 Transaction ID : SA11AI.276466
Mailing Address 4301 N. 21st Street Unit # 7		Amount of Each Receipt this Period 46.05
City Phoenix	State AZ	Zip Code 85016
FEC ID number of contributing federal political committee. C	Name of Employer AFSCME INT'L	Occupation POLITICAL ACTION REPRESENTATIVE III
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 920.38	

Full Name (Last, First, Middle Initial) B. DAVID A MENDOZA		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2012 Transaction ID : SA11AI.276660
Mailing Address 4301 N. 21st Street Unit # 7		Amount of Each Receipt this Period 46.05
City Phoenix	State AZ	Zip Code 85016
FEC ID number of contributing federal political committee. C	Name of Employer AFSCME INT'L	Occupation POLITICAL ACTION REPRESENTATIVE III
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 966.43	

Full Name (Last, First, Middle Initial) C. JOYE E. MERCER-BARKSDALE		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2012 Transaction ID : SA11AI.276467
Mailing Address 5103 Janesdale Court		Amount of Each Receipt this Period 47.31
City Glenn Dale	State MD	Zip Code 20769
FEC ID number of contributing federal political committee. C	Name of Employer AFSCME INT'L	Occupation SENIOR SPEECH WRITER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 946.20	

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

139.41

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 490 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JOYE E. MERCER-BARKSDALE			Date of Receipt																						
Mailing Address 5103 Janesdale Court			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>11</td><td></td><td></td> <td>15</td><td></td><td></td> <td>2012</td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	11			15			2012			
M	M	/	D	D	/	Y	Y	Y	Y																
11			15			2012																			
City State Zip Code Glenn Dale MD 20769			Transaction ID : SA11AI.276661																						
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period																						
Name of Employer Occupation AFSCME INT'L SENIOR SPEECH WRITER			<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td> <td>47.31</td> </tr> </table>									47.31													
						47.31																			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼																						
			<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td> <td>993.51</td> </tr> </table>									993.51													
						993.51																			

Full Name (Last, First, Middle Initial) B. MARGARET MERDLER			Date of Receipt																						
Mailing Address 1110 Driveumlin Drive			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>11</td><td></td><td></td> <td>08</td><td></td><td></td> <td>2012</td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	11			08			2012			
M	M	/	D	D	/	Y	Y	Y	Y																
11			08			2012																			
City State Zip Code Verona WI 53593			Transaction ID : SA11AI.277613																						
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period																						
Name of Employer Occupation AFSCME WI CN 24 FIELD REPRESENTATIVE			<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td> <td>53.56</td> </tr> </table>									53.56													
						53.56																			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼																						
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Full Name (Last, First, Middle Initial) C. MICHAEL MEREDITH			Date of Receipt																						
Mailing Address 1415 Ivy Hill Road			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>11</td><td></td><td></td> <td>05</td><td></td><td></td> <td>2012</td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	11			05			2012			
M	M	/	D	D	/	Y	Y	Y	Y																
11			05			2012																			
City State Zip Code Cockeysville MD 21030			Transaction ID : SA11AI.279992																						
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period																						
Name of Employer Occupation AFSCME MD CN 982 ORGANIZER			<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td> <td>50.84</td> </tr> </table>									50.84													
						50.84																			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼																						
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						559.24																			

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td> <td>151.71</td> </tr> </table>							151.71
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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 491 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. GENEVIEVE N MERO			Date of Receipt																						
Mailing Address 41-678 Inoaole Street			<table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>11</td><td></td><td></td><td>02</td><td></td><td></td><td>2012</td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	11			02			2012			
M	M	/	D	D	/	Y	Y	Y	Y																
11			02			2012																			
City Waimanalo State HI Zip Code 96795			Transaction ID : SA11AI.280430																						
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period																						
Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE			<table border="1" style="width: 100%;"> <tr> <td colspan="10" style="text-align: right;">2000</td> </tr> </table>			2000																			
2000																									
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼																						
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220.00																									

Full Name (Last, First, Middle Initial) B. MICHAEL J. MESSINA			Date of Receipt																						
Mailing Address 752 Silver Spring Avenue			<table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>10</td><td></td><td></td><td>31</td><td></td><td></td><td>2012</td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	10			31			2012			
M	M	/	D	D	/	Y	Y	Y	Y																
10			31			2012																			
City Silver Spring State MD Zip Code 20910			Transaction ID : SA11AI.276468																						
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period																						
Name of Employer AFSCME INT'L Occupation LABOR ECONOMIST III			<table border="1" style="width: 100%;"> <tr> <td colspan="10" style="text-align: right;">35.00</td> </tr> </table>			35.00																			
35.00																									
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼																						
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725.00																									

Full Name (Last, First, Middle Initial) C. MICHAEL J. MESSINA			Date of Receipt																						
Mailing Address 752 Silver Spring Avenue			<table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>11</td><td></td><td></td><td>15</td><td></td><td></td><td>2012</td><td></td><td></td><td></td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	11			15			2012			
M	M	/	D	D	/	Y	Y	Y	Y																
11			15			2012																			
City Silver Spring State MD Zip Code 20910			Transaction ID : SA11AI.276662																						
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period																						
Name of Employer AFSCME INT'L Occupation LABOR ECONOMIST III			<table border="1" style="width: 100%;"> <tr> <td colspan="10" style="text-align: right;">35.00</td> </tr> </table>			35.00																			
35.00																									
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			Aggregate Year-to-Date ▼																						
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760.00																									

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1" style="width: 100%;"> <tr> <td colspan="10" style="text-align: right;">90.00</td> </tr> </table>	90.00									
90.00											
TOTAL This Period (last page this line number only).....▶	<table border="1" style="width: 100%;"> <tr> <td colspan="10" style="text-align: right;"> </td> </tr> </table>										

**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 492 OF 846
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	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MARGARET JEAN METCALFE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson St., SE
 Suite 300
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277212
 Amount of Each Receipt this Period
10.00

B. MARGARET JEAN METCALFE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson St., SE
 Suite 300
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277795
 Amount of Each Receipt this Period
10.00

C. CINDY A. MICHAEL
 Full Name (Last, First, Middle Initial)
 Mailing Address 331 Central Parkway
 City Warren State OH Zip Code 44483
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **638.83**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.279825
 Amount of Each Receipt this Period
64.18

SUBTOTAL of Receipts This Page (optional)..... **84.18**
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 493 OF 846
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<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JOHN MICHALEC			Date of Receipt
Mailing Address 1544 N. Hickory			<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279885
Owosso	MI	48867	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="21.00"/>
Name of Employer	Occupation		
AFSCME MI CN 25	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="441.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. JOHN MICHALEC			Date of Receipt
Mailing Address 1544 N. Hickory			<input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279935
Owosso	MI	48867	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="21.00"/>
Name of Employer	Occupation		
AFSCME MI CN 25	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="462.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. GLENARD MIDDLETON			Date of Receipt
Mailing Address 5108 Yellowwood Ave			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276329
Baltimore	MD	21209-4611	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="14.00"/>
Name of Employer	Occupation		
AFSCME MD CN 67	EXECUTIVE DIRECTOR		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1900.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="56.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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 494 OF 846
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	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
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		<input type="checkbox"/> 16
		<input 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

A. GLENARD MIDDLETON
Full Name (Last, First, Middle Initial)

Mailing Address 5108 Yellowwood Ave

City Baltimore State MD Zip Code 21209-4611

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MD CN 67 Occupation EXECUTIVE DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2080.00

Date of Receipt 11 / 06 / 2012
Transaction ID : SA11AI.279965

Amount of Each Receipt this Period 180.00

B. JOSIP MIHELICH
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276924

Amount of Each Receipt this Period 24.00

C. JOSIP MIHELICH
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277215

Amount of Each Receipt this Period 24.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 228.00

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 495 OF 846
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	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOSIP MIHELICH
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **528.00**

Date of Receipt **11 / 26 / 2012**

Transaction ID : SA11AI.277798

Amount of Each Receipt this Period **24.00**

B. ARTHUR MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 911 White Avenue

City Cloquet State MN Zip Code 55720

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.278201

Amount of Each Receipt this Period **30.00**

C. ARTHUR MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 911 White Avenue

City Cloquet State MN Zip Code 55720

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **11 / 14 / 2012**

Transaction ID : SA11AI.280050

Amount of Each Receipt this Period **15.00**

SUBTOTAL of Receipts This Page (optional).....▶	69.00
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 496 OF 846
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	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DORINDA K. MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 1601 E Fairlawn Drive

City Urbana State IL Zip Code 61802

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation SUPPORT STAFF

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 417.00

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279447

Amount of Each Receipt this Period 41.70

B. JOHN E. MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 3020 94th Avenue E.

City Seattle State WA Zip Code 98126

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/UNIV OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.277357

Amount of Each Receipt this Period 40.00

C. JOHN E. MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 3020 94th Avenue E.

City Seattle State WA Zip Code 98126

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/UNIV OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277916

Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 121.70

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 497 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MATTHEW A. MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 207 W Marshall Street

City Marshall State MN Zip Code 56852

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 65 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **651.42**

Date of Receipt **11 / 07 / 2012**

Transaction ID : SA11AI.280381

Amount of Each Receipt this Period **59.22**

B. MONTE J. MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 9015 NE 80th Street

City Vancouver State WA Zip Code 98662

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 25 / 2012**

Transaction ID : SA11AI.276925

Amount of Each Receipt this Period **10.50**

C. MONTE J. MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 9015 NE 80th Street

City Vancouver State WA Zip Code 98662

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.50**

Date of Receipt **11 / 09 / 2012**

Transaction ID : SA11AI.277216

Amount of Each Receipt this Period **10.50**

SUBTOTAL of Receipts This Page (optional)..... **80.22**

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 498 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MONTE J. MILLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 9015 NE 80th Street
 City Vancouver State WA Zip Code 98662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277799
 Amount of Each Receipt this Period 10.50

B. SCOTT D. MILLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2056 W Hutchinson 2nd Fl.
 City Chicago State IL Zip Code 60618
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31 Occupation LEGAL COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 753.60

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279566
 Amount of Each Receipt this Period 75.36

C. SHARON A. MILLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1442 Cirle Avenue
 City Forest Park State IL Zip Code 60130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31/STATE OF IL Occupation HUMAN SERVICES CASEW
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 470.82

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279448
 Amount of Each Receipt this Period 67.26

SUBTOTAL of Receipts This Page (optional).....▶ 153.12
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 499 OF 846
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	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. SUSAN M. MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 317 Meadow Lane

City De Forest State WI Zip Code 53532

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt 10 / 22 / 2012
Transaction ID : SA11AI.277566

Amount of Each Receipt this Period 20.00

B. SUSAN M. MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 317 Meadow Lane

City De Forest State WI Zip Code 53532

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt 11 / 05 / 2012
Transaction ID : SA11AI.277567

Amount of Each Receipt this Period 20.00

C. SUSAN M. MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 317 Meadow Lane

City De Forest State WI Zip Code 53532

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 580.00

Date of Receipt 11 / 19 / 2012
Transaction ID : SA11AI.277568

Amount of Each Receipt this Period 20.00

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 500 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. TIMOTHY MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 2724 Pine Avenue

City Altoona State PA Zip Code 16601

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **848.05**

Date of Receipt **11 / 14 / 2012**

Transaction ID : SA11AI.279667

Amount of Each Receipt this Period **73.16**

B. CAROL L. MILLS-HAWKINS
Full Name (Last, First, Middle Initial)

Mailing Address 107 W. Lawrence Apt. 6

City Springfield State IL Zip Code 62704

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation CASEWORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **437.64**

Date of Receipt **11 / 01 / 2012**

Transaction ID : SA11AI.279449

Amount of Each Receipt this Period **62.52**

C. KAREN L. MILTON
Full Name (Last, First, Middle Initial)

Mailing Address 8616 Golden Given Road E.

City Tacoma State WA Zip Code 98445

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 25 / 2012**

Transaction ID : SA11AI.276926

Amount of Each Receipt this Period **10.50**

SUBTOTAL of Receipts This Page (optional)..... **146.18**

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 501 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KAREN L. MILTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 8616 Golden Given Road E.
 City Tacoma State WA Zip Code 98445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.50

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277217
 Amount of Each Receipt this Period 10.50

B. KAREN L. MILTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 8616 Golden Given Road E.
 City Tacoma State WA Zip Code 98445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277800
 Amount of Each Receipt this Period 10.50

C. KIRK C MINER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1097 Carolyn Avenue
 City Columbus State OH Zip Code 43224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation CUSTODIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 287.50

Date of Receipt 10 / 29 / 2012
Transaction ID : SA11AI.280274
 Amount of Each Receipt this Period 12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 33.50
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 502 OF 846
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input 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

Full Name (Last, First, Middle Initial) A. KIRK C MINER			Date of Receipt
Mailing Address 1097 Carolyn Avenue			<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.280304
Columbus	OH	43224	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="12.50"/>
Name of Employer	Occupation		
AFSCME OH LOC 4/COLUMBUS CITY	CUSTODIAN		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. KIRK C MINER			Date of Receipt
Mailing Address 1097 Carolyn Avenue			<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.280334
Columbus	OH	43224	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="12.50"/>
Name of Employer	Occupation		
AFSCME OH LOC 4/COLUMBUS CITY	CUSTODIAN		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="312.50"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. HAROLD F. MITCHELL			Date of Receipt
Mailing Address 3999 Kensingwood Drive			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279826
Columbus	OH	43230	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="115.12"/>
Name of Employer	Occupation		
AFSCME OH CN 8	ASSISTANT ORGANIZING DIRECTOR		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1149.50"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="140.12"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 503 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JOYCE A. MIX			Date of Receipt
Mailing Address 5677 Sundial Drive			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.280275
Galloway	OH	43119	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="12.50"/>
Name of Employer	Occupation	Aggregate Year-to-Date ▼	
AFSCME OH LOC 4/COLUMBUS CITY	BUS DRIVER	<input type="text" value="287.50"/>	
Receipt For:			
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. JOYCE A. MIX			Date of Receipt
Mailing Address 5677 Sundial Drive			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.280305
Galloway	OH	43119	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="12.50"/>
Name of Employer	Occupation	Aggregate Year-to-Date ▼	
AFSCME OH LOC 4/COLUMBUS CITY	BUS DRIVER	<input type="text" value="300.00"/>	
Receipt For:			
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. JOYCE A. MIX			Date of Receipt
Mailing Address 5677 Sundial Drive			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.280335
Galloway	OH	43119	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="12.50"/>
Name of Employer	Occupation	Aggregate Year-to-Date ▼	
AFSCME OH LOC 4/COLUMBUS CITY	BUS DRIVER	<input type="text" value="312.50"/>	
Receipt For:			
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="37.50"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 504 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DEREK M. MIZUNO
Full Name (Last, First, Middle Initial)

Mailing Address 888 Mililani Street
Suite 601

City Honolulu State HI Zip Code 96813-2991

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
11 / 02 / 2012
Transaction ID : SA11AI.280431

Amount of Each Receipt this Period
50.00

B. HARRY MOBLEY
Full Name (Last, First, Middle Initial)

Mailing Address 2635 Cranberry Circle

City Harrisburg State PA Zip Code 17110

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 866.76

Date of Receipt
11 / 14 / 2012
Transaction ID : SA11AI.279668

Amount of Each Receipt this Period
73.16

C. KELLY L. MOBLEY
Full Name (Last, First, Middle Initial)

Mailing Address 3739 Elmlawn Drive

City Toledo State OH Zip Code 43614

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
10 / 24 / 2012
Transaction ID : SA11AI.280184

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶ 143.16

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 505 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KELLY L. MOBLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 3739 Elmlawn Drive
 City Toledo State OH Zip Code 43614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 06 / 2012
Transaction ID : SA11AI.280239
 Amount of Each Receipt this Period 200.00

B. ERIC J. MOE
 Full Name (Last, First, Middle Initial)
 Mailing Address 944 Cottonwood Drive
 City Stoughton State WI Zip Code 53589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 22 / 2012
Transaction ID : SA11AI.277575
 Amount of Each Receipt this Period 30.00

C. ERIC J. MOE
 Full Name (Last, First, Middle Initial)
 Mailing Address 944 Cottonwood Drive
 City Stoughton State WI Zip Code 53589
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.277576
 Amount of Each Receipt this Period 30.00

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: (check only one)	PAGE 506 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ERIC J. MOE
Full Name (Last, First, Middle Initial)

Mailing Address 944 Cottonwood Drive

City Stoughton State WI Zip Code 53589

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 16 / 2012

Transaction ID : SA11AI.277577

Amount of Each Receipt this Period
30.00

B. DEBORAH MOEN
Full Name (Last, First, Middle Initial)

Mailing Address 1508 309th Avenue NW

City Cambridge State MN Zip Code 55008-6939

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **276.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.278203

Amount of Each Receipt this Period
24.00

C. TRINA MOLNAR-BOCK
Full Name (Last, First, Middle Initial)

Mailing Address 14-8 Meadowlawn Drive

City Mentor State OH Zip Code 44060

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **484.68**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 24 / 2012

Transaction ID : SA11AI.280185

Amount of Each Receipt this Period
23.08

SUBTOTAL of Receipts This Page (optional)..... **77.08**

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 507 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. TRINA MOLNAR-BOCK			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2012 Transaction ID : SA11AI.280240		
Mailing Address 14-8 Meadowlawn Drive			Amount of Each Receipt this Period 23.08		
City Mentor	State OH	Zip Code 44060			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME OH LOC 4		Occupation FIELD REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 507.76			

Full Name (Last, First, Middle Initial) B. KAREN MOMBERGER			Date of Receipt M M / D D / Y Y Y Y Y 11 / 14 / 2012 Transaction ID : SA11AI.279669		
Mailing Address 102 Manor Road			Amount of Each Receipt this Period 91.74		
City New Kensington	State PA	Zip Code 15068			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME PA CN 13		Occupation STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1002.84			

Full Name (Last, First, Middle Initial) C. RICHARD A. MONK			Date of Receipt M M / D D / Y Y Y Y Y 11 / 26 / 2012 Transaction ID : SA11AI.277917		
Mailing Address 3020 94th Avenue E.			Amount of Each Receipt this Period 20.00		
City Edgewood	State WA	Zip Code 98371			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME WA CN 28/UNIV OF WA		Occupation STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

SUBTOTAL of Receipts This Page (optional).....▶	134.82
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 508 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DELMA MONTEVERDE
Full Name (Last, First, Middle Initial)
Mailing Address 23900 59th Place W.
City Mountlake Terra State WA Zip Code 98043
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276927
Amount of Each Receipt this Period 10.50

B. DELMA MONTEVERDE
Full Name (Last, First, Middle Initial)
Mailing Address 23900 59th Place W.
City Mountlake Terra State WA Zip Code 98043
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.50

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277218
Amount of Each Receipt this Period 10.50

C. DELMA MONTEVERDE
Full Name (Last, First, Middle Initial)
Mailing Address 23900 59th Place W.
City Mountlake Terra State WA Zip Code 98043
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 231.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277801
Amount of Each Receipt this Period 10.50

SUBTOTAL of Receipts This Page (optional).....▶ 31.50
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 509 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DAVID A. MOODY
Full Name (Last, First, Middle Initial)

Mailing Address 8 Beacon Street

City Boston State MA Zip Code 02108-0000

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MA CN 93 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 11 / 07 / 2012
Transaction ID : SA11AI.280017

Amount of Each Receipt this Period 30.00

B. APRIL R. MOORE
Full Name (Last, First, Middle Initial)

Mailing Address 841 Saint Andrews Circle

City Rantoul State IL Zip Code 61866

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 417.00

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279451

Amount of Each Receipt this Period 41.70

C. DOUGLAS MOORE
Full Name (Last, First, Middle Initial)

Mailing Address 10176 Foothill Court

City Spring Valley State CA Zip Code 91977

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME CA LOC 3930 Occupation INT'L VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276330

Amount of Each Receipt this Period 14.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 85.70

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 510 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. ERIC D. MOORE		Date of Receipt
Mailing Address 810 Wildwood Drive Apt 22		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City Jefferson City	State MO	Zip Code 65109
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.280354
Name of Employer AFSCME MO CN 72		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="22.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="532.50"/>	

Full Name (Last, First, Middle Initial) B. ERIC D. MOORE		Date of Receipt
Mailing Address 810 Wildwood Drive Apt 22		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City Jefferson City	State MO	Zip Code 65109
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.280362
Name of Employer AFSCME MO CN 72		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="22.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="555.00"/>	

Full Name (Last, First, Middle Initial) C. ERIC D. MOORE		Date of Receipt
Mailing Address 810 Wildwood Drive Apt 22		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Jefferson City	State MO	Zip Code 65109
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.280370
Name of Employer AFSCME MO CN 72		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="22.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="577.50"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="67.50"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 511 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. GLADYS K. MOORE
 Full Name (Last, First, Middle Initial)
 Mailing Address 15104 Joppa Place
 City State Zip Code
 Bowie MD 20721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME INT'L LEGAL ASSISTANT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 288.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276469
 Amount of Each Receipt this Period
 12.00

B. GLADYS K. MOORE
 Full Name (Last, First, Middle Initial)
 Mailing Address 15104 Joppa Place
 City State Zip Code
 Bowie MD 20721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME INT'L LEGAL ASSISTANT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : SA11AI.276663
 Amount of Each Receipt this Period
 12.00

C. JULIANE MOORE
 Full Name (Last, First, Middle Initial)
 Mailing Address 304 North Wenas Avenue
 City State Zip Code
 Selah WA 98942
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 429.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2012
Transaction ID : SA11AI.276928
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 39.00
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 512 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)
A. JULIANE MOORE

Mailing Address 304 North Wenas Avenue

City Selah State WA Zip Code 98942

FEC ID number of contributing federal political committee. **C**

Name of Employer: AFSCME WA CN 28/STATE OF WA Occupation: STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **444.00**

Date of Receipt: **11 / 09 / 2012**
Transaction ID : SA11AI.277219

Amount of Each Receipt this Period: **15.00**

Full Name (Last, First, Middle Initial)
B. JULIANE MOORE

Mailing Address 304 North Wenas Avenue

City Selah State WA Zip Code 98942

FEC ID number of contributing federal political committee. **C**

Name of Employer: AFSCME WA CN 28/STATE OF WA Occupation: STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **459.00**

Date of Receipt: **11 / 26 / 2012**
Transaction ID : SA11AI.277802

Amount of Each Receipt this Period: **15.00**

Full Name (Last, First, Middle Initial)
C. LEONARD T. MOORE

Mailing Address 5656 Echo Road

City Columbus State OH Zip Code 43230

FEC ID number of contributing federal political committee. **C**

Name of Employer: AFSCME OH LOC 11/STATE OF OH Occupation: PAROLE & COMM PROCESSING SPEC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt: **10 / 19 / 2012**
Transaction ID : SA11AI.278507

Amount of Each Receipt this Period: **15.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **45.00**

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 513 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LEONARD T. MOORE
Full Name (Last, First, Middle Initial)

Mailing Address 5656 Echo Road

City Columbus State OH Zip Code 43230

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation PAROLE & COMM PROCESSING SPEC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278865

Amount of Each Receipt this Period 15.00

B. LEONARD T. MOORE
Full Name (Last, First, Middle Initial)

Mailing Address 5656 Echo Road

City Columbus State OH Zip Code 43230

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation PAROLE & COMM PROCESSING SPEC

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279223

Amount of Each Receipt this Period 15.00

C. STEVEN H. MOORE
Full Name (Last, First, Middle Initial)

Mailing Address 714 Lickliter

City Benton State IL Zip Code 62812

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation CHILD SPECIALIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 218.82

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279452

Amount of Each Receipt this Period 31.26

SUBTOTAL of Receipts This Page (optional)..... ▶ 61.26

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 514 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. THYRION C. MOORE
Full Name (Last, First, Middle Initial)

Mailing Address 4401 76th Avenue W.
Apt. 10

City State Zip Code
University Place WA 98466

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2012
Transaction ID : SA11AI.277220

Amount of Each Receipt this Period
10.00

B. THYRION C. MOORE
Full Name (Last, First, Middle Initial)

Mailing Address 4401 76th Avenue W.
Apt. 10

City State Zip Code
University Place WA 98466

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2012
Transaction ID : SA11AI.277803

Amount of Each Receipt this Period
10.00

C. PATRICK G. MORAN
Full Name (Last, First, Middle Initial)

Mailing Address 415 U Street NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME INT'L AREA ORGANIZING DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1506.70

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012
Transaction ID : SA11AI.276470

Amount of Each Receipt this Period
77.31

SUBTOTAL of Receipts This Page (optional).....▶	97.31
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 515 OF 846
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)
A. PATRICK G. MORAN

Mailing Address 415 U Street NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation AREA ORGANIZING DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1584.01**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : SA11AI.276664

Amount of Each Receipt this Period
77.31

Full Name (Last, First, Middle Initial)
B. DAVID MORITZ

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2012

Transaction ID : SA11AI.277221

Amount of Each Receipt this Period
10.00

Full Name (Last, First, Middle Initial)
C. DAVID MORITZ

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2012

Transaction ID : SA11AI.277804

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **97.31**

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 516 OF 846
	<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	<input 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

A. KAREN E. MORK
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE

City Olympia	State WA	Zip Code 98501
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2012

Transaction ID : SA11AI.276931

Amount of Each Receipt this Period

10.50

B. KAREN E. MORK
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE

City Olympia	State WA	Zip Code 98501
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11AI.277222

Amount of Each Receipt this Period

10.50

C. KAREN E. MORK
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE

City Olympia	State WA	Zip Code 98501
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.277805

Amount of Each Receipt this Period

10.50

SUBTOTAL of Receipts This Page (optional).....▶	31.50
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 517 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. FRANCIS MORONEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 Jamaica Road
 City Brookline State MA Zip Code 02146-0000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MA CN 93 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 07 / 2012
Transaction ID : SA11AI.280018
 Amount of Each Receipt this Period 40.00

B. BRENDA MORRIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 28 Beth Drive
 City Fairchance State PA Zip Code 15436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation ORGANIZER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 698.35

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.279670
 Amount of Each Receipt this Period 67.70

C. CHRISTOPHER A. MORRIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 703 N. Bunchberry Court
 City Athens State IL Zip Code 62613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31/STATE OF IL Occupation INFORMATION SYSTEMS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279454
 Amount of Each Receipt this Period 33.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.70
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 518 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. RACHEL C. MORROW
Full Name (Last, First, Middle Initial)

Mailing Address 6221 Ssassafra Lane

City Toledo State OH Zip Code 43615

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **404.04**

Date of Receipt **10 / 24 / 2012**
Transaction ID : **SA11AI.280186**

Amount of Each Receipt this Period **19.24**

B. RACHEL C. MORROW
Full Name (Last, First, Middle Initial)

Mailing Address 6221 Ssassafra Lane

City Toledo State OH Zip Code 43615

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **423.28**

Date of Receipt **11 / 06 / 2012**
Transaction ID : **SA11AI.280241**

Amount of Each Receipt this Period **19.24**

C. LORI MORTON
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 25 / 2012**
Transaction ID : **SA11AI.276932**

Amount of Each Receipt this Period **10.50**

SUBTOTAL of Receipts This Page (optional)..... **48.98**

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 519 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LORI MORTON
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.50

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277223

Amount of Each Receipt this Period
10.50

B. LORI MORTON
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277806

Amount of Each Receipt this Period
10.50

C. LACRETIA J. MOSS
Full Name (Last, First, Middle Initial)

Mailing Address 3117 S. 72nd Street

City Milwaukee State WI Zip Code 53219

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
11 / 05 / 2012
Transaction ID : SA11AI.277579

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	31.00
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 520 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LACRETIA J. MOSS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3117 S. 72nd Street
 City Milwaukee State WI Zip Code 53219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 19 / 2012
Transaction ID : SA11AI.277580
 Amount of Each Receipt this Period 10.00

B. FORREST S. MUEGGLER
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 1388
 City Richland State WA Zip Code 99352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277224
 Amount of Each Receipt this Period 10.00

C. FORREST S. MUEGGLER
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 1388
 City Richland State WA Zip Code 99352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277807
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 521 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MICHELLE MULHERIN
Full Name (Last, First, Middle Initial)

Mailing Address 2462 Cleveland Avenue

City Reading State PA Zip Code 19609

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **804.76**

Date of Receipt **11 / 14 / 2012**

Transaction ID : SA11AI.279671

Amount of Each Receipt this Period **73.16**

B. ANDREW J. MULHERN
Full Name (Last, First, Middle Initial)

Mailing Address 1437 N 66th Street

City Milwaukee State WI Zip Code 53215

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **11 / 05 / 2012**

Transaction ID : SA11AI.277582

Amount of Each Receipt this Period **10.00**

C. ANDREW J. MULHERN
Full Name (Last, First, Middle Initial)

Mailing Address 1437 N 66th Street

City Milwaukee State WI Zip Code 53215

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 19 / 2012**

Transaction ID : SA11AI.277583

Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional)..... **93.16**

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 522 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. STEVEN C. MULLEN
Full Name (Last, First, Middle Initial)

Mailing Address 544 Clermont Drive

City Harrisburg State PA Zip Code 17112

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13 Occupation TRADES LABORER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1093.86

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.279672

Amount of Each Receipt this Period 101.56

B. TRACY J MUNTZ
Full Name (Last, First, Middle Initial)

Mailing Address 3220 Ray Nash Drive NW

City Gig Harbor State WA Zip Code 98335

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 268.50

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276934

Amount of Each Receipt this Period 15.00

C. TRACY J MUNTZ
Full Name (Last, First, Middle Initial)

Mailing Address 3220 Ray Nash Drive NW

City Gig Harbor State WA Zip Code 98335

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 283.50

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277225

Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 131.56

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 523 OF 846
	<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	<input 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

A. TRACY J MUNTZ
Full Name (Last, First, Middle Initial)

Mailing Address 3220 Ray Nash Drive NW

City Gig Harbor	State WA	Zip Code 98335
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
298.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.277808

Amount of Each Receipt this Period
15.00

B. JAMES MURPHY
Full Name (Last, First, Middle Initial)

Mailing Address 1208 Chambers Street

City Steilacoom	State WA	Zip Code 98388
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2012

Transaction ID : SA11AI.276935

Amount of Each Receipt this Period
11.00

C. JAMES MURPHY
Full Name (Last, First, Middle Initial)

Mailing Address 1208 Chambers Street

City Steilacoom	State WA	Zip Code 98388
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11AI.277226

Amount of Each Receipt this Period
11.00

SUBTOTAL of Receipts This Page (optional).....▶	37.00
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 524 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JAMES MURPHY
Full Name (Last, First, Middle Initial)

Mailing Address 1208 Chambers Street

City Steilacoom	State WA	Zip Code 98388
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
242.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.277809

Amount of Each Receipt this Period
11.00

B. KALEB E. MURPHY
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 72

City Carbonado	State WA	Zip Code 98323
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11AI.277227

Amount of Each Receipt this Period
10.00

C. KALEB E. MURPHY
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 72

City Carbonado	State WA	Zip Code 98323
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.277810

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	31.00
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 525 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MARK MURPHY
Full Name (Last, First, Middle Initial)

Mailing Address 2133 Farrington Avenue

City Alexandria State VA Zip Code 22303

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation LABOR ECONOMIST III

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **938.81**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.276471

Amount of Each Receipt this Period **47.31**

B. MARK MURPHY
Full Name (Last, First, Middle Initial)

Mailing Address 2133 Farrington Avenue

City Alexandria State VA Zip Code 22303

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation LABOR ECONOMIST III

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **986.12**

Date of Receipt **11 / 15 / 2012**

Transaction ID : SA11AI.276665

Amount of Each Receipt this Period **47.31**

C. MICHAEL P. MURPHY
Full Name (Last, First, Middle Initial)

Mailing Address 92 Eddington Avenue

City Harrisburg State PA Zip Code 17111

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **860.00**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.279752

Amount of Each Receipt this Period **82.00**

SUBTOTAL of Receipts This Page (optional)..... **176.62**

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 526 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. RYAN MURPHY
Full Name (Last, First, Middle Initial)

Mailing Address 190 W. Ostend Street
Suite 101

City Baltimore State MD Zip Code 21230

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
357.50

Date of Receipt
11 / 05 / 2012
Transaction ID : SA11AI.279993

Amount of Each Receipt this Period
32.50

B. MELINDA MURPHY JONES
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277229

Amount of Each Receipt this Period
10.00

C. MELINDA MURPHY JONES
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277812

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 52.50

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 527 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JO MUSEL-PARR
Full Name (Last, First, Middle Initial)

Mailing Address 2488 Woodcrest Drive

City Chaska State MN Zip Code 55318

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 65 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **221.74**

Date of Receipt **11 / 07 / 2012**

Transaction ID : SA11AI.280382

Amount of Each Receipt this Period **18.34**

B. BENITA MUSTIN
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 25 / 2012**

Transaction ID : SA11AI.276939

Amount of Each Receipt this Period **10.50**

C. BENITA MUSTIN
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.50**

Date of Receipt **11 / 09 / 2012**

Transaction ID : SA11AI.277230

Amount of Each Receipt this Period **10.50**

SUBTOTAL of Receipts This Page (optional)..... **39.34**

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 528 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BENITA MUSTIN
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277813

Amount of Each Receipt this Period
90.50

B. STEVEN L. MYERS
Full Name (Last, First, Middle Initial)

Mailing Address 696 Hull Road

City Mansfield State OH Zip Code 44907

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4 Occupation REGIONAL DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt
10 / 24 / 2012
Transaction ID : SA11AI.280187

Amount of Each Receipt this Period
40.00

C. STEVEN L. MYERS
Full Name (Last, First, Middle Initial)

Mailing Address 696 Hull Road

City Mansfield State OH Zip Code 44907

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4 Occupation REGIONAL DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 880.00

Date of Receipt
11 / 06 / 2012
Transaction ID : SA11AI.280242

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.50

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 529 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. RACHEL E. NAUMAN		Date of Receipt
Mailing Address 11021 Horseshoe Drive		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City State Zip Code Frederick MD 21701-3397		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.276472
Name of Employer Occupation AFSCME INT'L SPECIAL ASSISTANT TO SECRETARY TREASURER		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="48.97"/>
Aggregate Year-to-Date ▼		<input type="text" value="893.09"/>

Full Name (Last, First, Middle Initial) B. RACHEL E. NAUMAN		Date of Receipt
Mailing Address 11021 Horseshoe Drive		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City State Zip Code Frederick MD 21701-3397		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.276666
Name of Employer Occupation AFSCME INT'L SPECIAL ASSISTANT TO SECRETARY TREASURER		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="48.97"/>
Aggregate Year-to-Date ▼		<input type="text" value="942.06"/>

Full Name (Last, First, Middle Initial) C. JAMES NEBLETT		Date of Receipt
Mailing Address 17635 Greenview		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City State Zip Code Detroit MI 48219-3588		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.279886
Name of Employer Occupation AFSCME MI CN 25 ADMINISTRATIVE DIRECTOR		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="37.43"/>
Aggregate Year-to-Date ▼		<input type="text" value="786.03"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="135.37"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 530 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JAMES NEBLETT
Full Name (Last, First, Middle Initial)

Mailing Address 17635 Greenview

City Detroit	State MI	Zip Code 48219-3588
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MI CN 25	Occupation ADMINISTRATIVE DIRECTOR
-------------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **823.46**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	20	/	2012

Transaction ID : SA11AI.279936

Amount of Each Receipt this Period

37.43

B. NORMAN NEELY
Full Name (Last, First, Middle Initial)

Mailing Address 108 Iliad Drive

City Tinley Park	State IL	Zip Code 60477
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **827.40**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11AI.279567

Amount of Each Receipt this Period

67.74

C. JOE NEHRING
Full Name (Last, First, Middle Initial)

Mailing Address 687 Emily Street

City North Liberty	State IA	Zip Code 52317
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IA CN 61	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **593.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	07	/	2012

Transaction ID : SA11AI.280082

Amount of Each Receipt this Period

64.00

SUBTOTAL of Receipts This Page (optional).....▶	169.17
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 531 OF 846
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. SA NELSEN-BUSTETTER
Full Name (Last, First, Middle Initial)
Mailing Address 1212 Jefferson St., SE
Suite 300
City Olympia State WA Zip Code 98501
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 25 / 2012**
Transaction ID : SA11AI.276940
Amount of Each Receipt this Period **10.50**

B. SA NELSEN-BUSTETTER
Full Name (Last, First, Middle Initial)
Mailing Address 1212 Jefferson St., SE
Suite 300
City Olympia State WA Zip Code 98501
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **220.50**

Date of Receipt **11 / 09 / 2012**
Transaction ID : SA11AI.277231
Amount of Each Receipt this Period **10.50**

C. SA NELSEN-BUSTETTER
Full Name (Last, First, Middle Initial)
Mailing Address 1212 Jefferson St., SE
Suite 300
City Olympia State WA Zip Code 98501
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **231.00**

Date of Receipt **11 / 26 / 2012**
Transaction ID : SA11AI.277814
Amount of Each Receipt this Period **10.50**

SUBTOTAL of Receipts This Page (optional)..... **31.50**
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 532 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CATHERINE M. NELSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3606 SE Sunrise Drive
 City Camas State WA Zip Code 98607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277232
 Amount of Each Receipt this Period 10.00

B. CATHERINE M. NELSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3606 SE Sunrise Drive
 City Camas State WA Zip Code 98607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277815
 Amount of Each Receipt this Period 10.00

C. CHELSA A. NELSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 Hardman Avenue South
 City South St. Paul State MN Zip Code 55075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MN CN 5/CN14 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.82

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.280051
 Amount of Each Receipt this Period 44.76

SUBTOTAL of Receipts This Page (optional)..... ▶ 64.76
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: (check only one)	PAGE 533 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CHRISTI NELSON
Full Name (Last, First, Middle Initial)

Mailing Address 7424 Iden Avenue So.

City Cottage Grove State MN Zip Code 55016

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/CN14 Occupation ORGANIZER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.280052

Amount of Each Receipt this Period
 200.00

B. CYNTHIA NELSON
Full Name (Last, First, Middle Initial)

Mailing Address 2648 Garfield Street, N.E.

City Minneapolis State MN Zip Code 55418

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/CN14 Occupation BUSINESS REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 782.54

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.280053

Amount of Each Receipt this Period
 71.14

C. MATTHEW NELSON
Full Name (Last, First, Middle Initial)

Mailing Address 909 Carmen Lane

City Mendota Heights State MN Zip Code 55118

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/CN14 Occupation BUSINESS REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 352.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.280054

Amount of Each Receipt this Period
 32.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 123.14

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 534 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MICHAEL NELSON
Full Name (Last, First, Middle Initial)

Mailing Address 2191 110th Lane NW

City Coon Rapids State MN Zip Code 55433-4173

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.278206

Amount of Each Receipt this Period 20.00

B. RICHARD NELSON
Full Name (Last, First, Middle Initial)

Mailing Address 315 South Park

City Springfield State MN Zip Code 56087

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 65 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 567.36

Date of Receipt 11 / 07 / 2012
Transaction ID : SA11AI.280383

Amount of Each Receipt this Period 67.36

C. RENEE NESTLER
Full Name (Last, First, Middle Initial)

Mailing Address 27 Fetzter Court Unit 1

City Bloomington State IL Zip Code 61704

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 402.83

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279568

Amount of Each Receipt this Period 32.13

SUBTOTAL of Receipts This Page (optional)..... ▶ 119.49

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 535 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)
A. TAMI NEWCOMB

Mailing Address 1212 Jefferson Street SE

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
10 / 25 / 2012
Transaction ID : SA11AI.276942

Amount of Each Receipt this Period
10.50

Full Name (Last, First, Middle Initial)
B. TAMI NEWCOMB

Mailing Address 1212 Jefferson Street SE

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.50**

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277233

Amount of Each Receipt this Period
10.50

Full Name (Last, First, Middle Initial)
C. JESSE NEWCOMER IV

Mailing Address 2109 Circle Road

City Carlisle State PA Zip Code 17013

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1048.26**

Date of Receipt
11 / 14 / 2012
Transaction ID : SA11AI.279673

Amount of Each Receipt this Period
91.74

SUBTOTAL of Receipts This Page (optional)..... ▶ **112.74**

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 536 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. BRENDA NEWMAN			Date of Receipt
Mailing Address 1021 Ralph Street			<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279887
Lansing	MI	48906	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.50"/>
Name of Employer	Occupation		
AFSCME MI CN 25	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.50"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. BRENDA NEWMAN			Date of Receipt
Mailing Address 1021 Ralph Street			<input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279937
Lansing	MI	48906	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.50"/>
Name of Employer	Occupation		
AFSCME MI CN 25	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="231.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MICHAEL NEWMAN			Date of Receipt
Mailing Address 4031 N. Hermitage Avenue			<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279569
Chicago	IL	60613	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="94.80"/>
Name of Employer	Occupation		
AFSCME IL CN 31	ASSOCIATE DIRECTOR		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="948.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="115.80"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 537 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. KATIE NEWSHAM		Date of Receipt
Mailing Address 1005 Bonnie Brae #3E		M M / D D / Y Y Y Y Y Y 11 / 01 / 2012
City	State	Zip Code
River Forest	IL	60305
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.279456
Name of Employer AFSCME IL CN 31/STATE OF IL		Amount of Each Receipt this Period
Occupation HEARINGS REFEREE		30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	210.00	

Full Name (Last, First, Middle Initial) B. CATHY L. NEWTON		Date of Receipt
Mailing Address 221 E. Mulberry Street		M M / D D / Y Y Y Y Y Y 10 / 19 / 2012
City	State	Zip Code
Bryan	OH	43506
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.278516
Name of Employer AFSCME OH LOC 11/STATE OF OH		Amount of Each Receipt this Period
Occupation ODJFS CUSTOMER SERVICES		30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	630.00	

Full Name (Last, First, Middle Initial) C. CATHY L. NEWTON		Date of Receipt
Mailing Address 221 E. Mulberry Street		M M / D D / Y Y Y Y Y Y 11 / 02 / 2012
City	State	Zip Code
Bryan	OH	43506
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.278874
Name of Employer AFSCME OH LOC 11/STATE OF OH		Amount of Each Receipt this Period
Occupation ODJFS CUSTOMER SERVICES		30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	660.00	

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 538 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CATHY L. NEWTON
Full Name (Last, First, Middle Initial)

Mailing Address 221 E. Mulberry Street

City Bryan State OH Zip Code 43506

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation ODJFS CUSTOMER SERVICES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279232

Amount of Each Receipt this Period 300.00

B. MARY L. NICHOL
Full Name (Last, First, Middle Initial)

Mailing Address 1117 Meridian Street N. Apt. E3

City Puyallup State WA Zip Code 98371

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276943

Amount of Each Receipt this Period 200.00

C. MARY L. NICHOL
Full Name (Last, First, Middle Initial)

Mailing Address 1117 Meridian Street N. Apt. E3

City Puyallup State WA Zip Code 98371

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277234

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 539 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. MARY L. NICHOL		Date of Receipt
Mailing Address 1117 Meridian Street N. Apt. E3		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.277816
Puyallup	WA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="200.00"/>
Name of Employer	Occupation	
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="440.00"/>	

Full Name (Last, First, Middle Initial) B. SHERYL L. NICHOLS		Date of Receipt
Mailing Address 2410 East Fifth Street		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.279828
Dayton	OH	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="43.87"/>
Name of Employer	Occupation	
AFSCME OH CN 8	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="411.71"/>	

Full Name (Last, First, Middle Initial) C. KEVIN NICHOLSON		Date of Receipt
Mailing Address 1212 Jefferson Street SE		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.277235
Olympia	WA	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="10.00"/>
Name of Employer	Occupation	
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="210.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="73.87"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 540 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KEVIN NICHOLSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson Street SE
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **11 / 26 / 2012**
Transaction ID : SA11AI.277817
 Amount of Each Receipt this Period **10.00**

B. CHARYN L. NIEMEYER
 Full Name (Last, First, Middle Initial)
 Mailing Address 76 Devonshire Road
 City Montesano State WA Zip Code 98563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt **11 / 09 / 2012**
Transaction ID : SA11AI.277236
 Amount of Each Receipt this Period **10.00**

C. CHARYN L. NIEMEYER
 Full Name (Last, First, Middle Initial)
 Mailing Address 76 Devonshire Road
 City Montesano State WA Zip Code 98563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **220.00**

Date of Receipt **11 / 26 / 2012**
Transaction ID : SA11AI.277818
 Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional).....	30.00
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 541 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JAMES B. NILAND		Date of Receipt
Mailing Address 2728 Pleasant Ave		<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
City State Zip Code Minneapolis MN 55408		Transaction ID : SA11AI.280055
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="160.00"/>
Name of Employer AFSCME MN CN 5/CN14	Occupation LEGISLATIVE/POLITICAL ACTION DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1760.00"/>	

Full Name (Last, First, Middle Initial) B. JOSEPH NILSSON		Date of Receipt
Mailing Address 3215 Eastland Circle SE		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City State Zip Code Olympia WA 98501		Transaction ID : SA11AI.276946
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="21.00"/>
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation CLERICAL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="420.00"/>	

Full Name (Last, First, Middle Initial) C. JOSEPH NILSSON		Date of Receipt
Mailing Address 3215 Eastland Circle SE		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City State Zip Code Olympia WA 98501		Transaction ID : SA11AI.277237
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="21.00"/>
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation CLERICAL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="441.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="202.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 542 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOSEPH NILSSON
Full Name (Last, First, Middle Initial)

Mailing Address 3215 Eastland Circle SE

City Olympia	State WA	Zip Code 98501
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation CLERICAL
---	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
462.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.277819

Amount of Each Receipt this Period
21.00

B. GARRY Y NITTA
Full Name (Last, First, Middle Initial)

Mailing Address 251 Nalani Street

City Makawao	State HI	Zip Code 96768
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME HI LOC 152	Occupation STAFF REPRESENTATIVE
---------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.280432

Amount of Each Receipt this Period
25.00

C. JEREMY NOELLE
Full Name (Last, First, Middle Initial)

Mailing Address 1421 N 14th Street

City Herrin	State IL	Zip Code 62948
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
433.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11AI.279570

Amount of Each Receipt this Period
33.36

SUBTOTAL of Receipts This Page (optional).....▶	79.36
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 543 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ANDREW W. NOLEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 407 S. Boston Street
 City Galion State OH Zip Code 44833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278517
 Amount of Each Receipt this Period 10.00

B. ANDREW W. NOLEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 407 S. Boston Street
 City Galion State OH Zip Code 44833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278875
 Amount of Each Receipt this Period 10.00

C. ANDREW W. NOLEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 407 S. Boston Street
 City Galion State OH Zip Code 44833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279233
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
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 544 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KEVIN NORBIE
Full Name (Last, First, Middle Initial)

Mailing Address 2205 John Avenue

City Superior State WI Zip Code 54880-4924

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.278207

Amount of Each Receipt this Period 200.00

B. MARCIA NORTHERN
Full Name (Last, First, Middle Initial)

Mailing Address 1757 N. Rutherford

City Chicago State IL Zip Code 60707

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation PUBLIC SERVICE ADMIN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 273.00

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279458

Amount of Each Receipt this Period 39.00

C. SUZANNE NOTT
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276947

Amount of Each Receipt this Period 10.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 69.50

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 545 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)
A. SUZANNE NOTT

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.50

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277238

Amount of Each Receipt this Period
10.50

Full Name (Last, First, Middle Initial)
B. SUZANNE NOTT

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277820

Amount of Each Receipt this Period
10.50

Full Name (Last, First, Middle Initial)
C. TAMI L. NULL

Mailing Address 3359 Robin Hill Court W.

City Columbus State OH Zip Code 43223

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
10 / 19 / 2012
Transaction ID : SA11AI.278519

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 31.00

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 546 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. TAMI L. NULL
 Full Name (Last, First, Middle Initial)
 Mailing Address 3359 Robin Hill Court W.
 City Columbus State OH Zip Code 43223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278877
 Amount of Each Receipt this Period 10.00

B. TAMI L. NULL
 Full Name (Last, First, Middle Initial)
 Mailing Address 3359 Robin Hill Court W.
 City Columbus State OH Zip Code 43223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279235
 Amount of Each Receipt this Period 10.00

C. VICTORIA M. NUZZI
 Full Name (Last, First, Middle Initial)
 Mailing Address 1005 N. Alabama Street
 City Indianapolis State IN Zip Code 46202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation REGIONAL FIELD ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 573.82

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276473
 Amount of Each Receipt this Period 29.12

SUBTOTAL of Receipts This Page (optional)..... ▶ 49.12
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 547 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. VICTORIA M. NUZZI
 Full Name (Last, First, Middle Initial)
 Mailing Address 1005 N. Alabama Street
 City Indianapolis State IN Zip Code 46202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation REGIONAL FIELD ADMINISTRATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 602.94

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276667
 Amount of Each Receipt this Period 29.12

B. LOURENE M. O'BRIEN-HOOPER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1305 Scrivner Road
 City Port Angeles State WA Zip Code 98362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277239
 Amount of Each Receipt this Period 10.00

C. LOURENE M. O'BRIEN-HOOPER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1305 Scrivner Road
 City Port Angeles State WA Zip Code 98362
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277821
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 49.12
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 548 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CHERYL L. OGBOZO
 Full Name (Last, First, Middle Initial)
 Mailing Address 438 Pierce Street NE
 City Minneapolis State MN Zip Code 55413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MN CN 5/UNIV OF MN Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.278209
 Amount of Each Receipt this Period 30.00

B. KAREN OGDEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 501 N 12th
 City Herrin State IL Zip Code 62948
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31/STATE OF IL Occupation CASEWORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 218.82

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279459
 Amount of Each Receipt this Period 31.26

C. ANTHONY A OGUNDIRAN
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 11862
 City Minneapolis State MN Zip Code 55411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ORGANIZER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 504.24

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276474
 Amount of Each Receipt this Period 25.62

SUBTOTAL of Receipts This Page (optional).....	86.88
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 549 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. ANTHONY A OGUNDIRAN			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 15 / 2012 Transaction ID : SA11AI.276668
Mailing Address P.O. Box 11862			Amount of Each Receipt this Period 16 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1 25.62
City Minneapolis	State MN	Zip Code 55411	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation ORGANIZER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 16 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1 529.86		

Full Name (Last, First, Middle Initial) B. TRAVIS OHM			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2012 Transaction ID : SA11AI.279674
Mailing Address 8 Highland Road			Amount of Each Receipt this Period 16 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1 98.18
City Seven Valleys	State PA	Zip Code 17360	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 16 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1 1073.26		

Full Name (Last, First, Middle Initial) C. ERIN S. OKANTEY			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2012 Transaction ID : SA11AI.276475
Mailing Address 722 Pepper Court			Amount of Each Receipt this Period 16 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1 40.41
City Westerville	State OH	Zip Code 43082	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation AREA FIELD SERVICES DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 16 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1 796.52		

SUBTOTAL of Receipts This Page (optional).....▶	164.21
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 550 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ERIN S. OKANTEY
Full Name (Last, First, Middle Initial)

Mailing Address 722 Pepper Court

City Westerville State OH Zip Code 43082

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **836.93**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : SA11AI.276669

Amount of Each Receipt this Period
40.41

B. RUSSELL K. OKATA
Full Name (Last, First, Middle Initial)

Mailing Address 1015 Wilder Avenue

City Honolulu State HI Zip Code 96822

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME HI LOC 152 Occupation RETIREE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2012

Transaction ID : SA11AI.280434

Amount of Each Receipt this Period
100.00

C. LATASHA A. OLIVER
Full Name (Last, First, Middle Initial)

Mailing Address 1610 Oakwood Avenue

City Columbus State OH Zip Code 43207

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **322.29**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.279829

Amount of Each Receipt this Period
34.10

SUBTOTAL of Receipts This Page (optional).....▶	174.51
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 551 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. HOLLY OLSON
Full Name (Last, First, Middle Initial)

Mailing Address 15443 Martins Hundred Drive

City Centerville	State VA	Zip Code 20120
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation DIRECTOR, GENERAL SERVICES
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1252.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276476

Amount of Each Receipt this Period
62.60

B. HOLLY OLSON
Full Name (Last, First, Middle Initial)

Mailing Address 15443 Martins Hundred Drive

City Centerville	State VA	Zip Code 20120
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation DIRECTOR, GENERAL SERVICES
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1314.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SA11AI.276670

Amount of Each Receipt this Period
62.60

C. VASTINA OMOSEBI
Full Name (Last, First, Middle Initial)

Mailing Address 190 W. Ostend Street
Suite 101

City Baltimore	State MD	Zip Code 21230
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MD CN 982	Occupation STAFF REPRESENTATIVE
--------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
339.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2012

Transaction ID : SA11AI.279994

Amount of Each Receipt this Period
30.84

SUBTOTAL of Receipts This Page (optional).....▶	156.04
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 552 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. RICHARD ONISHI
Full Name (Last, First, Middle Initial)
Mailing Address 888 Mililani Street
Suite 601
City Honolulu State HI Zip Code 96813-2991
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **220.00**
Date of Receipt: **11 / 02 / 2012**
Transaction ID : SA11AI.280435
Amount of Each Receipt this Period **200.00**

B. MARY C. OPENLANDER
Full Name (Last, First, Middle Initial)
Mailing Address 466 Prospect
City Muir State MI Zip Code 48860
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **441.00**
Date of Receipt: **11 / 07 / 2012**
Transaction ID : SA11AI.279888
Amount of Each Receipt this Period **21.00**

C. MARY C. OPENLANDER
Full Name (Last, First, Middle Initial)
Mailing Address 466 Prospect
City Muir State MI Zip Code 48860
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **462.00**
Date of Receipt: **11 / 20 / 2012**
Transaction ID : SA11AI.279938
Amount of Each Receipt this Period **21.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **62.00**
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 553 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. WILLIAM D. ORNER
Full Name (Last, First, Middle Initial)

Mailing Address 1991 Market Street Ext.

City Middleton	State PA	Zip Code 17057
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13/STATE OF PA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.279754

Amount of Each Receipt this Period
20.00

B. SUSAN ORRIS
Full Name (Last, First, Middle Initial)

Mailing Address 536 Second Street

City Steelton	State PA	Zip Code 17113
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
556.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2012

Transaction ID : SA11AI.279675

Amount of Each Receipt this Period
48.66

C. KARMEN ORTLOFF
Full Name (Last, First, Middle Initial)

Mailing Address 3042 N. Christiana

City Chicago	State IL	Zip Code 60618
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
677.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11AI.279571

Amount of Each Receipt this Period
67.74

SUBTOTAL of Receipts This Page (optional).....▶	136.40
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 554 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MARY E. OSBORN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1823 25th Avenue N.
 City State Zip Code
 Minneapolis MN 55411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME MN CN 5/STATE OF MN STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.45

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.278210
 Amount of Each Receipt this Period
 18.30

B. PETER S. OSHIRO
 Full Name (Last, First, Middle Initial)
 Mailing Address 95-1076 Pikokea Street
 City State Zip Code
 Mililani Town HI 96789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME HI LOC 152 STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 462.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.280436
 Amount of Each Receipt this Period
 42.00

C. SUSAN M. OSTHUS
 Full Name (Last, First, Middle Initial)
 Mailing Address 5200 Deerwood Lake Drive
 City State Zip Code
 Springfield IL 62703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME IL CN 31 LEGAL COUNSEL
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 519.24

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.279572
 Amount of Each Receipt this Period
 8.40

SUBTOTAL of Receipts This Page (optional)..... ▶ 68.70
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 555 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CURT A. OSTRANDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 65 Academy Road
 City New Ipswich State NH Zip Code 03071-0000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation INT'L UNION BARGAINING REP.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 946.20

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276477
 Amount of Each Receipt this Period 47.31

B. CURT A. OSTRANDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 65 Academy Road
 City New Ipswich State NH Zip Code 03071-0000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation INT'L UNION BARGAINING REP.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 993.51

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276671
 Amount of Each Receipt this Period 47.31

C. GERALD OTTEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2905 Evergreen Way
 City Ellicott City State MD Zip Code 21042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation BENEFITS MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.40

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276478
 Amount of Each Receipt this Period 42.52

SUBTOTAL of Receipts This Page (optional)..... ▶ 137.14
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 556 OF 846
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	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. GERALD OTTEN
Full Name (Last, First, Middle Initial)

Mailing Address 2905 Evergreen Way

City Ellicott City State MD Zip Code 21042

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation BENEFITS MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **892.92**

Date of Receipt **11 / 15 / 2012**

Transaction ID : SA11AI.276672

Amount of Each Receipt this Period **42.52**

B. ALLISON L. PADGETT
Full Name (Last, First, Middle Initial)

Mailing Address 10115 Jeffreys Street # 2009

City Las Vegas State NV Zip Code 89183

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation COMMUNICATIONS SPECIALIST I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **554.70**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.276479

Amount of Each Receipt this Period **28.41**

C. ALLISON L. PADGETT
Full Name (Last, First, Middle Initial)

Mailing Address 10115 Jeffreys Street # 2009

City Las Vegas State NV Zip Code 89183

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation COMMUNICATIONS SPECIALIST I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **583.11**

Date of Receipt **11 / 15 / 2012**

Transaction ID : SA11AI.276673

Amount of Each Receipt this Period **28.41**

SUBTOTAL of Receipts This Page (optional)..... **99.34**

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 557 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. WILLIAM M. PADISAK Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 4886 Pine Trace Drive
 City Austintown State OH Zip Code 44515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 488.04

Date of Receipt 10 / 24 / 2012
Transaction ID : SA11AI.280188
 Amount of Each Receipt this Period 23.24

B. WILLIAM M. PADISAK Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 4886 Pine Trace Drive
 City Austintown State OH Zip Code 44515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 511.28

Date of Receipt 11 / 06 / 2012
Transaction ID : SA11AI.280243
 Amount of Each Receipt this Period 23.24

C. RACHEL S. PANCIERA
 Full Name (Last, First, Middle Initial)
 Mailing Address 5210 Biddison Avenue
 City Baltimore State MD Zip Code 21206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation FIELD COORDINATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1041.31

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276480
 Amount of Each Receipt this Period 58.81

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.29
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 558 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. RACHEL S. PANCIERA
Full Name (Last, First, Middle Initial)

Mailing Address 5210 Biddison Avenue

City Baltimore State MD Zip Code 21206

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation FIELD COORDINATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.12**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : SA11AI.276674

Amount of Each Receipt this Period
58.81

B. TAMMY PARMLY
Full Name (Last, First, Middle Initial)

Mailing Address 420 Old Route 146 Loop

City Vienna State IL Zip Code 62995

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation MENTAL HEALTH TECH I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **536.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2012

Transaction ID : SA11AI.279460

Amount of Each Receipt this Period
75.00

C. JAMES PARRETT
Full Name (Last, First, Middle Initial)

Mailing Address 517 Edgewood Drive

City Burlington State WI Zip Code 53105

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WI CN 24 Occupation FIELD REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **401.70**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2012

Transaction ID : SA11AI.277614

Amount of Each Receipt this Period
53.56

SUBTOTAL of Receipts This Page (optional).....▶	187.37
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 559 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MARY J. PASS
Full Name (Last, First, Middle Initial)

Mailing Address 3333 W. Broad Street
Apt. 16

City Columbus State OH Zip Code 43204

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation SECRETARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
10 / 19 / 2012
Transaction ID : SA11AI.278526

Amount of Each Receipt this Period
10.00

B. MARY J. PASS
Full Name (Last, First, Middle Initial)

Mailing Address 3333 W. Broad Street
Apt. 16

City Columbus State OH Zip Code 43204

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation SECRETARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
11 / 02 / 2012
Transaction ID : SA11AI.278884

Amount of Each Receipt this Period
10.00

C. MARY J. PASS
Full Name (Last, First, Middle Initial)

Mailing Address 3333 W. Broad Street
Apt. 16

City Columbus State OH Zip Code 43204

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation SECRETARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
11 / 16 / 2012
Transaction ID : SA11AI.279242

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00

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 560 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DANIEL PASSMORE
Full Name (Last, First, Middle Initial)

Mailing Address 434 Anderson Street

City Curwensville	State PA	Zip Code 16833
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13/STATE OF PA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.279755

Amount of Each Receipt this Period
40.00

B. GINA S. PATRICK
Full Name (Last, First, Middle Initial)

Mailing Address 101 E 72nd Street

City Tacoma	State WA	Zip Code 98404
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.277822

Amount of Each Receipt this Period
10.00

C. PERRY J. PATSON
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 83

City Buckley	State WA	Zip Code 98321
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.277823

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	40.00
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 561 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JAMES B. PATTERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 630 Fountain Street
 City Marion State OH Zip Code 43302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278527
 Amount of Each Receipt this Period 10.00

B. JAMES B. PATTERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 630 Fountain Street
 City Marion State OH Zip Code 43302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278885
 Amount of Each Receipt this Period 10.00

C. JAMES B. PATTERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 630 Fountain Street
 City Marion State OH Zip Code 43302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279243
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 562 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DEBORAH JO PATTON
Full Name (Last, First, Middle Initial)

Mailing Address 29 N Wacker

City Chicago State IL Zip Code 60606

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **733.40**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2012

Transaction ID : SA11AI.279573

Amount of Each Receipt this Period
73.34

B. TYRONE R. PAULEY
Full Name (Last, First, Middle Initial)

Mailing Address 1002 125th Street Court E.

City Tacoma State WA Zip Code 98445

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2012

Transaction ID : SA11AI.276951

Amount of Each Receipt this Period
10.50

C. TYRONE R. PAULEY
Full Name (Last, First, Middle Initial)

Mailing Address 1002 125th Street Court E.

City Tacoma State WA Zip Code 98445

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2012

Transaction ID : SA11AI.277242

Amount of Each Receipt this Period
10.50

SUBTOTAL of Receipts This Page (optional).....▶	94.34
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 563 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)
A. TYRONE R. PAULEY

Mailing Address 1002 125th Street Court E.

City Tacoma State WA Zip Code 98445

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **231.00**

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277824

Amount of Each Receipt this Period
10.50

Full Name (Last, First, Middle Initial)
B. JEFFREY D. PAULSEN

Mailing Address 3006 30th Avenue SE

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
10 / 25 / 2012
Transaction ID : SA11AI.276952

Amount of Each Receipt this Period
12.00

Full Name (Last, First, Middle Initial)
C. JEFFREY D. PAULSEN

Mailing Address 3006 30th Avenue SE

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **252.00**

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277243

Amount of Each Receipt this Period
12.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **34.50**

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 564 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JEFFREY D. PAULSEN
Full Name (Last, First, Middle Initial)

Mailing Address 3006 30th Avenue SE

City Olympia	State WA	Zip Code 98501
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **264.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.277825

Amount of Each Receipt this Period

12.00

B. WILLIAM PAYNE
Full Name (Last, First, Middle Initial)

Mailing Address 10612 W 59th Avenue

City Spokane	State WA	Zip Code 99224
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.277826

Amount of Each Receipt this Period

10.50

C. IVY C. PAYTON
Full Name (Last, First, Middle Initial)

Mailing Address 2331 Carriage Drive

City Toledo	State OH	Zip Code 43615
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **252.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.278528

Amount of Each Receipt this Period

12.00

SUBTOTAL of Receipts This Page (optional).....▶	34.50
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 565 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. IVY C. PAYTON			Date of Receipt
Mailing Address 2331 Carriage Drive			<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.278886
Toledo	OH	43615	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="12.00"/>
Name of Employer	Occupation		
AFSCME OH LOC 11/STATE OF OH	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="264.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. IVY C. PAYTON			Date of Receipt
Mailing Address 2331 Carriage Drive			<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279244
Toledo	OH	43615	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="12.00"/>
Name of Employer	Occupation		
AFSCME OH LOC 11/STATE OF OH	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="276.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. BRUCE E. PEABODY			Date of Receipt
Mailing Address 865 Liberty Court			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279756
Hazleton	PA	18201	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
AFSCME PA CN 13/STATE OF PA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="44.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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 566 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ROSALYN O. PEACH
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 79

City Robinson	State IL	Zip Code 62454
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31/STATE OF IL	Occupation CORRECTIONAL OFFICER
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
294.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11AI.279462

Amount of Each Receipt this Period
294.00

B. BARRY PEARCE
Full Name (Last, First, Middle Initial)

Mailing Address 130 N. Wilson Street

City Bellefonte	State PA	Zip Code 16823
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
804.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2012

Transaction ID : SA11AI.279676

Amount of Each Receipt this Period
73.16

C. MELINDA PEARSON
Full Name (Last, First, Middle Initial)

Mailing Address 3908 Hoffman Road
Apt. 1B

City White Bear Lake	State MN	Zip Code 55110-4652
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/STATE OF MN	Occupation STAFF REPRESENTATIVE
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
276.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.278211

Amount of Each Receipt this Period
24.00

SUBTOTAL of Receipts This Page (optional).....▶	126.56
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 567 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MARIA F PEDERSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 6607 Clearbrook Drive SE
 City Lacey State WA Zip Code 98503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276954
 Amount of Each Receipt this Period 20.00

B. MARIA F PEDERSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 6607 Clearbrook Drive SE
 City Lacey State WA Zip Code 98503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277245
 Amount of Each Receipt this Period 20.00

C. MARIA F PEDERSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 6607 Clearbrook Drive SE
 City Lacey State WA Zip Code 98503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277827
 Amount of Each Receipt this Period 20.00

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 568 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. GLORIA A. PEGUES
Full Name (Last, First, Middle Initial)

Mailing Address 1223 Carolwood Avenue

City Columbus State OH Zip Code 43227

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation ADMINISTRATIVE ASSISTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278529

Amount of Each Receipt this Period 12.00

B. GLORIA A. PEGUES
Full Name (Last, First, Middle Initial)

Mailing Address 1223 Carolwood Avenue

City Columbus State OH Zip Code 43227

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation ADMINISTRATIVE ASSISTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278887

Amount of Each Receipt this Period 12.00

C. GLORIA A. PEGUES
Full Name (Last, First, Middle Initial)

Mailing Address 1223 Carolwood Avenue

City Columbus State OH Zip Code 43227

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation ADMINISTRATIVE ASSISTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279245

Amount of Each Receipt this Period 12.00

SUBTOTAL of Receipts This Page (optional).....▶ 36.00

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 569 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOHN M. PELO
Full Name (Last, First, Middle Initial)

Mailing Address 512 Boylston Avenue E
Apt. 104

City Seattle State WA Zip Code 98102

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277246

Amount of Each Receipt this Period
10.00

B. JOHN M. PELO
Full Name (Last, First, Middle Initial)

Mailing Address 512 Boylston Avenue E
Apt. 104

City Seattle State WA Zip Code 98102

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277828

Amount of Each Receipt this Period
10.00

C. WILLIE L. PELOTE
Full Name (Last, First, Middle Initial)

Mailing Address 351 Ross Way

City Sacramento State CA Zip Code 95864

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, POLITICAL ACTION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1272.00

Date of Receipt
10 / 31 / 2012
Transaction ID : SA11AI.276481

Amount of Each Receipt this Period
52.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 72.50

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 570 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. WILLIE L. PELOTE
Full Name (Last, First, Middle Initial)

Mailing Address 351 Ross Way

City Sacramento	State CA	Zip Code 95864
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, POLITICAL ACTION
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1324.50

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	15	/	2012

Transaction ID : SA11AI.276675

Amount of Each Receipt this Period
52.50

B. JOANNE M. PELS
Full Name (Last, First, Middle Initial)

Mailing Address 6987 County 38 NW

City Walker	State MN	Zip Code 56484
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/CN14	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1037.14

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	14	/	2012

Transaction ID : SA11AI.280056

Amount of Each Receipt this Period
81.74

C. JEFFERY L. PENNINGTON
Full Name (Last, First, Middle Initial)

Mailing Address 579 Edgefield Drive

City Marion	State OH	Zip Code 43302
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.278530

Amount of Each Receipt this Period
12.00

SUBTOTAL of Receipts This Page (optional).....	146.24
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 571 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JEFFERY L. PENNINGTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 579 Edgefield Drive
 City Marion State OH Zip Code 43302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278888
 Amount of Each Receipt this Period 12.00

B. JEFFERY L. PENNINGTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 579 Edgefield Drive
 City Marion State OH Zip Code 43302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 276.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279246
 Amount of Each Receipt this Period 12.00

C. PAMELA PERILLO
 Full Name (Last, First, Middle Initial)
 Mailing Address 9270 Billingsley Road
 City White Plains State MD Zip Code 20695
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ADMINISTRATIVE ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 709.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276482
 Amount of Each Receipt this Period 35.45

SUBTOTAL of Receipts This Page (optional)..... ▶ 59.45
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 572 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. PAMELA PERILLO
Full Name (Last, First, Middle Initial)

Mailing Address 9270 Billingsley Road

City White Plains State MD Zip Code 20695

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation ADMINISTRATIVE ASSISTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **744.45**

Date of Receipt **11 / 15 / 2012**

Transaction ID : SA11AI.276676

Amount of Each Receipt this Period **35.45**

B. RANDOLPH P. PERREIRA
Full Name (Last, First, Middle Initial)

Mailing Address 1044 Mokuhano Street

City Honolulu State HI Zip Code 96825

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME HI LOC 152 Occupation EXECUTIVE DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1204.00**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.276332

Amount of Each Receipt this Period **14.00**

C. RANDOLPH P. PERREIRA
Full Name (Last, First, Middle Initial)

Mailing Address 1044 Mokuhano Street

City Honolulu State HI Zip Code 96825

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME HI LOC 152 Occupation EXECUTIVE DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1304.00**

Date of Receipt **11 / 02 / 2012**

Transaction ID : SA11AI.280438

Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **149.45**

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 573 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ROBERT E. PERRINE
Full Name (Last, First, Middle Initial)

Mailing Address 15 Pine Drive

City Sherman	State IL	Zip Code 62684
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31/STATE OF IL	Occupation CORRECTIONAL OFFICER
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11AI.279464

Amount of Each Receipt this Period
380.00

B. ELIZABETH PERROW
Full Name (Last, First, Middle Initial)

Mailing Address 958 N. Harrison Street

City Arlington	State VA	Zip Code 22205
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation ASSISTANT TO JUD. PANEL CHAIRPERSON
----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1274.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276483

Amount of Each Receipt this Period
66.98

C. ELIZABETH PERROW
Full Name (Last, First, Middle Initial)

Mailing Address 958 N. Harrison Street

City Arlington	State VA	Zip Code 22205
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation ASSISTANT TO JUD. PANEL CHAIRPERSON
----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1342.86

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SA11AI.276677

Amount of Each Receipt this Period
68.08

SUBTOTAL of Receipts This Page (optional).....▶	173.06
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 574 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MICHAEL S. PERRY
Full Name (Last, First, Middle Initial)

Mailing Address 313 Sheridan Road

City Wilmette State IL Zip Code 60091

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31 Occupation DIRECTOR EMP. INV. DEV. & TRAINING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 733.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.279574

Amount of Each Receipt this Period
 73.34

B. DEBORAH PERSINGER
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277247

Amount of Each Receipt this Period
 10.00

C. DEBORAH PERSINGER
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277829

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 93.34

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 575 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ANNIE P. PERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1909 Scott Valley Drive
 City Columbus State OH Zip Code 43223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278531
 Amount of Each Receipt this Period 10.00

B. ANNIE P. PERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1909 Scott Valley Drive
 City Columbus State OH Zip Code 43223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278889
 Amount of Each Receipt this Period 10.00

C. ANNIE P. PERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1909 Scott Valley Drive
 City Columbus State OH Zip Code 43223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279247
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 576 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BOBBIE L. PETERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 14999 Wheeler Road
 City Lagrange State OH Zip Code 44050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 356.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278533
 Amount of Each Receipt this Period
 16.00

B. BOBBIE L. PETERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 14999 Wheeler Road
 City Lagrange State OH Zip Code 44050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278891
 Amount of Each Receipt this Period
 16.00

C. BOBBIE L. PETERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 14999 Wheeler Road
 City Lagrange State OH Zip Code 44050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 388.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279249
 Amount of Each Receipt this Period
 16.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 48.00
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 577 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. IVA PETERS
Full Name (Last, First, Middle Initial)

Mailing Address 1939 Salem School Road

City Pineyville	State KY	Zip Code 40162
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation FIELD COORDINATOR
----------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1278.91

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276484

Amount of Each Receipt this Period
57.24

B. IVA PETERS
Full Name (Last, First, Middle Initial)

Mailing Address 1939 Salem School Road

City Pineyville	State KY	Zip Code 40162
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation FIELD COORDINATOR
----------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1336.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SA11AI.276678

Amount of Each Receipt this Period
57.24

C. MICHAEL A. PETERS
Full Name (Last, First, Middle Initial)

Mailing Address 148 Galahad Road

City Greeley	State PA	Zip Code 18425
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13/STATE OF PA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.279757

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	134.48
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 578 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. TY PETERSEN			Date of Receipt
Mailing Address 370 Crescent Loop			<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279575
Vienna	IL	62995	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="38.07"/>
Name of Employer	Occupation		
AFSCME IL CN 31	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="490.75"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. DARLA R. PETERSON			Date of Receipt
Mailing Address P.O. Box 412			<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276957
Belfair	WA	98528	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.50"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. DARLA R. PETERSON			Date of Receipt
Mailing Address P.O. Box 412			<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.277248
Belfair	WA	98528	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.50"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.50"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="59.07"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 579 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. DARLA R. PETERSON		Date of Receipt
Mailing Address P.O. Box 412		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code
Belfair	WA	98528
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="231.00"/>	
		Transaction ID : SA11AI.277830
		Amount of Each Receipt this Period
		<input type="text" value="10.50"/>

Full Name (Last, First, Middle Initial) B. KOLBY PETERSON		Date of Receipt
Mailing Address 9326 Halston Court		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Fairfax Station	VA	22039
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
AFSCME INT'L	ASSISTANT DIRECTOR, POLLING	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="968.20"/>	
		Transaction ID : SA11AI.276485
		Amount of Each Receipt this Period
		<input type="text" value="48.41"/>

Full Name (Last, First, Middle Initial) C. KOLBY PETERSON		Date of Receipt
Mailing Address 9326 Halston Court		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Fairfax Station	VA	22039
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
AFSCME INT'L	ASSISTANT DIRECTOR, POLLING	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1016.61"/>	
		Transaction ID : SA11AI.276679
		Amount of Each Receipt this Period
		<input type="text" value="48.41"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="107.32"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 580 OF 846
	<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	<input 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

Full Name (Last, First, Middle Initial) A. RONNIE D PETERSON			Date of Receipt
Mailing Address 1146 Rue Willette Blvd.			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.276486
Ypsilanti	MI	48197	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="141.92"/>
Name of Employer	Occupation		
AFSCME INT'L	POLITICAL ACTION REPRESENTATIVE III		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2870.88"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. RONNIE D PETERSON			Date of Receipt
Mailing Address 1146 Rue Willette Blvd.			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.276680
Ypsilanti	MI	48197	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="141.92"/>
Name of Employer	Occupation		
AFSCME INT'L	POLITICAL ACTION REPRESENTATIVE III		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="3012.80"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. ANASTASIY A. PETROVA			Date of Receipt
Mailing Address 475 NW Glisan Street			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.278008
Portland	OR	97209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
AFSCME OR CN 75/STATE OF OR	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="303.84"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 581 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DANIEL J. PETRUSO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson St., SE
 Suite 300
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2012
Transaction ID : SA11AI.276958
 Amount of Each Receipt this Period
 12.50

B. DANIEL J. PETRUSO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson St., SE
 Suite 300
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277249
 Amount of Each Receipt this Period
 12.50

C. DANIEL J. PETRUSO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson St., SE
 Suite 300
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277831
 Amount of Each Receipt this Period
 12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 37.50
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 582 OF 846
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input 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

Full Name (Last, First, Middle Initial) A. URSULA PETTERS		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="M M"/> / <input type="text" value="D D"/> / <input type="text" value="Y Y Y Y"/>
City Olympia State WA Zip Code 98501		Transaction ID : SA11AI.276959
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE		<input type="text" value=""/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="20.00"/>
Aggregate Year-to-Date ▼		<input type="text" value="400.00"/>

Full Name (Last, First, Middle Initial) B. URSULA PETTERS		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="M M"/> / <input type="text" value="D D"/> / <input type="text" value="Y Y Y Y"/>
City Olympia State WA Zip Code 98501		Transaction ID : SA11AI.277250
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="420.00"/>
Aggregate Year-to-Date ▼		<input type="text" value=""/>

Full Name (Last, First, Middle Initial) C. URSULA PETTERS		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="M M"/> / <input type="text" value="D D"/> / <input type="text" value="Y Y Y Y"/>
City Olympia State WA Zip Code 98501		Transaction ID : SA11AI.277832
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="440.00"/>
Aggregate Year-to-Date ▼		<input type="text" value=""/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 583 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CHARLENE R PETTIES
Full Name (Last, First, Middle Initial)

Mailing Address 554 Eelda Street

City Columbus	State OH	Zip Code 43203
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation CUSTODIAN
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **327.50**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2012

Transaction ID : SA11AI.280276

Amount of Each Receipt this Period

12.50

B. CHARLENE R PETTIES
Full Name (Last, First, Middle Initial)

Mailing Address 554 Eelda Street

City Columbus	State OH	Zip Code 43203
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation CUSTODIAN
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2012

Transaction ID : SA11AI.280306

Amount of Each Receipt this Period

12.50

C. CHARLENE R PETTIES
Full Name (Last, First, Middle Initial)

Mailing Address 554 Eelda Street

City Columbus	State OH	Zip Code 43203
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation CUSTODIAN
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **352.50**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.280336

Amount of Each Receipt this Period

12.50

SUBTOTAL of Receipts This Page (optional).....▶	37.50
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 584 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. RICHARD L. PETTIT
 Full Name (Last, First, Middle Initial)
 Mailing Address 1957 Coppermine Road
 City Buchanan State GA Zip Code 30113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation AREA ORGANIZING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1177.15

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276487
 Amount of Each Receipt this Period
 62.28

B. RICHARD L. PETTIT
 Full Name (Last, First, Middle Initial)
 Mailing Address 1957 Coppermine Road
 City Buchanan State GA Zip Code 30113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation AREA ORGANIZING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1239.43

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : SA11AI.276681
 Amount of Each Receipt this Period
 62.28

C. STACY PFLUGMACHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4679 Timberview Drive
 City Auburn State IL Zip Code 62615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 708.40

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.279576
 Amount of Each Receipt this Period
 70.84

SUBTOTAL of Receipts This Page (optional).....▶	195.40
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 585 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. GREGORY L. PHELPS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1609 Rose Place
 City Cincinnati State OH Zip Code 45237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278534
 Amount of Each Receipt this Period 10.00

B. GREGORY L. PHELPS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1609 Rose Place
 City Cincinnati State OH Zip Code 45237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278892
 Amount of Each Receipt this Period 10.00

C. GREGORY L. PHELPS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1609 Rose Place
 City Cincinnati State OH Zip Code 45237
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279250
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 586 OF 846
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CATHERINE PHILLIPS
Full Name (Last, First, Middle Initial)
Mailing Address 15707 Manning Street

City Detroit	State MI	Zip Code 48205
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **611.52**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	07	/	2012

Transaction ID : SA11AI.279889

Amount of Each Receipt this Period

29.12

B. CATHERINE PHILLIPS
Full Name (Last, First, Middle Initial)
Mailing Address 15707 Manning Street

City Detroit	State MI	Zip Code 48205
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **640.64**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	20	/	2012

Transaction ID : SA11AI.279939

Amount of Each Receipt this Period

29.12

C. KELLY PHILLIPS
Full Name (Last, First, Middle Initial)
Mailing Address 390 Worthington Road

City Westerville	State OH	Zip Code 43082
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11	Occupation STAFF REPRESENTATIVE
--------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **726.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	24	/	2012

Transaction ID : SA11AI.280123

Amount of Each Receipt this Period

66.00

SUBTOTAL of Receipts This Page (optional).....▶	124.24
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 587 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. STEVAN P. PICKARD
Full Name (Last, First, Middle Initial)

Mailing Address 3325 Capricio Street, NE

City State Zip Code
Canton OH 44721-2702

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME OH CN 8 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
640.87

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012
Transaction ID : SA11AI.279830

Amount of Each Receipt this Period
64.18

B. DONA PIERCEY
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City State Zip Code
Olympia WA 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2012
Transaction ID : SA11AI.276960

Amount of Each Receipt this Period
10.50

C. DONA PIERCEY
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City State Zip Code
Olympia WA 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.50

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2012
Transaction ID : SA11AI.277251

Amount of Each Receipt this Period
10.50

SUBTOTAL of Receipts This Page (optional).....▶	85.18
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 588 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)
A. DONA PIERCEY

Mailing Address 1212 Jefferson St., SE
 Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012

Transaction ID : SA11AI.277833

Amount of Each Receipt this Period
 10.50

Full Name (Last, First, Middle Initial)
B. JEFFREY PITTMAN

Mailing Address 190 W. Ostend Street
 Suite 101

City Baltimore State MD Zip Code 21230

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 880.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2012

Transaction ID : SA11AI.279995

Amount of Each Receipt this Period
 80.00

Full Name (Last, First, Middle Initial)
C. RONALD W PITTS

Mailing Address 2001-A Industrial Drive

City Marion State IL Zip Code 62959

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 603.15

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2012

Transaction ID : SA11AI.279577

Amount of Each Receipt this Period
 77.62

SUBTOTAL of Receipts This Page (optional)..... ▶ 168.12

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 589 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOSEPH PLUGER
Full Name (Last, First, Middle Initial)

Mailing Address 605 South Jackson

City Gardner	State IL	Zip Code 60424
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
499.38

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11AI.279578

Amount of Each Receipt this Period
38.07

B. KEVAN L. PLUMLEE
Full Name (Last, First, Middle Initial)

Mailing Address 14039 Allen Road

City Carterville	State IL	Zip Code 62918
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
469.71

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11AI.279579

Amount of Each Receipt this Period
8.40

C. RENEE POFF
Full Name (Last, First, Middle Initial)

Mailing Address 4031 Executive Park Drive

City Harrisburg	State PA	Zip Code 17111
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
404.81

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	14	/	2012

Transaction ID : SA11AI.279677

Amount of Each Receipt this Period
38.52

SUBTOTAL of Receipts This Page (optional).....▶	84.99
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 590 OF 846
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input 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

Full Name (Last, First, Middle Initial) A. STEVE POINTEC		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.276961
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value=""/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
		<input type="text" value="400.00"/>

Full Name (Last, First, Middle Initial) B. STEVE POINTEC		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277252
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value=""/>
		<input type="text" value="420.00"/>

Full Name (Last, First, Middle Initial) C. STEVE POINTEC		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277834
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value=""/>
		<input type="text" value="440.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 591 OF 846
(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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. CHRISTOPHER D. POLICANO		Date of Receipt
Mailing Address 2480 16th Street NW Apt. 314		<input style="width: 30px;" type="text" value="10"/> / <input style="width: 30px;" type="text" value="31"/> / <input style="width: 60px;" type="text" value="2012"/>
City	State	Transaction ID : SA11AI.276488
Washington	DC	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input style="width: 100px;" type="text" value="C"/>	<input style="width: 100px;" type="text" value="72.96"/>
Name of Employer	Occupation	<input style="width: 100px;" type="text" value="1474.20"/>
AFSCME INT'L	DIRECTOR, COMMUNICATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) B. CHRISTOPHER D. POLICANO		Date of Receipt
Mailing Address 2480 16th Street NW Apt. 314		<input style="width: 30px;" type="text" value="11"/> / <input style="width: 30px;" type="text" value="15"/> / <input style="width: 60px;" type="text" value="2012"/>
City	State	Transaction ID : SA11AI.276682
Washington	DC	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input style="width: 100px;" type="text" value="C"/>	<input style="width: 100px;" type="text" value="72.96"/>
Name of Employer	Occupation	<input style="width: 100px;" type="text" value="1547.16"/>
AFSCME INT'L	DIRECTOR, COMMUNICATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C. NICOLE R. POLLARD		Date of Receipt
Mailing Address 9404 Nicklaus Lane		<input style="width: 30px;" type="text" value="10"/> / <input style="width: 30px;" type="text" value="31"/> / <input style="width: 60px;" type="text" value="2012"/>
City	State	Transaction ID : SA11AI.276489
Laurel	MD	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input style="width: 100px;" type="text" value="C"/>	<input style="width: 100px;" type="text" value="60.50"/>
Name of Employer	Occupation	<input style="width: 100px;" type="text" value="1210.00"/>
AFSCME INT'L	ASSOCIATE GENERAL COUNSEL II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	<input style="width: 100px;" type="text" value="206.42"/>
TOTAL This Period (last page this line number only).....▶	<input style="width: 100px;" type="text"/>

**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 592 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. NICOLE R. POLLARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 9404 Nicklaus Lane
 City Laurel State MD Zip Code 20708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ASSOCIATE GENERAL COUNSEL II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1270.50

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276683
 Amount of Each Receipt this Period 60.50

B. GREGORY POPEK
 Full Name (Last, First, Middle Initial)
 Mailing Address 29 N. Wacker Drive Suite 800
 City Chicago State IL Zip Code 60606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.32

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279580
 Amount of Each Receipt this Period 51.76

C. EDWARD POTTS
 Full Name (Last, First, Middle Initial)
 Mailing Address 240 Bentz Mill Road
 City Wellsville State PA Zip Code 17365
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation CLERK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 763.66

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.279678
 Amount of Each Receipt this Period 73.16

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.42
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 593 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. GREGORY POWELL			Date of Receipt
Mailing Address 11505 Circle Drive			<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.280463
Austin	TX	78748	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="40.00"/>
Name of Employer	Occupation		
AFSCME TX LOC 1624	VICE PRESIDENT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1340.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. GREGORY POWELL			Date of Receipt
Mailing Address 11505 Circle Drive			<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.280462
Austin	TX	78748	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
AFSCME TX LOC 1624	VICE PRESIDENT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1360.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. GREGORY POWELL			Date of Receipt
Mailing Address 11505 Circle Drive			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276333
Austin	TX	78748	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="100.00"/>
Name of Employer	Occupation		
AFSCME TX LOC 1624	VICE PRESIDENT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1460.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="160.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 594 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. M LYNETTE POWELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson St., SE
 Suite 300
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2012
Transaction ID : SA11AI.276963
 Amount of Each Receipt this Period
 10.50

B. M LYNETTE POWELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson St., SE
 Suite 300
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277254
 Amount of Each Receipt this Period
 10.50

C. M LYNETTE POWELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson St., SE
 Suite 300
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277836
 Amount of Each Receipt this Period
 10.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 31.50
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 595 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. REBECCA POWELL
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson Street SE

City Olympia	State WA	Zip Code 98501
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2012

Transaction ID : SA11AI.276964

Amount of Each Receipt this Period
20.00

B. REBECCA POWELL
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson Street SE

City Olympia	State WA	Zip Code 98501
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11AI.277255

Amount of Each Receipt this Period
20.00

C. REBECCA POWELL
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson Street SE

City Olympia	State WA	Zip Code 98501
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.277837

Amount of Each Receipt this Period
20.00

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 596 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. STEVE PREBLE			Date of Receipt
Mailing Address P.O. Box 204			<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.280385
Colerain	MN	55722	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="90.46"/>
Name of Employer	Occupation		
AFSCME MN CN 65	EXECUTIVE DIRECTOR		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1084.06"/>		

Full Name (Last, First, Middle Initial) B. HELEN PRESSLEY			Date of Receipt
Mailing Address P.O. Box 7606			<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276965
Olympia	WA	98507	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="21.00"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="399.00"/>		

Full Name (Last, First, Middle Initial) C. HELEN PRESSLEY			Date of Receipt
Mailing Address P.O. Box 7606			<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.277256
Olympia	WA	98507	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="21.00"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="420.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="132.46"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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 597 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. HELEN PRESSLEY			Date of Receipt
Mailing Address P.O. Box 7606			<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.277838
Olympia	WA	98507	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="21.00"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="441.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. DELBERT G. PRICE			Date of Receipt
Mailing Address 885 Haverhill Drive			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276490
Hamilton	OH	45013	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="43.71"/>
Name of Employer	Occupation		
AFSCME INT'L	INTERNATIONAL UNION REP.		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="874.20"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. DELBERT G. PRICE			Date of Receipt
Mailing Address 885 Haverhill Drive			<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276684
Hamilton	OH	45013	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="43.71"/>
Name of Employer	Occupation		
AFSCME INT'L	INTERNATIONAL UNION REP.		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="917.91"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="108.42"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 598 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ROBYN PRICE
Full Name (Last, First, Middle Initial)

Mailing Address 1034 N. Washington Avenue

City State Zip Code
Lansing MI 48906

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME MI CN 25 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
592.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2012
Transaction ID : SA11AI.279890

Amount of Each Receipt this Period
25.00

B. ROBYN PRICE
Full Name (Last, First, Middle Initial)

Mailing Address 1034 N. Washington Avenue

City State Zip Code
Lansing MI 48906

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME MI CN 25 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
617.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2012
Transaction ID : SA11AI.279940

Amount of Each Receipt this Period
25.00

C. MICHAEL E. PRIEST
Full Name (Last, First, Middle Initial)

Mailing Address 8968 Larimer Drive

City State Zip Code
Sturgeon Lake MN 55783

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME MN CN 5/STATE OF MN STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012
Transaction ID : SA11AI.278213

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00

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 599 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. AMANDA M. PRINCE
Full Name (Last, First, Middle Initial)

Mailing Address 4894 Birchview Drive

City Moose Lake State MN Zip Code 55767

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/CN14 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 341.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.280057

Amount of Each Receipt this Period
 31.00

B. FRANK PROCHASKA
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 1484

City Springfield State IL Zip Code 62705

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 455.42

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.279581

Amount of Each Receipt this Period
 61.49

C. MARCIA PROVOST
Full Name (Last, First, Middle Initial)

Mailing Address 555 Third Street SE

City Milaca State MN Zip Code 56353

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 552.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.278214

Amount of Each Receipt this Period
 48.00

SUBTOTAL of Receipts This Page (optional).....▶	140.49
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 600 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. EDWARD M. PRUITT		Date of Receipt
Mailing Address 514 Quail Hollow Avenue NE		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City State Zip Code Canton OH 44704		Transaction ID : SA11AI.278536
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation JUVENILE CORRECTION OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	

Full Name (Last, First, Middle Initial) B. EDWARD M. PRUITT		Date of Receipt
Mailing Address 514 Quail Hollow Avenue NE		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City State Zip Code Canton OH 44704		Transaction ID : SA11AI.278894
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation JUVENILE CORRECTION OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) C. EDWARD M. PRUITT		Date of Receipt
Mailing Address 514 Quail Hollow Avenue NE		<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City State Zip Code Canton OH 44704		Transaction ID : SA11AI.279252
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation JUVENILE CORRECTION OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="230.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="30.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 601 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CONSTANCE J. PULIDO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1470 Mahiole Street
 City Honolulu State HI Zip Code 96819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 242.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.280439
 Amount of Each Receipt this Period
 22.00

B. JANET R. PULLEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 8003 Alcoa Drive
 City Ft. Washington State MD Zip Code 20744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ADMINISTRATIVE ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 638.10

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276491
 Amount of Each Receipt this Period
 35.45

C. JANET R. PULLEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 8003 Alcoa Drive
 City Ft. Washington State MD Zip Code 20744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ADMINISTRATIVE ASSISTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 673.55

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : SA11AI.276685
 Amount of Each Receipt this Period
 35.45

SUBTOTAL of Receipts This Page (optional)..... ▶ 92.90
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 602 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. IRENE L. PUJOHAU
Full Name (Last, First, Middle Initial)

Mailing Address 94-1149 Kaloli Loop

City Waipahu State HI Zip Code 96797

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.280440

Amount of Each Receipt this Period 25.00

B. CARY R. QUICK JR.
Full Name (Last, First, Middle Initial)

Mailing Address 910 Campground Road

City Anna State IL Zip Code 62906

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation MENTAL HEALTH TECH I

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279466

Amount of Each Receipt this Period 45.00

C. DAVID A. RAINS
Full Name (Last, First, Middle Initial)

Mailing Address 17603 S. Cardinal Road

City Chaney State WA Zip Code 99004

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276967

Amount of Each Receipt this Period 10.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 80.50

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 603 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DAVID A. RAINS
Full Name (Last, First, Middle Initial)

Mailing Address 17603 S. Cardinal Road

City Chaney	State WA	Zip Code 99004
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11AI.277258

Amount of Each Receipt this Period
10.50

B. DAVID A. RAINS
Full Name (Last, First, Middle Initial)

Mailing Address 17603 S. Cardinal Road

City Chaney	State WA	Zip Code 99004
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.277840

Amount of Each Receipt this Period
10.50

C. LLOYD L. RAINS
Full Name (Last, First, Middle Initial)

Mailing Address 15829 Narraganset Oval

City Middleburg Hts	State OH	Zip Code 44130
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4	Occupation REGIONAL DIRECTOR
-------------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
880.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2012

Transaction ID : SA11AI.280189

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional).....	61.00
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 604 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LLOYD L. RAINS
Full Name (Last, First, Middle Initial)

Mailing Address 15829 Narraganset Oval

City Middleburg Hts	State OH	Zip Code 44130
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4	Occupation REGIONAL DIRECTOR
-------------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **920.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2012

Transaction ID : SA11AI.280244

Amount of Each Receipt this Period

40.00

B. JEANNE L. RAMSTEN
Full Name (Last, First, Middle Initial)

Mailing Address 3959 NE 40th Street

City Portland	State OR	Zip Code 97212
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OR CN 75/STATE OF OR	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **212.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.278012

Amount of Each Receipt this Period

18.00

C. JOHN RANDOLPH
Full Name (Last, First, Middle Initial)

Mailing Address 323 60th Street SE

City Everett	State WA	Zip Code 98203
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2012

Transaction ID : SA11AI.276968

Amount of Each Receipt this Period

12.50

SUBTOTAL of Receipts This Page (optional).....▶	70.50
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 605 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JOHN RANDOLPH			Date of Receipt
Mailing Address 323 60th Street SE			<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.277259
Everett	WA	98203	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="12.50"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="262.50"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. JOHN RANDOLPH			Date of Receipt
Mailing Address 323 60th Street SE			<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.277841
Everett	WA	98203	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="12.50"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="275.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. SUSIE ANN RATHKE			Date of Receipt
Mailing Address 1212 Jefferson Street SE			<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276969
Olympia	WA	98501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="22.00"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="440.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="47.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 606 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. SUSIE ANN RATHKE		Date of Receipt
Mailing Address 1212 Jefferson Street SE		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City Olympia State WA Zip Code 98501		Transaction ID : SA11AI.277260
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="22.00"/>
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="462.00"/>	

Full Name (Last, First, Middle Initial) B. SUSIE ANN RATHKE		Date of Receipt
Mailing Address 1212 Jefferson Street SE		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Olympia State WA Zip Code 98501		Transaction ID : SA11AI.277842
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="22.00"/>
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="484.00"/>	

Full Name (Last, First, Middle Initial) C. AMYLEE RAY		Date of Receipt
Mailing Address 190 W. Ostend Street Suite 101		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City Baltimore State MD Zip Code 21230		Transaction ID : SA11AI.279996
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="58.32"/>
Name of Employer AFSCME MD CN 982	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="641.52"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="102.32"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 607 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. ZOLLIE RAYNER		Date of Receipt
Mailing Address P.O. Box 51		<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
City Albion	State PA	Zip Code 16401
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.279679
Name of Employer AFSCME PA CN 13		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="73.16"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="918.76"/>		

Full Name (Last, First, Middle Initial) B. BARB S. REARDON		Date of Receipt
Mailing Address 109 Gregory Road		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City Murphysboro	State IL	Zip Code 62966
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.279467
Name of Employer AFSCME IL CN 31/STATE OF IL		Amount of Each Receipt this Period
Occupation CASEWORKER		<input type="text" value="31.26"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="218.82"/>		

Full Name (Last, First, Middle Initial) C. CHRISTY C REED		Date of Receipt
Mailing Address P.O. Box 842		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City Toledo	State WA	Zip Code 98591
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277261
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="210.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="114.42"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 608 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CHRISTY C REED
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 842

City Toledo State WA Zip Code 98591

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 26 / 2012**

Transaction ID : SA11AI.277843

Amount of Each Receipt this Period **10.00**

B. RICKY E. REED
Full Name (Last, First, Middle Initial)

Mailing Address 9733 Linwood Road

City La Rue State OH Zip Code 43332

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 19 / 2012**

Transaction ID : SA11AI.278538

Amount of Each Receipt this Period **10.00**

C. RICKY E. REED
Full Name (Last, First, Middle Initial)

Mailing Address 9733 Linwood Road

City La Rue State OH Zip Code 43332

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 02 / 2012**

Transaction ID : SA11AI.278896

Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional)..... **30.00**

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 609 OF 846
	<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	<input 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

A. RICKY E. REED
Full Name (Last, First, Middle Initial)

Mailing Address 9733 Linwood Road

City La Rue State OH Zip Code 43332

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279254

Amount of Each Receipt this Period 100.00

B. TERRY M. REED
Full Name (Last, First, Middle Initial)

Mailing Address 2737 Yellowoak Place

City Hilliard State OH Zip Code 43026

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH CN 8 Occupation AREA FIELD SERVICES DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 983.54

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279831

Amount of Each Receipt this Period 98.50

C. SHARON REESE
Full Name (Last, First, Middle Initial)

Mailing Address 390 Worthington Road

City Westerville State OH Zip Code 43082

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 10 / 24 / 2012
Transaction ID : SA11AI.280125

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional).....▶ 128.50

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 610 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. EMMANUEL L. REEVES
Full Name (Last, First, Middle Initial)

Mailing Address 6615 150th Street SW
Apt. 28

City Lakewood State WA Zip Code 98439

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt
10 / 25 / 2012
Transaction ID : SA11AI.276971

Amount of Each Receipt this Period
26.00

B. EMMANUEL L. REEVES
Full Name (Last, First, Middle Initial)

Mailing Address 6615 150th Street SW
Apt. 28

City Lakewood State WA Zip Code 98439

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 546.00

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277262

Amount of Each Receipt this Period
26.00

C. NICOLE R. REFFITT
Full Name (Last, First, Middle Initial)

Mailing Address 35395 Ponetown Road

City Ray State OH Zip Code 45672

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation NURSE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
10 / 19 / 2012
Transaction ID : SA11AI.278541

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 62.00

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 611 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. NICOLE R. REFFITT
 Full Name (Last, First, Middle Initial)
 Mailing Address 35395 Ponetown Road
 City Ray State OH Zip Code 45672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278899
 Amount of Each Receipt this Period 10.00

B. NICOLE R. REFFITT
 Full Name (Last, First, Middle Initial)
 Mailing Address 35395 Ponetown Road
 City Ray State OH Zip Code 45672
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation NURSE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279257
 Amount of Each Receipt this Period 10.00

C. STEPHEN REGENSTREIF
 Full Name (Last, First, Middle Initial)
 Mailing Address 3214 38th Street NW
 City Washington State DC Zip Code 20016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation DIRECTOR, RETIREE PROGRAMS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1274.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276492
 Amount of Each Receipt this Period 62.60

SUBTOTAL of Receipts This Page (optional).....▶	82.60
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 612 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. STEPHEN REGENSTREIF			Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2012 Transaction ID : SA11AI.276686
Mailing Address 3214 38th Street NW			Amount of Each Receipt this Period 62.60
City Washington	State DC	Zip Code 20016	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation DIRECTOR, RETIREE PROGRAMS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1336.60		

Full Name (Last, First, Middle Initial) B. LAURA REYES			Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2012 Transaction ID : SA11AI.276493
Mailing Address 5706 Colorado Avenue NW			Amount of Each Receipt this Period 104.48
City Washington	State DC	Zip Code 20011	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation SECRETARY TREASURER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 953.36		

Full Name (Last, First, Middle Initial) C. LAURA REYES			Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2012 Transaction ID : SA11AI.276687
Mailing Address 5706 Colorado Avenue NW			Amount of Each Receipt this Period 104.48
City Washington	State DC	Zip Code 20011	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation SECRETARY TREASURER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1057.84		

SUBTOTAL of Receipts This Page (optional).....▶	271.56
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 613 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ANITA REYNA
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson Street SE
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277263
 Amount of Each Receipt this Period
 10.00

B. ANITA REYNA
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson Street SE
 City Olympia State WA Zip Code 98501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277844
 Amount of Each Receipt this Period
 10.00

C. HARRY RHODES
 Full Name (Last, First, Middle Initial)
 Mailing Address 4031 Executive Park Drive
 City Harrisburg State PA Zip Code 17111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.13

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.279680
 Amount of Each Receipt this Period
 58.18

SUBTOTAL of Receipts This Page (optional).....▶	78.18
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 614 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LISA E. RICE
Full Name (Last, First, Middle Initial)

Mailing Address 1456 Greenmont Court

City Reston	State VA	Zip Code 20190
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation PROJECT COORDINATOR
----------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **784.20**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276494

Amount of Each Receipt this Period

39.21

B. LISA E. RICE
Full Name (Last, First, Middle Initial)

Mailing Address 1456 Greenmont Court

City Reston	State VA	Zip Code 20190
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation PROJECT COORDINATOR
----------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **823.41**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SA11AI.276688

Amount of Each Receipt this Period

39.21

C. COLLEN M. RICE-LOZENSKY
Full Name (Last, First, Middle Initial)

Mailing Address 4510 SW Austin Street

City Seattle	State WA	Zip Code 98136
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2012

Transaction ID : SA11AI.276973

Amount of Each Receipt this Period

10.50

SUBTOTAL of Receipts This Page (optional).....▶	88.92
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 615 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. COLLEN M. RICE-LOZENSKY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4510 SW Austin Street
 City Seattle State WA Zip Code 98136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.50

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277264
 Amount of Each Receipt this Period 10.50

B. COLLEN M. RICE-LOZENSKY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4510 SW Austin Street
 City Seattle State WA Zip Code 98136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277845
 Amount of Each Receipt this Period 10.50

C. SHAWN E. RICHARDSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 6688 Markwood Street
 City Worthington State OH Zip Code 43085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation TRANSPORTATION TECHN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278543
 Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 61.00
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 616 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. SHAWN E. RICHARDSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 6688 Markwood Street
 City State Zip Code
 Worthington OH 43085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH TRANSPORTATION TECHN
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 880.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278901
 Amount of Each Receipt this Period
 40.00

B. SHAWN E. RICHARDSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 6688 Markwood Street
 City State Zip Code
 Worthington OH 43085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH TRANSPORTATION TECHN
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 920.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279259
 Amount of Each Receipt this Period
 40.00

C. MICHELLE RIDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4031 Executive Park Drive
 City State Zip Code
 Harrisburg PA 17111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME PA CN 13 STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1190.26

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.279681
 Amount of Each Receipt this Period
 116.36

SUBTOTAL of Receipts This Page (optional)..... ▶ 196.36
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 617 OF 846
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input 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

A. BRUCE RIDLEY
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276974

Amount of Each Receipt this Period 10.50

B. BRUCE RIDLEY
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.50

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277265

Amount of Each Receipt this Period 10.50

C. BRUCE RIDLEY
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277846

Amount of Each Receipt this Period 10.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 31.50

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 618 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. GREGORY A. RIEMER
Full Name (Last, First, Middle Initial)

Mailing Address 3478 Scotswood Circle

City Richfield State OH Zip Code 44286

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012

Transaction ID : SA11AI.279832

Amount of Each Receipt this Period
 208.84

B. JOY L. RING
Full Name (Last, First, Middle Initial)

Mailing Address 1334 Haloa Drive

City Honolulu State HI Zip Code 96818

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012

Transaction ID : SA11AI.280441

Amount of Each Receipt this Period
 30.00

C. LONNIE RIPLEY
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2012

Transaction ID : SA11AI.276975

Amount of Each Receipt this Period
 12.00

SUBTOTAL of Receipts This Page (optional).....▶	62.84
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 619 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. LONNIE RIPLEY		Date of Receipt 11 / 09 / 2012 Transaction ID : SA11AI.277266
Mailing Address 1212 Jefferson St., SE Suite 300		Amount of Each Receipt this Period 12.00
City Olympia	State WA Zip Code 98501	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 242.00
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Full Name (Last, First, Middle Initial) B. LONNIE RIPLEY		
Mailing Address 1212 Jefferson St., SE Suite 300		Date of Receipt 11 / 26 / 2012 Transaction ID : SA11AI.277847
City Olympia		Amount of Each Receipt this Period 12.00
State WA Zip Code 98501		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 254.00
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Full Name (Last, First, Middle Initial) C. EVA RIPPETEAU		
Mailing Address 7208 N Mowawk		Date of Receipt 10 / 31 / 2012 Transaction ID : SA11AI.279365
City Portland		Amount of Each Receipt this Period 40.00
State OR Zip Code 97203		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 400.00
Name of Employer AFSCME OR CN 75	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
SUBTOTAL of Receipts This Page (optional)..... ▶		
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 620 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. THOMAS J. RITCHIE Sr.
Full Name (Last, First, Middle Initial)

Mailing Address 1644 Spaulding Road

City Dayton State OH Zip Code 45432

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH CN 8 Occupation REGIONAL DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1106.13

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279834

Amount of Each Receipt this Period 99.76

B. AYANA L. RIVERS
Full Name (Last, First, Middle Initial)

Mailing Address 1475 Cunard Road

City Columbus State OH Zip Code 43227

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation BUS DRIVER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 359.49

Date of Receipt 10 / 29 / 2012
Transaction ID : SA11AI.280277

Amount of Each Receipt this Period 15.63

C. AYANA L. RIVERS
Full Name (Last, First, Middle Initial)

Mailing Address 1475 Cunard Road

City Columbus State OH Zip Code 43227

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation BUS DRIVER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.12

Date of Receipt 11 / 13 / 2012
Transaction ID : SA11AI.280307

Amount of Each Receipt this Period 15.63

SUBTOTAL of Receipts This Page (optional).....▶ 131.02

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 621 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. AYANA L. RIVERS		Date of Receipt
Mailing Address 1475 Cunard Road		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code
Columbus	OH	43227
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.280337
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="15.63"/>
Name of Employer	Occupation	
AFSCME OH LOC 4/COLUMBUS CITY	BUS DRIVER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="390.75"/>	

Full Name (Last, First, Middle Initial) B. CLAUDIA ROBERSON		Date of Receipt
Mailing Address 7340 S. Yates 2nd Fl.		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City	State	Zip Code
Chicago	IL	60649
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.279582
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="94.80"/>
Name of Employer	Occupation	
AFSCME IL CN 31	ASSOCIATE DIRECTOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="948.00"/>	

Full Name (Last, First, Middle Initial) C. STEPHEN M. ROBERTS		Date of Receipt
Mailing Address 5661 Windsor Woods Drive		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Columbus	OH	43230
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.279835
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="65.44"/>
Name of Employer	Occupation	
AFSCME OH CN 8	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="653.43"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="175.87"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 622 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. TIMOTHY W. ROBERTS
Full Name (Last, First, Middle Initial)

Mailing Address 5033 Ridgewood Road E.

City Springfield	State OH	Zip Code 45503
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11	Occupation CORRECTION OFFICER
--------------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **560.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2012

Transaction ID : SA11AI.280128

Amount of Each Receipt this Period

100.00

B. JESSICA R. ROBINSON
Full Name (Last, First, Middle Initial)

Mailing Address 7901 Chicago Avenue

City Silver Spring	State MD	Zip Code 20910
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation ASSOCIATE GENERAL COUNSEL II
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1567.80**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276495

Amount of Each Receipt this Period

78.39

C. JESSICA R. ROBINSON
Full Name (Last, First, Middle Initial)

Mailing Address 7901 Chicago Avenue

City Silver Spring	State MD	Zip Code 20910
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation ASSOCIATE GENERAL COUNSEL II
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1650.11**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SA11AI.276689

Amount of Each Receipt this Period

82.31

SUBTOTAL of Receipts This Page (optional).....▶	260.70
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 623 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. KATHRYN ROBINSON		Date of Receipt
Mailing Address 29 N. Wacker Drive Suite 800		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City Chicago	State IL	Zip Code 60606
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.279583
Name of Employer AFSCME IL CN 31		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="51.68"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="516.80"/>	

Full Name (Last, First, Middle Initial) B. JOSEPHINE ROBLES		Date of Receipt
Mailing Address 13018 101st Lane NE Apt. 1		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City Kirkland	State WA	Zip Code 98034
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277359
Name of Employer AFSCME WA CN 28/UNIV OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="21.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="210.00"/>	

Full Name (Last, First, Middle Initial) C. JOSEPHINE ROBLES		Date of Receipt
Mailing Address 13018 101st Lane NE Apt. 1		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Kirkland	State WA	Zip Code 98034
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277918
Name of Employer AFSCME WA CN 28/UNIV OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="21.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="231.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="93.68"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 624 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LYNN ANN RODENHUIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 406 Thayer Avenue
 City Silver Spring State MD Zip Code 20910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ASSOC. DIRECTOR, ORGNZNG & FLD SVCS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1138.80

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276496
 Amount of Each Receipt this Period 56.94

B. LYNN ANN RODENHUIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 406 Thayer Avenue
 City Silver Spring State MD Zip Code 20910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ASSOC. DIRECTOR, ORGNZNG & FLD SVCS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1195.74

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276690
 Amount of Each Receipt this Period 56.94

C. CHRISTINA D. RODMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1011 Piedmont Road
 City Columbus State OH Zip Code 43224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation UTILITIES TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278546
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 123.88
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 625 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. CHRISTINA D. RODMAN			Date of Receipt
Mailing Address 1011 Piedmont Road			<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.278904
Columbus	OH	43224	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		
AFSCME OH LOC 11/STATE OF OH	UTILITIES TECHNICIAN		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. CHRISTINA D. RODMAN			Date of Receipt
Mailing Address 1011 Piedmont Road			<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279262
Columbus	OH	43224	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		
AFSCME OH LOC 11/STATE OF OH	UTILITIES TECHNICIAN		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="230.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. JUANITA M. RODRIGUEZ			Date of Receipt
Mailing Address 4024 Wellington Drive			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276497
Oakdale	PA	15071	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="66.96"/>
Name of Employer	Occupation		
AFSCME INT'L	ASSISTANT TO REGIONAL DIRECTOR		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1460.20"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="86.96"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 626 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JUANITA M. RODRIGUEZ		Date of Receipt
Mailing Address 4024 Wellington Drive		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Oakdale	PA	15071
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276691
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME INT'L	ASSISTANT TO REGIONAL DIRECTOR	<input type="text" value="68.80"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1529.00"/>	

Full Name (Last, First, Middle Initial) B. LAWRENCE ROEHRIG		Date of Receipt
Mailing Address 13084 Lia Court		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Lindon	MI	48451
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276335
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME MI CN 25	EXECUTIVE DIRECTOR	<input type="text" value="70.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2931.60"/>	

Full Name (Last, First, Middle Initial) C. LAWRENCE ROEHRIG		Date of Receipt
Mailing Address 13084 Lia Court		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/>
City	State	Zip Code
Lindon	MI	48451
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.279891
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME MI CN 25	EXECUTIVE DIRECTOR	<input type="text" value="106.88"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="3038.48"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="245.68"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 627 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. LAWRENCE ROEHRIG			Date of Receipt
Mailing Address 13084 Lia Court			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.279941
Lindon	MI	48451	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="106.88"/>
Name of Employer	Occupation		
AFSCME MI CN 25	EXECUTIVE DIRECTOR		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="3145.36"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. ALICE M ROGERS			Date of Receipt
Mailing Address 1111 Sturm Avenue			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.276977
Walla Walla	WA	99362	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="21.00"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="420.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. ALICE M ROGERS			Date of Receipt
Mailing Address 1111 Sturm Avenue			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.277268
Walla Walla	WA	99362	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="21.00"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="441.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="148.88"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 628 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. ALICE M ROGERS		Date of Receipt
Mailing Address 1111 Sturm Avenue		M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2012
City	State	Zip Code
Walla Walla	WA	99362
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	462.00	
		Transaction ID : SA11AI.277849
		Amount of Each Receipt this Period
		21.00

Full Name (Last, First, Middle Initial) B. KATHRYN ROGERS		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2012
City	State	Zip Code
Olympia	WA	98501
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	210.00	
		Transaction ID : SA11AI.276978
		Amount of Each Receipt this Period
		10.50

Full Name (Last, First, Middle Initial) C. KATHRYN ROGERS		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		M M M / D D D / Y Y Y Y Y Y 11 / 09 / 2012
City	State	Zip Code
Olympia	WA	98501
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	220.50	
		Transaction ID : SA11AI.277269
		Amount of Each Receipt this Period
		10.50

SUBTOTAL of Receipts This Page (optional).....▶	42.00
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 629 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KATHRYN ROGERS
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277850

Amount of Each Receipt this Period 10.50

B. JOANN ROSS
Full Name (Last, First, Middle Initial)

Mailing Address 1625 L Street NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L/STATE STREET Occupation RETIREE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.276744

Amount of Each Receipt this Period 20.00

C. MICHAEL C. ROSS
Full Name (Last, First, Middle Initial)

Mailing Address 9432 S. Harding

City Evergreen Park State IL Zip Code 60805

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 687.40

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279584

Amount of Each Receipt this Period 68.74

SUBTOTAL of Receipts This Page (optional)..... ▶ 99.24

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 630 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. STEVE ROTH
Full Name (Last, First, Middle Initial)

Mailing Address 4320 NW Second Avenue

City Des Moines State IA Zip Code 50313

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IA CN 61 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **648.20**

Date of Receipt **11 / 07 / 2012**

Transaction ID : SA11AI.280083

Amount of Each Receipt this Period **50.00**

B. JOSEPH P. RUGOLA
Full Name (Last, First, Middle Initial)

Mailing Address 6805 Oak Creek Drive

City Columbus State OH Zip Code 43229

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4 Occupation EXECUTIVE DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2306.00**

Date of Receipt **10 / 24 / 2012**

Transaction ID : SA11AI.280190

Amount of Each Receipt this Period **100.00**

C. JOSEPH P. RUGOLA
Full Name (Last, First, Middle Initial)

Mailing Address 6805 Oak Creek Drive

City Columbus State OH Zip Code 43229

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4 Occupation EXECUTIVE DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2320.00**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.276336

Amount of Each Receipt this Period **14.00**

SUBTOTAL of Receipts This Page (optional)..... **164.00**

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 631 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JOSEPH P. RUGOLA		Date of Receipt
Mailing Address 6805 Oak Creek Drive		<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City Columbus State OH Zip Code 43229		Transaction ID : SA11AI.280245
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer AFSCME OH LOC 4	Occupation EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2420.00"/>	

Full Name (Last, First, Middle Initial) B. IDA L. RUKAVINA		Date of Receipt
Mailing Address 5385 Twin Lakes Loop		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/>
City Aurora State MN Zip Code 55705		Transaction ID : SA11AI.280386
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer AFSCME MN CN 65	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) C. BLAINE J RUMMEL		Date of Receipt
Mailing Address 5 E. Glebe Road Apt. D		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City Alexandria State VA Zip Code 22305		Transaction ID : SA11AI.276498
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="107.88"/>
Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECT, COMMUNICATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2120.29"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="227.88"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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 632 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. BLAINE J RUMMEL		Date of Receipt
Mailing Address 5 E. Glebe Road Apt. D		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City Alexandria	State VA	Zip Code 22305
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276692
Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECT, COMMUNICATIONS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="107.88"/>
	<input type="text" value="2228.17"/>	

Full Name (Last, First, Middle Initial) B. VICKY S. RUPPERT		Date of Receipt
Mailing Address 1016 W Main Street		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2012"/>
City Watertown	State WI	Zip Code 53098
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.277587
Name of Employer AFSCME WI CN 24/STATE OF WI	Occupation STAFF REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
	<input type="text" value="420.00"/>	

Full Name (Last, First, Middle Initial) C. VICKY S. RUPPERT		Date of Receipt
Mailing Address 1016 W Main Street		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City Watertown	State WI	Zip Code 53098
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.277588
Name of Employer AFSCME WI CN 24/STATE OF WI	Occupation STAFF REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
	<input type="text" value="440.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="147.88"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 633 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. VICKY S. RUPPERT
 Full Name (Last, First, Middle Initial)
 Mailing Address 1016 W Main Street
 City Watertown State WI Zip Code 53098
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.277589
 Amount of Each Receipt this Period 20.00

B. VERA SAADE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1309 Vine Street
 City Lansing State MI Zip Code 48912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MI CN 25 Occupation ASSISTANT DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 519.75

Date of Receipt 11 / 07 / 2012
Transaction ID : SA11AI.279892
 Amount of Each Receipt this Period 24.75

C. VERA SAADE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1309 Vine Street
 City Lansing State MI Zip Code 48912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MI CN 25 Occupation ASSISTANT DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 544.50

Date of Receipt 11 / 20 / 2012
Transaction ID : SA11AI.279942
 Amount of Each Receipt this Period 24.75

SUBTOTAL of Receipts This Page (optional)..... ▶ 69.50
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 634 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JEFFREY C. SABIN
Full Name (Last, First, Middle Initial)

Mailing Address 624 Cleveland Street

City State Zip Code
Eveleth MN 55734

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME MN CN 5/CN14 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
549.34

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2012
Transaction ID : SA11AI.280058

Amount of Each Receipt this Period
49.94

B. GEORGE SACHARIAN
Full Name (Last, First, Middle Initial)

Mailing Address 126 S. Lynn Blvd.

City State Zip Code
Upper Darby PA 19082

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME PA CN 13 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
804.76

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2012
Transaction ID : SA11AI.279685

Amount of Each Receipt this Period
73.16

C. CARRIE B. SACHSE
Full Name (Last, First, Middle Initial)

Mailing Address 3506 Hershey Road

City State Zip Code
Erie PA 16506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME INT'L ORGANIZER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
535.02

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012
Transaction ID : SA11AI.276499

Amount of Each Receipt this Period
28.38

SUBTOTAL of Receipts This Page (optional).....▶ 151.48

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 635 OF 846
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input 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

A. CARRIE B. SACHSE
Full Name (Last, First, Middle Initial)

Mailing Address 3506 Hershey Road

City Erie State PA Zip Code 16506

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation ORGANIZER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **563.40**

Date of Receipt **11 / 15 / 2012**

Transaction ID : SA11AI.276693

Amount of Each Receipt this Period **28.38**

B. ELIGA SACKS
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson Street SE

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **10 / 25 / 2012**

Transaction ID : SA11AI.276981

Amount of Each Receipt this Period **11.00**

C. ELIGA SACKS
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson Street SE

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **231.00**

Date of Receipt **11 / 09 / 2012**

Transaction ID : SA11AI.277272

Amount of Each Receipt this Period **11.00**

SUBTOTAL of Receipts This Page (optional)..... **50.38**

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 636 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ELIGA SACKS
Full Name (Last, First, Middle Initial)
Mailing Address 1212 Jefferson Street SE
City Olympia State WA Zip Code 98501
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **242.00**

Date of Receipt **11 / 26 / 2012**
Transaction ID : SA11AI.277853
Amount of Each Receipt this Period **11.00**

B. ERIK SACKSTEIN
Full Name (Last, First, Middle Initial)
Mailing Address 10828 Forest Avenue S.
City Seattle State WA Zip Code 98178
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **210.00**

Date of Receipt **11 / 09 / 2012**
Transaction ID : SA11AI.277273
Amount of Each Receipt this Period **10.00**

C. ERIK SACKSTEIN
Full Name (Last, First, Middle Initial)
Mailing Address 10828 Forest Avenue S.
City Seattle State WA Zip Code 98178
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **220.00**

Date of Receipt **11 / 26 / 2012**
Transaction ID : SA11AI.277854
Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional)..... **31.00**
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 637 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOHN SALSBURY
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 65793

City Washington State DC Zip Code 20035

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation FIELD COMMUNICATION MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **715.50**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.276500

Amount of Each Receipt this Period
36.15

B. JOHN SALSBURY
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 65793

City Washington State DC Zip Code 20035

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation FIELD COMMUNICATION MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **751.65**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012

Transaction ID : SA11AI.276694

Amount of Each Receipt this Period
36.15

C. PATRIA L. SAMPSON
Full Name (Last, First, Middle Initial)

Mailing Address 2700 Maple Street Unit C121

City Bremerton State WA Zip Code 98310

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 25 / 2012

Transaction ID : SA11AI.276983

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	92.30
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 638 OF 846	
(check only one)			
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input 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

A. PATRIA L. SAMPSON

Full Name (Last, First, Middle Initial)
Mailing Address 2700 Maple Street
Unit C121

City State Zip Code
Bremerton WA 98310

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 09 / 2012
Transaction ID : SA11AI.277274

Amount of Each Receipt this Period
20.00

B. PATRIA L. SAMPSON

Full Name (Last, First, Middle Initial)
Mailing Address 2700 Maple Street
Unit C121

City State Zip Code
Bremerton WA 98310

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2012
Transaction ID : SA11AI.277855

Amount of Each Receipt this Period
20.00

C. ATHA L. SANDERS

Full Name (Last, First, Middle Initial)
Mailing Address 189 Park Avenue
Apt. 1

City State Zip Code
Delaware OH 43015

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME OH LOC 11/STATE OF OH JUVENILE CORRECTION OFFICER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 19 / 2012
Transaction ID : SA11AI.278554

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 639 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ATHA L. SANDERS
Full Name (Last, First, Middle Initial)

Mailing Address 189 Park Avenue
Apt. 1

City Delaware State OH Zip Code 43015

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
11 / 02 / 2012
Transaction ID : SA11AI.278912

Amount of Each Receipt this Period
10.00

B. ATHA L. SANDERS
Full Name (Last, First, Middle Initial)

Mailing Address 189 Park Avenue
Apt. 1

City Delaware State OH Zip Code 43015

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
11 / 16 / 2012
Transaction ID : SA11AI.279270

Amount of Each Receipt this Period
10.00

C. HERBERT SANDERS
Full Name (Last, First, Middle Initial)

Mailing Address 1034 N Washington Avenue

City Lansing State MI Zip Code 48906

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.50

Date of Receipt
11 / 07 / 2012
Transaction ID : SA11AI.279893

Amount of Each Receipt this Period
10.50

SUBTOTAL of Receipts This Page (optional).....▶ 30.50

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 640 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. HERBERT SANDERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1034 N Washington Avenue
 City Lansing State MI Zip Code 48906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt 11 / 20 / 2012
Transaction ID : SA11AI.279943
 Amount of Each Receipt this Period 10.50

B. JUNE E. SANDERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 4304 Independence Road
 City Sunnyside State WA Zip Code 98944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276984
 Amount of Each Receipt this Period 15.00

C. JUNE E. SANDERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 4304 Independence Road
 City Sunnyside State WA Zip Code 98944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277275
 Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional).....▶	40.50
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 641 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JUNE E. SANDERSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 4304 Independence Road
 City Sunnyside State WA Zip Code 98944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277856
 Amount of Each Receipt this Period
 15.00

B. WILBERT R. SATTLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 73981 Morgan Hill Road
 City Adena State OH Zip Code 43901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278556
 Amount of Each Receipt this Period
 20.00

C. WILBERT R. SATTLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 73981 Morgan Hill Road
 City Adena State OH Zip Code 43901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 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
 11 / 02 / 2012
Transaction ID : SA11AI.278914
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
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 642 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. WILBERT R. SATTLER
Full Name (Last, First, Middle Initial)

Mailing Address 73981 Morgan Hill Road

City Adena State OH Zip Code 43901

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt **11 / 16 / 2012**

Transaction ID : SA11AI.279272

Amount of Each Receipt this Period **200.00**

B. RODNEY SAUER
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson Street SE

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **11 / 09 / 2012**

Transaction ID : SA11AI.277277

Amount of Each Receipt this Period **10.00**

C. RODNEY SAUER
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson Street SE

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 26 / 2012**

Transaction ID : SA11AI.277858

Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional)..... **40.00**

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 643 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LEE A. SAUNDERS
Full Name (Last, First, Middle Initial)

Mailing Address 7510 Alaska Avenue NW

City Washington	State DC	Zip Code 20012
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation PRESIDENT
----------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2534.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276501

Amount of Each Receipt this Period
122.92

B. LEE A. SAUNDERS
Full Name (Last, First, Middle Initial)

Mailing Address 7510 Alaska Avenue NW

City Washington	State DC	Zip Code 20012
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation PRESIDENT
----------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2656.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SA11AI.276695

Amount of Each Receipt this Period
122.92

C. MARIANNE SAUNDERS
Full Name (Last, First, Middle Initial)

Mailing Address 48 Mullen Street

City Uniontown	State PA	Zip Code 15401-4060
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
804.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2012

Transaction ID : SA11AI.279686

Amount of Each Receipt this Period
73.16

SUBTOTAL of Receipts This Page (optional).....▶	319.00
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 644 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. SHELLIE A. SAVAGE
Full Name (Last, First, Middle Initial)

Mailing Address 11540 Waddell Creek Rd. SW

City Olympia	State WA	Zip Code 98512
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2012

Transaction ID : SA11AI.276987

Amount of Each Receipt this Period

30.00

B. SHELLIE A. SAVAGE
Full Name (Last, First, Middle Initial)

Mailing Address 11540 Waddell Creek Rd. SW

City Olympia	State WA	Zip Code 98512
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11AI.277278

Amount of Each Receipt this Period

30.00

C. SHELLIE A. SAVAGE
Full Name (Last, First, Middle Initial)

Mailing Address 11540 Waddell Creek Rd. SW

City Olympia	State WA	Zip Code 98512
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **660.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.277859

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 645 OF 846
	<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	<input 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

A. MARY ANN SAYTAR
Full Name (Last, First, Middle Initial)

Mailing Address 609 Penn Street

City Steelton State PA Zip Code 17113

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **531.90**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2012

Transaction ID : SA11AI.279687

Amount of Each Receipt this Period
48.66

B. LAWRENCE SCANLON
Full Name (Last, First, Middle Initial)

Mailing Address 1108 Duke Street

City Alexandria State VA Zip Code 22314-3514

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L/STATE STREET Occupation RETIREE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1078.95**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2012

Transaction ID : SA11AI.276745

Amount of Each Receipt this Period
48.41

C. TANYA R. SCHEIB
Full Name (Last, First, Middle Initial)

Mailing Address 205 North Michigan Avenue

City Chicago State IL Zip Code 60601

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **214.62**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2012

Transaction ID : SA11AI.279469

Amount of Each Receipt this Period
30.66

SUBTOTAL of Receipts This Page (optional)..... **127.73**

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 646 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. RUSSELL W. SCHEIDLER
Full Name (Last, First, Middle Initial)

Mailing Address 1099 Albemarle Street

City St. Paul State MN Zip Code 55117

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.278226

Amount of Each Receipt this Period **200.00**

B. JAMES SCHMITZ
Full Name (Last, First, Middle Initial)

Mailing Address 6437 Rock Forest Drive #305

City Bethesda State MD Zip Code 20817

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L/STATE STREET Occupation RETIREE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt **11 / 02 / 2012**

Transaction ID : SA11AI.276746

Amount of Each Receipt this Period **50.00**

C. CARLA J. SCHOCH
Full Name (Last, First, Middle Initial)

Mailing Address 5730 Sinclair Road

City Columbus State OH Zip Code 43229

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation TAX COMMISSIONER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 19 / 2012**

Transaction ID : SA11AI.278558

Amount of Each Receipt this Period **10.00**

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: (check only one)	PAGE 647 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CARLA J. SCHOCH
Full Name (Last, First, Middle Initial)

Mailing Address 5730 Sinclair Road

City Columbus State OH Zip Code 43229

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation TAX COMMISSIONER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278916

Amount of Each Receipt this Period 10.00

B. CARLA J. SCHOCH
Full Name (Last, First, Middle Initial)

Mailing Address 5730 Sinclair Road

City Columbus State OH Zip Code 43229

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation TAX COMMISSIONER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279274

Amount of Each Receipt this Period 10.00

C. DARL D. SCHOSSOW
Full Name (Last, First, Middle Initial)

Mailing Address 1910 2nd Avenue P.O. Box 189

City Newport State MN Zip Code 55055-0189

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.278227

Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 648 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ERIC SCHUBERT
Full Name (Last, First, Middle Initial)

Mailing Address 132 College Avenue

City Elmhurst	State PA	Zip Code 18416
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
698.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2012

Transaction ID : SA11AI.279690

Amount of Each Receipt this Period
67.70

B. MARY SCHWANGER
Full Name (Last, First, Middle Initial)

Mailing Address 419 Valley Street

City Marysville	State PA	Zip Code 17053
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1389.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2012

Transaction ID : SA11AI.279691

Amount of Each Receipt this Period
115.68

C. EDWARD SCHWARTZ
Full Name (Last, First, Middle Initial)

Mailing Address 205 N. Michigan Avenue

City Chicago	State IL	Zip Code 60601
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31/STATE OF IL	Occupation CHILD PROTECTION SPED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
390.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11AI.279470

Amount of Each Receipt this Period
31.26

SUBTOTAL of Receipts This Page (optional).....▶	214.64
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 649 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. GAIL M. SCOTT
Full Name (Last, First, Middle Initial)

Mailing Address 751 Bulen Avenue

City Columbus	State OH	Zip Code 43205
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH CN 8	Occupation STAFF REPRESENTATIVE
------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **398.66**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.279837

Amount of Each Receipt this Period

42.15

B. JESSIE M. SCOTT
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 13886

City Columbus	State OH	Zip Code 43213
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation ACCOUNT CLERK I
--	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1031.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.278560

Amount of Each Receipt this Period

35.00

C. JESSIE M. SCOTT
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 13886

City Columbus	State OH	Zip Code 43213
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation ACCOUNT CLERK I
--	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1066.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.278918

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional).....▶	112.15
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 650 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JESSIE M. SCOTT
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 13886

City Columbus	State OH	Zip Code 43213
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation ACCOUNT CLERK I
--	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1101.00

Date of Receipt
11 / 16 / 2012
Transaction ID : SA11AI.279276

Amount of Each Receipt this Period
35.00

B. SHARON ANN SCROGGINS
Full Name (Last, First, Middle Initial)
Mailing Address 3900 E. Sunset Road #1134

City Las Vegas	State NV	Zip Code 89120
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation FIELD ADMINISTRATIVE ASSISTANT
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
605.55

Date of Receipt
10 / 31 / 2012
Transaction ID : SA11AI.276502

Amount of Each Receipt this Period
30.74

C. SHARON ANN SCROGGINS
Full Name (Last, First, Middle Initial)
Mailing Address 3900 E. Sunset Road #1134

City Las Vegas	State NV	Zip Code 89120
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation FIELD ADMINISTRATIVE ASSISTANT
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
636.29

Date of Receipt
11 / 15 / 2012
Transaction ID : SA11AI.276696

Amount of Each Receipt this Period
30.74

SUBTOTAL of Receipts This Page (optional).....▶	96.48
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 651 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. CHARLES SCUDDER		Date of Receipt
Mailing Address 190 W. Ostend Street Suite 101		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City	State	Zip Code
Baltimore	MD	21230
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
AFSCME MD CN 982	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="605.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="55.00"/>

Full Name (Last, First, Middle Initial) B. SHELLEY K. SEEBERG		Date of Receipt
Mailing Address 13096 Charlston Way		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Rosemount	MN	55068
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
AFSCME INT'L	AREA FIELD SERVICES DIRECTOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="945.20"/>	
		Amount of Each Receipt this Period
		<input type="text" value="46.26"/>

Full Name (Last, First, Middle Initial) C. SHELLEY K. SEEBERG		Date of Receipt
Mailing Address 13096 Charlston Way		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Rosemount	MN	55068
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
AFSCME INT'L	AREA FIELD SERVICES DIRECTOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="991.46"/>	
		Amount of Each Receipt this Period
		<input type="text" value="46.26"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="147.52"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 652 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOHN SEFERIAN
Full Name (Last, First, Middle Initial)

Mailing Address 1425 Foxhall Road NW

City Washington State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation CHAIRPERSON, JUDICIAL PANEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 421.62

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276504

Amount of Each Receipt this Period
 13.30

B. JOHN SEFERIAN
Full Name (Last, First, Middle Initial)

Mailing Address 1425 Foxhall Road NW

City Washington State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation CHAIRPERSON, JUDICIAL PANEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 434.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : SA11AI.276698

Amount of Each Receipt this Period
 13.30

C. STEVEN SEGALL
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2012
Transaction ID : SA11AI.276988

Amount of Each Receipt this Period
 10.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 37.10

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 653 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. STEVEN SEGALL
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.50

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277279

Amount of Each Receipt this Period 10.50

B. STEVEN SEGALL
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277860

Amount of Each Receipt this Period 10.50

C. ELIOT A. SEIDE
Full Name (Last, First, Middle Initial)

Mailing Address 300 Hardman Avenue South

City South St. Paul State MN Zip Code 55075

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/CN14 Occupation EXECUTIVE DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1068.20

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276337

Amount of Each Receipt this Period 14.00

SUBTOTAL of Receipts This Page (optional).....▶ 35.00

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 654 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. ELIOT A. SEIDE		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2012 Transaction ID : SA11AI.280059
Mailing Address 300 Hardman Avenue South		Amount of Each Receipt this Period 92.82
City South St. Paul	State MN	Zip Code 55075
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME MN CN 5/CN14	Occupation EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1161.02	

Full Name (Last, First, Middle Initial) B. MARC SEIDEN		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 06 / 2012 Transaction ID : SA11AI.279968
Mailing Address 1410 Bush Street Suite A		Amount of Each Receipt this Period 44.62
City Baltimore	State MD	Zip Code 21230
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME MD CN 67	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 468.51	

Full Name (Last, First, Middle Initial) C. DELLA SELNER		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2012 Transaction ID : SA11AI.279763
Mailing Address 757 Mickey Inn Lane		Amount of Each Receipt this Period 20.00
City Chambersburg	State PA	Zip Code 17202
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME PA CN 13/STATE OF PA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional).....▶	157.44
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 655 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. PEDRO SERNA
Full Name (Last, First, Middle Initial)

Mailing Address 2721 4th Avenue #538

City Seattle State WA Zip Code 98121

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277280

Amount of Each Receipt this Period 10.00

B. PEDRO SERNA
Full Name (Last, First, Middle Initial)

Mailing Address 2721 4th Avenue #538

City Seattle State WA Zip Code 98121

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277861

Amount of Each Receipt this Period 10.00

C. TANYA C. SERRELL
Full Name (Last, First, Middle Initial)

Mailing Address 2327 Dunkirk Drive

City Columbus State OH Zip Code 43219

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278561

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00

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 656 OF 846
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input 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

A. TANYA C. SERRELL
Full Name (Last, First, Middle Initial)

Mailing Address 2327 Dunkirk Drive

City Columbus State OH Zip Code 43219

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278919

Amount of Each Receipt this Period 25.00

B. TANYA C. SERRELL
Full Name (Last, First, Middle Initial)

Mailing Address 2327 Dunkirk Drive

City Columbus State OH Zip Code 43219

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 575.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279277

Amount of Each Receipt this Period 25.00

C. DEBORAH SEYBOLD
Full Name (Last, First, Middle Initial)

Mailing Address 1500 S Columbus Avenue Unit 29

City Goldendale State WA Zip Code 98620

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277281

Amount of Each Receipt this Period 10.00

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 657 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. DEBORAH SEYBOLD		Date of Receipt
Mailing Address 1500 S Columbus Avenue Unit 29		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Goldendale	State WA	Zip Code 98620
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.277862
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="1000"/>
	<input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) B. MICHELLE A SFORZA		Date of Receipt
Mailing Address 415 U Street NW		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276505
Name of Employer AFSCME INT'L	Occupation ASST. DIRECTOR, CORPORATE AFFAIRS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="52.50"/>
	<input type="text" value="1038.80"/>	

Full Name (Last, First, Middle Initial) C. MICHELLE A SFORZA		Date of Receipt
Mailing Address 415 U Street NW		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276699
Name of Employer AFSCME INT'L	Occupation ASST. DIRECTOR, CORPORATE AFFAIRS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="52.50"/>
	<input type="text" value="1091.30"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="115.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 658 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. DOMINIC SGRO			Date of Receipt
Mailing Address 144 Stormer Road			<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279692
Indiana	PA	15701-0144	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="115.68"/>
Name of Employer	Occupation		
AFSCME PA CN 13	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1293.14"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. TIMOTHY P. SHAFER			Date of Receipt
Mailing Address P. O. Box 322			<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.280130
Waverly	OH	45690	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="70.00"/>
Name of Employer	Occupation		
AFSCME OH LOC 11	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="770.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. DIANE SHANNON			Date of Receipt
Mailing Address 8 Beacon Street			<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.280019
Boston	MA	02108-0000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="50.00"/>
Name of Employer	Occupation		
AFSCME MA CN 93	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="550.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="235.68"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 659 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JOE E. SHANNON III		Date of Receipt
Mailing Address 1614 Omar Drive		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City Columbus	State OH	Zip Code 43207
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.278563
Name of Employer AFSCME OH LOC 11/STATE OF OH		Amount of Each Receipt this Period
Occupation ODJFS CUSTOMER SERVICE REP		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="420.00"/>		

Full Name (Last, First, Middle Initial) B. JOE E. SHANNON III		Date of Receipt
Mailing Address 1614 Omar Drive		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City Columbus	State OH	Zip Code 43207
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.278921
Name of Employer AFSCME OH LOC 11/STATE OF OH		Amount of Each Receipt this Period
Occupation ODJFS CUSTOMER SERVICE REP		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="440.00"/>		

Full Name (Last, First, Middle Initial) C. JOE E. SHANNON III		Date of Receipt
Mailing Address 1614 Omar Drive		<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City Columbus	State OH	Zip Code 43207
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.279279
Name of Employer AFSCME OH LOC 11/STATE OF OH		Amount of Each Receipt this Period
Occupation ODJFS CUSTOMER SERVICE REP		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="460.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 660 OF 846
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input 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

Full Name (Last, First, Middle Initial) A. BETHANY D. SHEETS			Date of Receipt
Mailing Address 570 Friendly Ridge Road			<input type="text" value="M M"/> / <input type="text" value="D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.278565
Crown City	OH	45623	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
AFSCME OH LOC 11/STATE OF OH	THERAPUTIC PROGRAM TECH		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="465.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. BETHANY D. SHEETS			Date of Receipt
Mailing Address 570 Friendly Ridge Road			<input type="text" value="M M"/> / <input type="text" value="D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.278923
Crown City	OH	45623	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
AFSCME OH LOC 11/STATE OF OH	THERAPUTIC PROGRAM TECH		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="490.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. BETHANY D. SHEETS			Date of Receipt
Mailing Address 570 Friendly Ridge Road			<input type="text" value="M M"/> / <input type="text" value="D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.279281
Crown City	OH	45623	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
AFSCME OH LOC 11/STATE OF OH	THERAPUTIC PROGRAM TECH		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="515.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 661 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. PAMELA S. SHELTON
Full Name (Last, First, Middle Initial)

Mailing Address 4471 North Leavitt Road NW

City Warren	State OH	Zip Code 44485
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH CN 8	Occupation STAFF REPRESENTATIVE
------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.83**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.279838

Amount of Each Receipt this Period

32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	16	15	14	13	12	11	10	9	8	7	6	5	4	3	2	1
12.63																															

B. SANDRA SHELTON
Full Name (Last, First, Middle Initial)

Mailing Address 1090 Irongate Lane

City Columbus	State OH	Zip Code 43213
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation TAX COMMISSIONER
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.278567

Amount of Each Receipt this Period

32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	16	15	14	13	12	11	10	9	8	7	6	5	4	3	2	1
10.00																															

C. SANDRA SHELTON
Full Name (Last, First, Middle Initial)

Mailing Address 1090 Irongate Lane

City Columbus	State OH	Zip Code 43213
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation TAX COMMISSIONER
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.278925

Amount of Each Receipt this Period

32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	16	15	14	13	12	11	10	9	8	7	6	5	4	3	2	1
10.00																															

SUBTOTAL of Receipts This Page (optional).....▶	32.63
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 662 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. SANDRA SHELTON
Full Name (Last, First, Middle Initial)

Mailing Address 1090 Irongate Lane

City Columbus State OH Zip Code 43213

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation TAX COMMISSIONER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279283

Amount of Each Receipt this Period 10.00

B. KATHLEEN SHERRILL
Full Name (Last, First, Middle Initial)

Mailing Address 2396 Niagara

City Troy State MI Zip Code 48083

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.50

Date of Receipt 11 / 07 / 2012
Transaction ID : SA11AI.279894

Amount of Each Receipt this Period 10.50

C. KATHLEEN SHERRILL
Full Name (Last, First, Middle Initial)

Mailing Address 2396 Niagara

City Troy State MI Zip Code 48083

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt 11 / 20 / 2012
Transaction ID : SA11AI.279944

Amount of Each Receipt this Period 10.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 31.00

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 663 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MARCUS E. SHERROD
Full Name (Last, First, Middle Initial)

Mailing Address 2073 Henley Road

City Springfield State IL Zip Code 62702

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt **11 / 01 / 2012**

Transaction ID : SA11AI.279471

Amount of Each Receipt this Period **75.00**

B. GARY SHIMER
Full Name (Last, First, Middle Initial)

Mailing Address 5421 Marcy Street

City Warren State MI Zip Code 48091

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **611.52**

Date of Receipt **11 / 07 / 2012**

Transaction ID : SA11AI.279895

Amount of Each Receipt this Period **29.12**

C. GARY SHIMER
Full Name (Last, First, Middle Initial)

Mailing Address 5421 Marcy Street

City Warren State MI Zip Code 48091

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **640.64**

Date of Receipt **11 / 20 / 2012**

Transaction ID : SA11AI.279945

Amount of Each Receipt this Period **29.12**

SUBTOTAL of Receipts This Page (optional)..... **133.24**

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 664 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOSEPH M. SHIMKO
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 645

City Grindstone	State PA	Zip Code 15442
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13/STATE OF PA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.279764

Amount of Each Receipt this Period
20.00

B. SANDRA S. SHONBORN
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 123

City Jacksonville	State OH	Zip Code 45740
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH CN 8	Occupation STAFF REPRESENTATIVE
------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
871.89

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.279839

Amount of Each Receipt this Period
87.32

C. GARY D. SHOUP
Full Name (Last, First, Middle Initial)

Mailing Address 1275 Coal Road

City New Florence	State PA	Zip Code 15944
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13/STATE OF PA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.279765

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	127.32
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 665 OF 846
	<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	<input 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

A. CRYSTAL SHREFFLER
Full Name (Last, First, Middle Initial)

Mailing Address 4031 Executive Park Drive

City Harrisburg State PA Zip Code 17111-1599

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.94**

Date of Receipt **11 / 14 / 2012**

Transaction ID : SA11AI.279682

Amount of Each Receipt this Period **35.54**

B. STEVE SIEGEL
Full Name (Last, First, Middle Initial)

Mailing Address 411 North Court

City Ottumwa State IA Zip Code 52501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IA CN 61 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt **11 / 07 / 2012**

Transaction ID : SA11AI.280084

Amount of Each Receipt this Period **40.00**

C. ROWENA L. SILVA
Full Name (Last, First, Middle Initial)

Mailing Address 888 Mililani Street Suite 601

City Honolulu State HI Zip Code 96813-2991

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 02 / 2012**

Transaction ID : SA11AI.280443

Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional)..... ▶ **95.54**

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 666 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. BETTY J. SIMMONS-TALLEY		Date of Receipt
Mailing Address 2189 Lexington Avenue		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2012"/>
City State Zip Code Columbus OH 43211		Transaction ID : SA11AI.280278
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation BUS DRIVER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="615.00"/>	

Full Name (Last, First, Middle Initial) B. BETTY J. SIMMONS-TALLEY		Date of Receipt
Mailing Address 2189 Lexington Avenue		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>
City State Zip Code Columbus OH 43211		Transaction ID : SA11AI.280308
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation BUS DRIVER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="640.00"/>	

Full Name (Last, First, Middle Initial) C. BETTY J. SIMMONS-TALLEY		Date of Receipt
Mailing Address 2189 Lexington Avenue		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City State Zip Code Columbus OH 43211		Transaction ID : SA11AI.280338
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation BUS DRIVER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="665.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 667 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ISSA J. SIMPSON
Full Name (Last, First, Middle Initial)

Mailing Address 1139 S.E. 16th Avenue

City Portland	State OR	Zip Code 97214-3705
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OR CN 75	Occupation OFFICE SPECIALIST
-------------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.279368

Amount of Each Receipt this Period
600.00

B. TODD L. SINGER
Full Name (Last, First, Middle Initial)

Mailing Address 1030 6th Avenue

City Steelton	State PA	Zip Code 17113
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13/STATE OF PA	Occupation ADMINISTRATIVE/CLERICAL
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.279767

Amount of Each Receipt this Period
60.00

C. RACHEL Z. SISTOZA
Full Name (Last, First, Middle Initial)

Mailing Address 13164 Oak Farm Drive

City Woodbridge	State VA	Zip Code 22192
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation OFFICE ASSISTANT IV
----------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SA11AI.276701

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	130.00
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 668 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ANDREW D. SKAAR
 Full Name (Last, First, Middle Initial)
 Mailing Address 308 S. Douglas Avenue
 City Springfield State IL Zip Code 62704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31/STATE OF IL Occupation ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt **11 / 01 / 2012**
Transaction ID : SA11AI.279472
 Amount of Each Receipt this Period **31.50**

B. ROBERT M. SKEES
 Full Name (Last, First, Middle Initial)
 Mailing Address 643 Grandview Avenue
 City Pittsburgh State PA Zip Code 15202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **440.00**

Date of Receipt **10 / 31 / 2012**
Transaction ID : SA11AI.279768
 Amount of Each Receipt this Period **40.00**

C. ROBERTA J. SKOK
 Full Name (Last, First, Middle Initial)
 Mailing Address 775 Township Road #2204
 City Perrysville State OH Zip Code 44864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **868.31**

Date of Receipt **10 / 31 / 2012**
Transaction ID : SA11AI.279840
 Amount of Each Receipt this Period **87.32**

SUBTOTAL of Receipts This Page (optional)..... **158.82**
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 669 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. TERRY SKULTETY			Date of Receipt
Mailing Address 222 Meade Street			<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279693
Homer City	PA	15748	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="67.70"/>
Name of Employer	Occupation		
AFSCME PA CN 13	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="713.73"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. SUSAN J. SLABAUGH			Date of Receipt
Mailing Address 2135 Michelle Drive			<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.280191
Grove City	OH	43123	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		
AFSCME OH LOC 4	ACCOUNTING CLERK		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. SUSAN J. SLABAUGH			Date of Receipt
Mailing Address 2135 Michelle Drive			<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.280246
Grove City	OH	43123	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		
AFSCME OH LOC 4	ACCOUNTING CLERK		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="87.70"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 670 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. WALTER P. SMICK
Full Name (Last, First, Middle Initial)

Mailing Address 4912 NE 114th Street

City Vancouver	State WA	Zip Code 98686
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		25		2012

Transaction ID : SA11AI.276992

Amount of Each Receipt this Period
13.00

B. WALTER P. SMICK
Full Name (Last, First, Middle Initial)

Mailing Address 4912 NE 114th Street

City Vancouver	State WA	Zip Code 98686
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
273.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		09		2012

Transaction ID : SA11AI.277283

Amount of Each Receipt this Period
13.00

C. WALTER P. SMICK
Full Name (Last, First, Middle Initial)

Mailing Address 4912 NE 114th Street

City Vancouver	State WA	Zip Code 98686
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		26		2012

Transaction ID : SA11AI.277864

Amount of Each Receipt this Period
13.00

SUBTOTAL of Receipts This Page (optional).....▶	39.00
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 671 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BETTY SMITH
Full Name (Last, First, Middle Initial)

Mailing Address 19292 Archer

City Detroit State MI Zip Code 48219

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MI CN 25 Occupation ASSISTANT TO THE PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **698.46**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2012

Transaction ID : SA11AI.279896

Amount of Each Receipt this Period
33.26

B. BETTY SMITH
Full Name (Last, First, Middle Initial)

Mailing Address 19292 Archer

City Detroit State MI Zip Code 48219

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MI CN 25 Occupation ASSISTANT TO THE PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **731.72**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2012

Transaction ID : SA11AI.279946

Amount of Each Receipt this Period
33.26

C. CHARLESETTA M. SMITH
Full Name (Last, First, Middle Initial)

Mailing Address 2606 Heritage Drive

City Champaign State IL Zip Code 61822

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation SECRETARY III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **495.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2012

Transaction ID : SA11AI.279473

Amount of Each Receipt this Period
41.70

SUBTOTAL of Receipts This Page (optional).....▶	108.22
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 672 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CONNIE SMITH
Full Name (Last, First, Middle Initial)

Mailing Address 1739 E 24th Street

City Capitol Heights State IA Zip Code 50317

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IA CN 61 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **645.26**

Date of Receipt **11 / 07 / 2012**

Transaction ID : SA11AI.280086

Amount of Each Receipt this Period **58.66**

B. DEREK L. SMITH
Full Name (Last, First, Middle Initial)

Mailing Address 4306 Broken Arrow Court

City Clinton State MD Zip Code 20735

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, GENERAL SERVICE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **960.96**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.276508

Amount of Each Receipt this Period **45.39**

C. DEREK L. SMITH
Full Name (Last, First, Middle Initial)

Mailing Address 4306 Broken Arrow Court

City Clinton State MD Zip Code 20735

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, GENERAL SERVICE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1006.35**

Date of Receipt **11 / 15 / 2012**

Transaction ID : SA11AI.276702

Amount of Each Receipt this Period **45.39**

SUBTOTAL of Receipts This Page (optional)..... **149.44**

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 673 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KRISTIN SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 4031 Executive Park Drive
 City Harrisburg State PA Zip Code 17111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 531.90

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.279694
 Amount of Each Receipt this Period 48.66

B. NEFERTITI SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 2013 S. 16th Avenue
 City Broadview State IL Zip Code 60155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 836.60

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279585
 Amount of Each Receipt this Period 83.66

C. PEARL ALICE SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 116 Winchester Street
 City Providence State RI Zip Code 02904-0000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation PEOPLE COORDINATOR III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 806.76

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276509
 Amount of Each Receipt this Period 44.82

SUBTOTAL of Receipts This Page (optional)..... ▶ 177.14
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 674 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. PEARL ALICE SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 116 Winchester Street
City Providence State RI Zip Code 02904-0000
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME INT'L Occupation PEOPLE COORDINATOR III
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **851.58**

Date of Receipt **11 / 15 / 2012**
Transaction ID : SA11AI.276703
Amount of Each Receipt this Period **44.82**

B. PHYLLIS SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 1212 Jefferson St., SE Suite 300
City Olympia State WA Zip Code 98501
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 25 / 2012**
Transaction ID : SA11AI.276994
Amount of Each Receipt this Period **10.50**

C. PHYLLIS SMITH
Full Name (Last, First, Middle Initial)
Mailing Address 1212 Jefferson St., SE Suite 300
City Olympia State WA Zip Code 98501
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **220.50**

Date of Receipt **11 / 09 / 2012**
Transaction ID : SA11AI.277285
Amount of Each Receipt this Period **10.50**

SUBTOTAL of Receipts This Page (optional)..... **65.82**
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 675 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. PHYLLIS SMITH		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277866
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="10.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="231.00"/>		

Full Name (Last, First, Middle Initial) B. CHRISTOPHER SMUDDE		Date of Receipt
Mailing Address 1821 Clearview Drive		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City Springfield	State IL	Zip Code 62704
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.279586
Name of Employer AFSCME IL CN 31		Amount of Each Receipt this Period
Occupation MIS SPECIALIST		<input type="text" value="73.34"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="733.40"/>		

Full Name (Last, First, Middle Initial) C. BESSIE SNIDER		Date of Receipt
Mailing Address 1034 N Washington Avenue		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/>
City Lansing	State MI	Zip Code 48906
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.279897
Name of Employer AFSCME MI CN 25		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="21.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="441.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="104.84"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 676 OF 846

(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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. BESSIE SNIDER			Date of Receipt M M / D D / Y Y Y Y Y 11 / 20 / 2012 Transaction ID : SA11AI.279947		
Mailing Address 1034 N Washington Avenue			Amount of Each Receipt this Period 21.00		
City Lansing	State MI	Zip Code 48906			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME MI CN 25		Occupation STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 462.00			

Full Name (Last, First, Middle Initial) B. JOYCE M. SNIDER			Date of Receipt M M / D D / Y Y Y Y Y 11 / 01 / 2012 Transaction ID : SA11AI.279474		
Mailing Address 1907 Easy Street			Amount of Each Receipt this Period 41.70		
City Urbana	State IL	Zip Code 61802			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME IL CN 31/STATE OF IL		Occupation SECRETARY IV			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 417.00			

Full Name (Last, First, Middle Initial) C. JOYCE SNYDER			Date of Receipt M M / D D / Y Y Y Y Y 10 / 24 / 2012 Transaction ID : SA11AI.280192		
Mailing Address 3145 S. 3B's & K Road			Amount of Each Receipt this Period 10.00		
City Galena	State OH	Zip Code 43021			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME OH LOC 4		Occupation FIELD SECRETARY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00			

SUBTOTAL of Receipts This Page (optional).....▶	72.70
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 677 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOYCE SNYDER
Full Name (Last, First, Middle Initial)

Mailing Address 3145 S. 3B's & K Road

City Galena	State OH	Zip Code 43021
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4	Occupation FIELD SECRETARY
-------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2012

Transaction ID : SA11AI.280247

Amount of Each Receipt this Period
10.00

B. JOHN SOKATCH
Full Name (Last, First, Middle Initial)

Mailing Address 1242 Jessie Street

City St. Paul	State MN	Zip Code 55130-3547
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/STATE OF MN	Occupation STAFF REPRESENTATIVE
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.278233

Amount of Each Receipt this Period
20.00

C. PEPITO F. SORIANO
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia	State WA	Zip Code 98501
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11AI.277288

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	40.00
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 678 OF 846
	<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	<input 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

A. PEPITO F. SORIANO
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 Jefferson St., SE
 Suite 300
 City Olympia State WA Zip Code 98501
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277869
 Amount of Each Receipt this Period 100.00

B. EDITHIA M. SPEARS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4690 Ascot Drive
 City Columbus State OH Zip Code 43229
 Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 692.49

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279841
 Amount of Each Receipt this Period 60.14

C. JAMES L. SPEARS JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 7537 Claiborne Woods Road
 City Charlotte State NC Zip Code 28216
 Name of Employer AFSCME INT'L Occupation FIELD COORDINATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 673.17

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276510
 Amount of Each Receipt this Period 34.25

SUBTOTAL of Receipts This Page (optional).....▶ 104.39
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 679 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JAMES L. SPEARS JR.
Full Name (Last, First, Middle Initial)

Mailing Address 7537 Claiborne Woods Road

City	State	Zip Code
Charlotte	NC	28216

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
AFSCME INT'L	FIELD COORDINATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **707.42**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SA11AI.276704

Amount of Each Receipt this Period

34.25

B. TAMMI SPENCE
Full Name (Last, First, Middle Initial)

Mailing Address 190 W. Ostend Street Suite 101

City	State	Zip Code
Baltimore	MD	21230

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
AFSCME MD CN 982	STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **462.88**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2012

Transaction ID : SA11AI.279998

Amount of Each Receipt this Period

42.08

C. HARRIETT SPENCER
Full Name (Last, First, Middle Initial)

Mailing Address 49 Fulliam Circle

City	State	Zip Code
Allenstown	NH	03275-0000

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
AFSCME MA CN 93	COORDINATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **443.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2012

Transaction ID : SA11AI.280020

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional).....▶	106.33
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 680 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BEVERLY J. SPETZ
Full Name (Last, First, Middle Initial)

Mailing Address 112 Elmwood Street

City Delta	State OH	Zip Code 43515
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4	Occupation ORGANIZER
-------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1268.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2012

Transaction ID : SA11AI.280193

Amount of Each Receipt this Period
58.48

B. BEVERLY J. SPETZ
Full Name (Last, First, Middle Initial)

Mailing Address 112 Elmwood Street

City Delta	State OH	Zip Code 43515
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4	Occupation ORGANIZER
-------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1326.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2012

Transaction ID : SA11AI.280248

Amount of Each Receipt this Period
58.48

C. PAUL K. SPINK
Full Name (Last, First, Middle Initial)

Mailing Address 3421 S 9th Place

City Milwaukee	State WI	Zip Code 53215
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WI CN 24/STATE OF WI	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
590.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2012

Transaction ID : SA11AI.277593

Amount of Each Receipt this Period
36.00

SUBTOTAL of Receipts This Page (optional).....▶	152.96
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 681 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LARRY SPIVACK
Full Name (Last, First, Middle Initial)

Mailing Address 733 S. Lombard Avenue

City State Zip Code
Oak Park IL 60304-1607

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME IL CN 31 COLLECTIVE BARGAINING SUPERVISOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
836.60

Date of Receipt
11 / 01 / 2012
Transaction ID : SA11AI.279587

Amount of Each Receipt this Period
83.66

B. JAMES SPRAGUE
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City State Zip Code
Olympia WA 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
10 / 25 / 2012
Transaction ID : SA11AI.276998

Amount of Each Receipt this Period
11.00

C. JAMES SPRAGUE
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City State Zip Code
Olympia WA 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277289

Amount of Each Receipt this Period
11.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.66

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 682 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JAMES SPRAGUE
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 242.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277870

Amount of Each Receipt this Period 11.00

B. JUDITH SPRAGUE
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.276999

Amount of Each Receipt this Period 10.50

C. JUDITH SPRAGUE
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.50

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277290

Amount of Each Receipt this Period 10.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 32.00

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 683 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JUDITH SPRAGUE
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277871

Amount of Each Receipt this Period
10.50

B. KAMALA B. SRIKAR
Full Name (Last, First, Middle Initial)

Mailing Address 9908 Colebrook Avenue

City Potomac State MD Zip Code 20854

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation ASSOC. DIRECTOR, CONF & TRAVEL SVCS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1101.45

Date of Receipt
10 / 31 / 2012
Transaction ID : SA11AI.276511

Amount of Each Receipt this Period
52.50

C. KAMALA B. SRIKAR
Full Name (Last, First, Middle Initial)

Mailing Address 9908 Colebrook Avenue

City Potomac State MD Zip Code 20854

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation ASSOC. DIRECTOR, CONF & TRAVEL SVCS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1153.95

Date of Receipt
11 / 15 / 2012
Transaction ID : SA11AI.276705

Amount of Each Receipt this Period
52.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.50

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 684 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. THERESA A. ST. AORO		Date of Receipt
Mailing Address 1545 Hamline Avenue N West Unit		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
St. Paul	MN	55108
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.278238
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME MN CN 5/STATE OF MN	STAFF REPRESENTATIVE	<input type="text" value="400.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="460.00"/>	

Full Name (Last, First, Middle Initial) B. ARTHUR JAMES STANLEY		Date of Receipt
Mailing Address 2939 Graham Road		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Falls Church	VA	22842
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276512
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME INT'L	EXECUTIVE OFFICE ASSISTANT	<input type="text" value="30.91"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="658.98"/>	

Full Name (Last, First, Middle Initial) C. ARTHUR JAMES STANLEY		Date of Receipt
Mailing Address 2939 Graham Road		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Falls Church	VA	22842
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276706
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME INT'L	EXECUTIVE OFFICE ASSISTANT	<input type="text" value="30.91"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="689.89"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="101.82"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 685 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BEATRICE E. STANLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 116
 City State Zip Code
 Dwight IL 60420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME IL CN 31/STATE OF IL LIBRARIAN I
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.279477
 Amount of Each Receipt this Period
 420.00

B. KATHY A. STEICHEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 830 W. 18th Street
 3rd Fl.
 City State Zip Code
 Chicago IL 60608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME IL CN 31 PROJECT STAFF ORGANIZER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 589.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.279588
 Amount of Each Receipt this Period
 60.80

C. RUTH M STEINMETZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 Tegner Court
 City State Zip Code
 Rockville MD 20850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME INT'L ASSIST. DIRECTOR, CONF. & TRVL SVCS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 825.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276513
 Amount of Each Receipt this Period
 40.07

SUBTOTAL of Receipts This Page (optional)..... ▶ 142.87
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 686 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. RUTH M STEINMETZ
Full Name (Last, First, Middle Initial)

Mailing Address 6 Tegner Court

City Rockville State MD Zip Code 20850

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation ASSIST. DIRECTOR, CONF. & TRVL SVCS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **865.67**

Date of Receipt **11 / 15 / 2012**

Transaction ID : SA11AI.276707

Amount of Each Receipt this Period **40.07**

B. MICHELE STELOVICH
Full Name (Last, First, Middle Initial)

Mailing Address 21114 77th Place West Apt. #102

City Edmonds State WA Zip Code 98026

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **391.00**

Date of Receipt **10 / 25 / 2012**

Transaction ID : SA11AI.277000

Amount of Each Receipt this Period **20.00**

C. MICHELE STELOVICH
Full Name (Last, First, Middle Initial)

Mailing Address 21114 77th Place West Apt. #102

City Edmonds State WA Zip Code 98026

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **411.00**

Date of Receipt **11 / 09 / 2012**

Transaction ID : SA11AI.277291

Amount of Each Receipt this Period **20.00**

SUBTOTAL of Receipts This Page (optional)..... **80.07**

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 687 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MICHELE STELOVICH
Full Name (Last, First, Middle Initial)

Mailing Address 21114 77th Place West
Apt. #102

City Edmonds State WA Zip Code 98026

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 431.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 26 / 2012
Transaction ID : SA11AI.277872

Amount of Each Receipt this Period
20.00

B. JUDY R STEVENS
Full Name (Last, First, Middle Initial)

Mailing Address 7240 Fairchild Drive
#201

City Alexandria State VA Zip Code 22306

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation STRATEGIC ANALYST III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 908.59

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 31 / 2012
Transaction ID : SA11AI.276514

Amount of Each Receipt this Period
46.05

C. JUDY R STEVENS
Full Name (Last, First, Middle Initial)

Mailing Address 7240 Fairchild Drive
#201

City Alexandria State VA Zip Code 22306

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation STRATEGIC ANALYST III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 954.64

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 15 / 2012
Transaction ID : SA11AI.276708

Amount of Each Receipt this Period
46.05

SUBTOTAL of Receipts This Page (optional)..... ▶ 112.10

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 688 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CANDACE R. STEWART
Full Name (Last, First, Middle Initial)
Mailing Address 280 E. 200th Street

City Euclid	State OH	Zip Code 44119
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation TRAINING OFFICER
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.278585

Amount of Each Receipt this Period
12.50

B. CANDACE R. STEWART
Full Name (Last, First, Middle Initial)
Mailing Address 280 E. 200th Street

City Euclid	State OH	Zip Code 44119
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation TRAINING OFFICER
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
237.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.278943

Amount of Each Receipt this Period
12.50

C. CANDACE R. STEWART
Full Name (Last, First, Middle Initial)
Mailing Address 280 E. 200th Street

City Euclid	State OH	Zip Code 44119
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation TRAINING OFFICER
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2012

Transaction ID : SA11AI.279301

Amount of Each Receipt this Period
12.50

SUBTOTAL of Receipts This Page (optional).....	37.50
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 689 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. IVA J. STEWART
 Full Name (Last, First, Middle Initial)
 Mailing Address 1252 Drysdale Square N.
 City Columbus State OH Zip Code 43229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation TEACHER AIDE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 287.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2012
Transaction ID : SA11AI.280279
 Amount of Each Receipt this Period
 12.50

B. IVA J. STEWART
 Full Name (Last, First, Middle Initial)
 Mailing Address 1252 Drysdale Square N.
 City Columbus State OH Zip Code 43229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation TEACHER AIDE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2012
Transaction ID : SA11AI.280309
 Amount of Each Receipt this Period
 12.50

C. IVA J. STEWART
 Full Name (Last, First, Middle Initial)
 Mailing Address 1252 Drysdale Square N.
 City Columbus State OH Zip Code 43229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation TEACHER AIDE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.280339
 Amount of Each Receipt this Period
 12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 37.50
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 690 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KATHLEEN M. STEWART
Full Name (Last, First, Middle Initial)

Mailing Address 7326 State Route 19

City Mount Gilead	State OH	Zip Code 43338
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation ACCOUNTANT/EXAMINER
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **579.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.278586

Amount of Each Receipt this Period

20.00

B. KATHLEEN M. STEWART
Full Name (Last, First, Middle Initial)

Mailing Address 7326 State Route 19

City Mount Gilead	State OH	Zip Code 43338
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation ACCOUNTANT/EXAMINER
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **599.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.278944

Amount of Each Receipt this Period

20.00

C. KATHLEEN M. STEWART
Full Name (Last, First, Middle Initial)

Mailing Address 7326 State Route 19

City Mount Gilead	State OH	Zip Code 43338
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation ACCOUNTANT/EXAMINER
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **619.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2012

Transaction ID : SA11AI.279302

Amount of Each Receipt this Period

20.00

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 691 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. NEAL STEWART
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277293

Amount of Each Receipt this Period
10.50

B. NEAL STEWART
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.50

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277874

Amount of Each Receipt this Period
10.50

C. GREGORY S. STIGER
Full Name (Last, First, Middle Initial)

Mailing Address 3320 Plank Road

City New Castle State PA Zip Code 16105

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 424.86

Date of Receipt
11 / 14 / 2012
Transaction ID : SA11AI.279695

Amount of Each Receipt this Period
41.72

SUBTOTAL of Receipts This Page (optional)..... ▶ 62.72

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 692 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. WILLIAM STOUFFER
Full Name (Last, First, Middle Initial)

Mailing Address 29B - 2nd Street

City North Irwin State PA Zip Code 15642

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **804.76**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.279696

Amount of Each Receipt this Period
73.16

B. CHUCK B. STOUT
Full Name (Last, First, Middle Initial)

Mailing Address 3073 Twin Lakes Drive

City Springfield State IL Zip Code 62707-9312

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **469.71**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.279589

Amount of Each Receipt this Period
8.40

C. ANDREA STRADER
Full Name (Last, First, Middle Initial)

Mailing Address 1234 Massachusetts Avenue NW #524

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation POLITICAL ACTION REPRESENTATIVE III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1031.60**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276515

Amount of Each Receipt this Period
48.73

SUBTOTAL of Receipts This Page (optional)..... **130.29**

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 693 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ANDREA STRADER
Full Name (Last, First, Middle Initial)

Mailing Address 1234 Massachusetts Avenue NW
#524

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation POLITICAL ACTION REPRESENTATIVE III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1080.33

Date of Receipt
11 / 15 / 2012
Transaction ID : SA11AI.276709

Amount of Each Receipt this Period
48.73

B. TRACY STRAUSSER
Full Name (Last, First, Middle Initial)

Mailing Address 217 Driftwood Drive

City Canonsburg State PA Zip Code 15317

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation FIELD ADMINISTRATIVE ASSISTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
526.62

Date of Receipt
10 / 31 / 2012
Transaction ID : SA11AI.276516

Amount of Each Receipt this Period
27.51

C. TRACY STRAUSSER
Full Name (Last, First, Middle Initial)

Mailing Address 217 Driftwood Drive

City Canonsburg State PA Zip Code 15317

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation FIELD ADMINISTRATIVE ASSISTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
554.13

Date of Receipt
11 / 15 / 2012
Transaction ID : SA11AI.276710

Amount of Each Receipt this Period
27.51

SUBTOTAL of Receipts This Page (optional)..... ▶ 103.75

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 694 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. TIMOTHY J. STRECKER			Date of Receipt
Mailing Address 70 I Street SE Apt. 1230			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City Washington	State DC	Zip Code 20003	Transaction ID : SA11AI.276517
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="55.42"/>
Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECTOR, INFORMATION SYS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1123.00"/>		

Full Name (Last, First, Middle Initial) B. TIMOTHY J. STRECKER			Date of Receipt
Mailing Address 70 I Street SE Apt. 1230			<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City Washington	State DC	Zip Code 20003	Transaction ID : SA11AI.276711
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="55.42"/>
Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECTOR, INFORMATION SYS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1178.42"/>		

Full Name (Last, First, Middle Initial) C. DEBRA STRICKLAND			Date of Receipt
Mailing Address 657 Marshall Avenue			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City St. Paul	State MN	Zip Code 55104-6645	Transaction ID : SA11AI.278244
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="18.00"/>
Name of Employer AFSCME MN CN 5/STATE OF MN	Occupation REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="207.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="128.84"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 695 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. GYNO STRONG-WOODFORD
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 48
 City Reynoldsburg State OH Zip Code 43068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation FISCAL SPECIALIST I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278588
 Amount of Each Receipt this Period
 10.00

B. GYNO STRONG-WOODFORD
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 48
 City Reynoldsburg State OH Zip Code 43068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation FISCAL SPECIALIST I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278946
 Amount of Each Receipt this Period
 10.00

C. GYNO STRONG-WOODFORD
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 48
 City Reynoldsburg State OH Zip Code 43068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation FISCAL SPECIALIST I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279304
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 696 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MARVA J. STROUD
Full Name (Last, First, Middle Initial)

Mailing Address 1055 5th Street

City Aurora State IL Zip Code 60505

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation SPECIAL THERAPY AIDE I

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.20

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279478

Amount of Each Receipt this Period 27.62

B. BARBARA STRUNGE
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 1068

City Anoka State MN Zip Code 55303

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.278246

Amount of Each Receipt this Period 24.00

C. MARY J. STUCKERT
Full Name (Last, First, Middle Initial)

Mailing Address 814 S. Spring Street

City Bucyrus State OH Zip Code 44820

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation ODJFS CUSTOMER SERVICE REP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278589

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 71.62

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 697 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MARY J. STUCKERT
Full Name (Last, First, Middle Initial)

Mailing Address 814 S. Spring Street

City	State	Zip Code
Bucyrus	OH	44820

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
AFSCME OH LOC 11/STATE OF OH	ODJFS CUSTOMER SERVICE REP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.278947

Amount of Each Receipt this Period

20.00

B. MARY J. STUCKERT
Full Name (Last, First, Middle Initial)

Mailing Address 814 S. Spring Street

City	State	Zip Code
Bucyrus	OH	44820

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
AFSCME OH LOC 11/STATE OF OH	ODJFS CUSTOMER SERVICE REP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2012

Transaction ID : SA11AI.279305

Amount of Each Receipt this Period

20.00

C. ARLENE STURDIVANT
Full Name (Last, First, Middle Initial)

Mailing Address 6113 Kolb Street

City	State	Zip Code
Fairmont Heights	MD	20743

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
AFSCME INT'L	ADMINISTRATIVE ASSISTANT I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **495.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276518

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	65.00
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 698 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. ARLENE STURDIVANT		Date of Receipt
Mailing Address 6113 Kolb Street		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.276712
Fairmont Heights	MD	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="2500"/>
Name of Employer	Occupation	
AFSCME INT'L	ADMINISTRATIVE ASSISTANT I	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="520.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. RENATA L. STURTEVANT		Date of Receipt
Mailing Address W9695 Lake Drive		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.277625
Edgerton	WI	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="2000"/>
Name of Employer	Occupation	
AFSCME WI CN 24/STATE OF WI	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="280.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. RENATA L. STURTEVANT		Date of Receipt
Mailing Address W9695 Lake Drive		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.277624
Edgerton	WI	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<input type="text" value="40.00"/>
Name of Employer	Occupation	
AFSCME WI CN 24/STATE OF WI	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="320.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="85.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 699 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. KEITH C. S. SUI		Date of Receipt
Mailing Address 888 Mililani Street Suite 601		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Zip Code
Honolulu	HI	96813-2991
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.280444
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="21.00"/>
Name of Employer	Occupation	
AFSCME HI LOC 152	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="231.00"/>	

Full Name (Last, First, Middle Initial) B. MICHAEL E. SUKAL		Date of Receipt
Mailing Address 526 Clemson Drive		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Pittsburgh	PA	15243
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.276519
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="77.81"/>
Name of Employer	Occupation	
AFSCME INT'L	DIRECTOR, ORGANIZING & FIELD SVCS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1528.30"/>	

Full Name (Last, First, Middle Initial) C. MICHAEL E. SUKAL		Date of Receipt
Mailing Address 526 Clemson Drive		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Pittsburgh	PA	15243
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.276713
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="77.81"/>
Name of Employer	Occupation	
AFSCME INT'L	DIRECTOR, ORGANIZING & FIELD SVCS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1606.11"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="176.62"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 700 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MARY E. SULLIVAN
Full Name (Last, First, Middle Initial)

Mailing Address 1880 9th Avenue

City Watervliet	State NY	Zip Code 12189
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME NY LOC 1000	Occupation EXECUTIVE VICE PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1550.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		31		2012

Transaction ID : SA11AI.276338

Amount of Each Receipt this Period
100.00

B. SARA SUMMERS
Full Name (Last, First, Middle Initial)

Mailing Address 3418 Weyburn Court

City Columbus	State OH	Zip Code 43232
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation NETWORK SERVICES TECHNICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
274.26

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		19		2012

Transaction ID : SA11AI.278590

Amount of Each Receipt this Period
13.06

C. SARA SUMMERS
Full Name (Last, First, Middle Initial)

Mailing Address 3418 Weyburn Court

City Columbus	State OH	Zip Code 43232
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation NETWORK SERVICES TECHNICIAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
287.32

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2012

Transaction ID : SA11AI.278948

Amount of Each Receipt this Period
13.06

SUBTOTAL of Receipts This Page (optional).....▶	126.12
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 701 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. SARA SUMMERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3418 Weyburn Court
 City Columbus State OH Zip Code 43232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation NETWORK SERVICES TECHNICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.38

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279306
 Amount of Each Receipt this Period 13.06

B. SHIRLEY SUNDY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4031 Executive Park Drive
 City Harrisburg State PA Zip Code 17111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.50

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.279697
 Amount of Each Receipt this Period 38.52

C. RICHARD J. SURBER
 Full Name (Last, First, Middle Initial)
 Mailing Address 6449 N Seeley Avenue Unit B1
 City Chicago State IL Zip Code 60645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 601.35

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279590
 Amount of Each Receipt this Period 67.65

SUBTOTAL of Receipts This Page (optional).....▶ 119.23
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 702 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LORI A. SVEDA
 Full Name (Last, First, Middle Initial)
 Mailing Address 439-D Willow Circle
 City Allentown State PA Zip Code 18102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 31 / 2012**
Transaction ID : SA11AI.279770
 Amount of Each Receipt this Period **12.00**

B. MICHAEL SVEDA
 Full Name (Last, First, Middle Initial)
 Mailing Address 439 Willow Circle
 City Allentown State PA Zip Code 18102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **595.13**

Date of Receipt **11 / 14 / 2012**
Transaction ID : SA11AI.279698
 Amount of Each Receipt this Period **58.18**

C. STEPHANIE SWAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 11850 S.E. Broyles Court
 City Clackamas State OR Zip Code 97015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OR CN 75 Occupation EXECUTIVE ASSISTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **306.00**

Date of Receipt **10 / 31 / 2012**
Transaction ID : SA11AI.279370
 Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional).....	95.18
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 703 OF 846
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input 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

Full Name (Last, First, Middle Initial) A. RITA SWANSON		Date of Receipt
Mailing Address 1212 Jefferson Street SE		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City Olympia State WA Zip Code 98501		Transaction ID : SA11AI.277297
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	

Full Name (Last, First, Middle Initial) B. RITA SWANSON		Date of Receipt
Mailing Address 1212 Jefferson Street SE		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Olympia State WA Zip Code 98501		Transaction ID : SA11AI.277878
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) C. JOHN F. SWEERS JR.		Date of Receipt
Mailing Address 410 W Dean Avenue		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2012"/>
City Monona State WI Zip Code 53716		Transaction ID : SA11AI.277594
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="18.00"/>
Name of Employer AFSCME WI CN 24/STATE OF WI	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="342.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="38.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 704 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOHN F. SWEERS JR.
Full Name (Last, First, Middle Initial)

Mailing Address 410 W Dean Avenue

City Monona State WI Zip Code 53716

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt **11 / 05 / 2012**

Transaction ID : SA11AI.277595

Amount of Each Receipt this Period **18.00**

B. JOHN F. SWEERS JR.
Full Name (Last, First, Middle Initial)

Mailing Address 410 W Dean Avenue

City Monona State WI Zip Code 53716

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **378.00**

Date of Receipt **11 / 19 / 2012**

Transaction ID : SA11AI.277596

Amount of Each Receipt this Period **18.00**

C. ADAM SWIHART
Full Name (Last, First, Middle Initial)

Mailing Address 4320 NW Second Avenue

City Des Moines State IA Zip Code 50313

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IA CN 61 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **491.02**

Date of Receipt **11 / 07 / 2012**

Transaction ID : SA11AI.280087

Amount of Each Receipt this Period **30.82**

SUBTOTAL of Receipts This Page (optional)..... **66.82**

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 705 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JAMES R. TACKETT		Date of Receipt
Mailing Address 517 S. High Street		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City Yellow Springs	State OH	Zip Code 45387
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.280194
Name of Employer AFSCME OH LOC 4		Amount of Each Receipt this Period
Occupation FIELD REPRESENTATIVE		<input type="text" value="28.85"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="605.85"/>		

Full Name (Last, First, Middle Initial) B. JAMES R. TACKETT		Date of Receipt
Mailing Address 517 S. High Street		<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City Yellow Springs	State OH	Zip Code 45387
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.280249
Name of Employer AFSCME OH LOC 4		Amount of Each Receipt this Period
Occupation FIELD REPRESENTATIVE		<input type="text" value="28.85"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="634.70"/>		

Full Name (Last, First, Middle Initial) C. JEFFREY M. TAGGART		Date of Receipt
Mailing Address 12001 Market Street Unit 450		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City Reston	State VA	Zip Code 20190
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.276520
Name of Employer AFSCME INT'L		Amount of Each Receipt this Period
Occupation ASSOCIATE DIRECTOR, ACCOUNTING		<input type="text" value="121.85"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="2428.37"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="179.55"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 706 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JEFFREY M. TAGGART
 Full Name (Last, First, Middle Initial)
 Mailing Address 12001 Market Street
 Unit 450
 City Reston State VA Zip Code 20190
 Name of Employer AFSCME INT'L Occupation ASSOCIATE DIRECTOR, ACCOUNTING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2550.22

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276714
 Amount of Each Receipt this Period 121.85

B. IAN K. TAKASHIBA
 Full Name (Last, First, Middle Initial)
 Mailing Address 4891 Nunu Road
 City Kappa State HI Zip Code 96746
 Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.280445
 Amount of Each Receipt this Period 25.00

C. JEREMIAH TALLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 6805 Oak Creek Drive
 City Columbus State OH Zip Code 43229
 Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 24 / 2012
Transaction ID : SA11AI.280195
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional).....▶ 156.85
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 707 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JEREMIAH TALLEY
Full Name (Last, First, Middle Initial)

Mailing Address 6805 Oak Creek Drive

City Columbus	State OH	Zip Code 43229
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4	Occupation FIELD REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2012

Transaction ID : SA11AI.280250

Amount of Each Receipt this Period
10.00

B. MOLLY M. TALLEY
Full Name (Last, First, Middle Initial)

Mailing Address 4084 Leap Road

City Hilliard	State OH	Zip Code 43026
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4	Occupation ACCOUNT CLERK
-------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2012

Transaction ID : SA11AI.280196

Amount of Each Receipt this Period
10.00

C. MOLLY M. TALLEY
Full Name (Last, First, Middle Initial)

Mailing Address 4084 Leap Road

City Hilliard	State OH	Zip Code 43026
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4	Occupation ACCOUNT CLERK
-------------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2012

Transaction ID : SA11AI.280251

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 708 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ANN M. TANNER
Full Name (Last, First, Middle Initial)

Mailing Address 816 Wilder Avenue

City Elyria State OH Zip Code 44035

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **640.87**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.279842

Amount of Each Receipt this Period **64.18**

B. ANNETTE C. TASHIRO
Full Name (Last, First, Middle Initial)

Mailing Address 45-455 Nukoli Place

City Kaneohe State HI Zip Code 96744

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 02 / 2012**

Transaction ID : SA11AI.280446

Amount of Each Receipt this Period **20.00**

C. JANEEN D. TAYLOR
Full Name (Last, First, Middle Initial)

Mailing Address 1428 Hartford Avenue

City Akron State OH Zip Code 44320

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **327.75**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.279843

Amount of Each Receipt this Period **34.44**

SUBTOTAL of Receipts This Page (optional)..... **118.62**

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 709 OF 846
	<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	<input 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

A. TODD TAYLOR
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 9457

City Cedar Rapids State IA Zip Code 52409-9457

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IA CN 61 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt **11 / 07 / 2012**

Transaction ID : SA11AI.280088

Amount of Each Receipt this Period **35.00**

B. TORIANO TAYLOR
Full Name (Last, First, Middle Initial)

Mailing Address 650 Cherry Street

City Marion State OH Zip Code 43302

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION SERGEANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 19 / 2012**

Transaction ID : SA11AI.278594

Amount of Each Receipt this Period **10.00**

C. TORIANO TAYLOR
Full Name (Last, First, Middle Initial)

Mailing Address 650 Cherry Street

City Marion State OH Zip Code 43302

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION SERGEANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 02 / 2012**

Transaction ID : SA11AI.278952

Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional)..... **55.00**

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 710 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. TORIANO TAYLOR
 Full Name (Last, First, Middle Initial)
 Mailing Address 650 Cherry Street
 City Marion State OH Zip Code 43302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION SERGEANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279310
 Amount of Each Receipt this Period 10.00

B. JEREMY TAYLOR-SPARKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 7555 14th Avenue NE
 City Olympia State WA Zip Code 98516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277299
 Amount of Each Receipt this Period 10.00

C. JEREMY TAYLOR-SPARKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 7555 14th Avenue NE
 City Olympia State WA Zip Code 98516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277880
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
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 711 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. TRINA M. TAYLOR-SPARKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 7555 14th Avenue NE
 City Olympia State WA Zip Code 98516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277300
 Amount of Each Receipt this Period
 10.00

B. TRINA M. TAYLOR-SPARKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 7555 14th Avenue NE
 City Olympia State WA Zip Code 98516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277881
 Amount of Each Receipt this Period
 10.00

C. MOHAMMED TEHRANI
 Full Name (Last, First, Middle Initial)
 Mailing Address 22110 Castleton Court
 City Boyds State MD Zip Code 20841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 964.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276521
 Amount of Each Receipt this Period
 48.41

SUBTOTAL of Receipts This Page (optional)..... ▶ 68.41
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 712 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. MOHAMMED TEHRANI		Date of Receipt
Mailing Address 22110 Castleton Court		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City State Zip Code Boys MD 20841		Transaction ID : SA11AI.276715
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="48.41"/>
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, OPERATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1012.74"/>	

Full Name (Last, First, Middle Initial) B. ANDREA K. TESCHLER		Date of Receipt
Mailing Address 136 Brookside Drive		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City State Zip Code Ashland OH 44805		Transaction ID : SA11AI.278595
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="15.00"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="306.00"/>	

Full Name (Last, First, Middle Initial) C. ANDREA K. TESCHLER		Date of Receipt
Mailing Address 136 Brookside Drive		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City State Zip Code Ashland OH 44805		Transaction ID : SA11AI.278953
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="15.00"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="321.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="78.41"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 713 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ANDREA K. TESCHLER
Full Name (Last, First, Middle Initial)

Mailing Address 136 Brookside Drive

City Ashland State OH Zip Code 44805

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt **11 / 16 / 2012**

Transaction ID : SA11AI.279311

Amount of Each Receipt this Period **15.00**

B. DAVID TESTER
Full Name (Last, First, Middle Initial)

Mailing Address 6955 H New Oxford Road

City Harrisburg State PA Zip Code 17112

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13 Occupation TRANSPORTATION TECHNICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **734.59**

Date of Receipt **11 / 14 / 2012**

Transaction ID : SA11AI.279699

Amount of Each Receipt this Period **67.70**

C. COLIN M. THEIS
Full Name (Last, First, Middle Initial)

Mailing Address 2406 W Farragut Avenue #3B

City Chicago State IL Zip Code 60625

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **524.60**

Date of Receipt **11 / 01 / 2012**

Transaction ID : SA11AI.279591

Amount of Each Receipt this Period **52.46**

SUBTOTAL of Receipts This Page (optional).....▶	135.16
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 714 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BARBARA A. Thomas
 Full Name (Last, First, Middle Initial)
 Mailing Address 3185 Elmreeb Drive
 City Columbus State OH Zip Code 43219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation COMPUTER OPERATOR III
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **207.00**

Date of Receipt **10 / 19 / 2012**
Transaction ID : SA11AI.278596
 Amount of Each Receipt this Period **15.00**

B. BARBARA A. Thomas
 Full Name (Last, First, Middle Initial)
 Mailing Address 3185 Elmreeb Drive
 City Columbus State OH Zip Code 43219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation COMPUTER OPERATOR III
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **222.00**

Date of Receipt **11 / 02 / 2012**
Transaction ID : SA11AI.278954
 Amount of Each Receipt this Period **15.00**

C. BARBARA A. Thomas
 Full Name (Last, First, Middle Initial)
 Mailing Address 3185 Elmreeb Drive
 City Columbus State OH Zip Code 43219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation COMPUTER OPERATOR III
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **237.00**

Date of Receipt **11 / 16 / 2012**
Transaction ID : SA11AI.279312
 Amount of Each Receipt this Period **15.00**

SUBTOTAL of Receipts This Page (optional).....	45.00
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 715 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BETTY A. THOMAS
Full Name (Last, First, Middle Initial)

Mailing Address 2006 Faycrest Drive

City Cincinnati State OH Zip Code 45238

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **453.75**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.279845

Amount of Each Receipt this Period **45.46**

B. DURWOOD L. THOMAS II
Full Name (Last, First, Middle Initial)

Mailing Address 3469 Woodlawn Avenue

City Grove City State OH Zip Code 43123

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation BUS DRIVER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **287.50**

Date of Receipt **10 / 29 / 2012**

Transaction ID : SA11AI.280280

Amount of Each Receipt this Period **12.50**

C. DURWOOD L. THOMAS II
Full Name (Last, First, Middle Initial)

Mailing Address 3469 Woodlawn Avenue

City Grove City State OH Zip Code 43123

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation BUS DRIVER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **11 / 13 / 2012**

Transaction ID : SA11AI.280310

Amount of Each Receipt this Period **12.50**

SUBTOTAL of Receipts This Page (optional)..... **70.46**

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 716 OF 846
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input 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

A. DURWOOD L. THOMAS II
Full Name (Last, First, Middle Initial)

Mailing Address 3469 Woodlawn Avenue

City State Zip Code
Grove City OH 43123

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME OH LOC 4/COLUMBUS CITY BUS DRIVER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
312.50

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 26 / 2012
Transaction ID : SA11AI.280340

Amount of Each Receipt this Period
12.50

B. JOHN THOMAS
Full Name (Last, First, Middle Initial)

Mailing Address 1034 N Washington Avenue

City State Zip Code
Lansing MI 48906

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME MI CN 25 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
611.52

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2012
Transaction ID : SA11AI.279898

Amount of Each Receipt this Period
29.12

C. JOHN THOMAS
Full Name (Last, First, Middle Initial)

Mailing Address 1034 N Washington Avenue

City State Zip Code
Lansing MI 48906

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME MI CN 25 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
640.64

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2012
Transaction ID : SA11AI.279948

Amount of Each Receipt this Period
29.12

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.74

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 717 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. PATRICK S. THOMASSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1347 Marot Drive
 City Trotwood State OH Zip Code 45427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH CN 8 Occupation LEAD STAFF ORGANIZER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 640.87

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279846
 Amount of Each Receipt this Period 64.18

B. BRUCE E. THOMPSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 531 Tanya Avenue NW
 City Massillon State OH Zip Code 44646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278598
 Amount of Each Receipt this Period 10.00

C. BRUCE E. THOMPSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 531 Tanya Avenue NW
 City Massillon State OH Zip Code 44646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278956
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 84.18
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 718 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BRUCE E. THOMPSON
Full Name (Last, First, Middle Initial)

Mailing Address 531 Tanya Avenue NW

City Massillon	State OH	Zip Code 44646
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation JUVENILE CORRECTION OFFICER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2012

Transaction ID : SA11AI.279314

Amount of Each Receipt this Period

10.00

B. EUNICE C. THOMPSON
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 267

City Malvern	State OH	Zip Code 44644
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation ACCOUNT CLERK II
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2012

Transaction ID : SA11AI.278599

Amount of Each Receipt this Period

10.00

C. EUNICE C. THOMPSON
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 267

City Malvern	State OH	Zip Code 44644
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation ACCOUNT CLERK II
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.278957

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 719 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. EUNICE C. THOMPSON
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 267

City Malvern State OH Zip Code 44644

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation ACCOUNT CLERK II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **11 / 16 / 2012**

Transaction ID : SA11AI.279315

Amount of Each Receipt this Period **100.00**

B. LAWRENCE W. THOMPSON
Full Name (Last, First, Middle Initial)

Mailing Address 3662 Bridgeport Way W. Apt. D1

City University Place State WA Zip Code 98466

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **10 / 25 / 2012**

Transaction ID : SA11AI.277010

Amount of Each Receipt this Period **15.00**

C. LAWRENCE W. THOMPSON
Full Name (Last, First, Middle Initial)

Mailing Address 3662 Bridgeport Way W. Apt. D1

City University Place State WA Zip Code 98466

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt **11 / 09 / 2012**

Transaction ID : SA11AI.277301

Amount of Each Receipt this Period **15.00**

SUBTOTAL of Receipts This Page (optional)..... **40.00**

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 720 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LAWRENCE W. THOMPSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3662 Bridgeport Way W.
 Apt. D1
 City State Zip Code
 University Place WA 98466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 330.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277882
 Amount of Each Receipt this Period
 15.00

B. PAULETTE E. THOMPSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3902 154th Street E.
 City State Zip Code
 Tacoma WA 98446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 460.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2012
Transaction ID : SA11AI.277011
 Amount of Each Receipt this Period
 23.00

C. PAULETTE E. THOMPSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3902 154th Street E.
 City State Zip Code
 Tacoma WA 98446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 483.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277302
 Amount of Each Receipt this Period
 23.00

SUBTOTAL of Receipts This Page (optional).....▶	61.00
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 721 OF 846
	<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	<input 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

A. PAULETTE E. THOMPSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 3902 154th Street E.
 City Tacoma State WA Zip Code 98446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 506.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277883
 Amount of Each Receipt this Period 23.00

B. RENO THOMPSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1034 N. Washington Avenue
 City Lansing State MI Zip Code 48906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 07 / 2012
Transaction ID : SA11AI.279899
 Amount of Each Receipt this Period 10.00

C. RENO THOMPSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1034 N. Washington Avenue
 City Lansing State MI Zip Code 48906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 20 / 2012
Transaction ID : SA11AI.279949
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional).....▶ 43.00
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 722 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. ROBERT L. THOMPSON		Date of Receipt
Mailing Address 927 Gibbs Avenue, NE		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City State Zip Code Canton OH 44705-1074		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.279847
Name of Employer Occupation AFSCME OH CN 8 REGIONAL DIRECTOR		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="87.32"/>
Aggregate Year-to-Date ▼		<input type="text" value="871.89"/>

Full Name (Last, First, Middle Initial) B. FRANK THORNTON JR.		Date of Receipt
Mailing Address 190 W. Ostend Street Suite 101		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City State Zip Code Baltimore MD 21230		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.279999
Name of Employer Occupation AFSCME MD CN 982 STAFF REPRESENTATIVE		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="50.84"/>
Aggregate Year-to-Date ▼		<input type="text" value="559.24"/>

Full Name (Last, First, Middle Initial) C. HELEN THORNTON		Date of Receipt
Mailing Address 500 N. Elmwood		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City State Zip Code Oak Park IL 60302		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.279592
Name of Employer Occupation AFSCME IL CN 31 STAFF REPRESENTATIVE		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="40.00"/>
Aggregate Year-to-Date ▼		<input type="text" value="541.44"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="178.16"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 723 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JAMES A. THORNTON SR.
Full Name (Last, First, Middle Initial)

Mailing Address 231 Allison Road

City Dixonville	State PA	Zip Code 15734
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13/STATE OF PA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.279773

Amount of Each Receipt this Period
20.00

B. JOHN THORSON
Full Name (Last, First, Middle Initial)

Mailing Address 555 Selby Avenue

City Saint Paul	State MN	Zip Code 55102
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/CN14	Occupation POLITICAL ACTION REPRESENTATIVE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
779.27

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2012

Transaction ID : SA11AI.280060

Amount of Each Receipt this Period
71.14

C. GINGER THRASHER
Full Name (Last, First, Middle Initial)

Mailing Address 13807 Oink Joint Road

City Wadena	State MN	Zip Code 56482
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 65	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2012

Transaction ID : SA11AI.280388

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional).....▶	121.14
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 724 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. PAUL TIDMARSH
Full Name (Last, First, Middle Initial)

Mailing Address 1676 Larpenteur Avenue E.

City State Zip Code
St. Paul MN 55109-4608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME MN CN 5/STATE OF MN STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012
Transaction ID : SA11AI.278254

Amount of Each Receipt this Period
20.00

B. MATTHEW K. TINAY
Full Name (Last, First, Middle Initial)

Mailing Address 1544 Kewalo Street
Unit 203

City State Zip Code
Honolulu HI 96822-4248

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME HI LOC 152 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
294.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 02 / 2012
Transaction ID : SA11AI.280447

Amount of Each Receipt this Period
42.00

C. TAMARA L. TOCHER
Full Name (Last, First, Middle Initial)

Mailing Address 321 SE 19th Street

City State Zip Code
Olympia WA 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME INT'L AREA FIELD SERVICES DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1443.60

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012
Transaction ID : SA11AI.276522

Amount of Each Receipt this Period
70.68

SUBTOTAL of Receipts This Page (optional).....▶	132.68
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 725 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. TAMARA L. TOCHER
Full Name (Last, First, Middle Initial)

Mailing Address 321 SE 19th Street

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1514.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2012
Transaction ID : SA11AI.276716

Amount of Each Receipt this Period
 70.68

B. DAPHNE M. TODD
Full Name (Last, First, Middle Initial)

Mailing Address 6716 North Court

City Columbus State OH Zip Code 43229

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation PUBLICATION SPECIALIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278601

Amount of Each Receipt this Period
 10.00

C. DAPHNE M. TODD
Full Name (Last, First, Middle Initial)

Mailing Address 6716 North Court

City Columbus State OH Zip Code 43229

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation PUBLICATION SPECIALIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278959

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	90.68
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 726 OF 846
	<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	<input 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

Full Name (Last, First, Middle Initial) A. DAPHNE M. TODD			Date of Receipt		
Mailing Address 6716 North Court			M M M / D D D / Y Y Y Y Y Y 11 / 16 / 2012		
City Columbus State OH Zip Code 43229			Transaction ID : SA11AI.279317		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 10.00		
Name of Employer AFSCME OH LOC 11/STATE OF OH		Occupation PUBLICATION SPECIALIST			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00			

Full Name (Last, First, Middle Initial) B. LEIGH TOMLINSON			Date of Receipt		
Mailing Address 930 Stag Thicket Lane			M M M / D D D / Y Y Y Y Y Y 11 / 07 / 2012		
City Mason State MI Zip Code 48854-1400			Transaction ID : SA11AI.279900		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 38.26		
Name of Employer AFSCME MI CN 25		Occupation ACCTG. /HUMAN RESOURCE DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 803.46			

Full Name (Last, First, Middle Initial) C. LEIGH TOMLINSON			Date of Receipt		
Mailing Address 930 Stag Thicket Lane			M M M / D D D / Y Y Y Y Y Y 11 / 20 / 2012		
City Mason State MI Zip Code 48854-1400			Transaction ID : SA11AI.279950		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 38.26		
Name of Employer AFSCME MI CN 25		Occupation ACCTG. /HUMAN RESOURCE DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 841.72			

SUBTOTAL of Receipts This Page (optional).....▶	86.52
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 727 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. TOM TOSTI		Date of Receipt
Mailing Address 327 Lincoln Avenue		<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
City	State	Zip Code
Bristol	PA	19007
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.279700
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="115.68"/>
Name of Employer	Occupation	
AFSCME PA CN 13	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1314.50"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. ALEXANDRA TOWNSEND		Date of Receipt
Mailing Address 3412 Knipp Drive Suite 102		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City	State	Zip Code
Jefferson City	MO	65109
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.280355
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="18.75"/>
Name of Employer	Occupation	
AFSCME MO CN 72	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="331.43"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. ALEXANDRA TOWNSEND		Date of Receipt
Mailing Address 3412 Knipp Drive Suite 102		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2012"/>
City	State	Zip Code
Jefferson City	MO	65109
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.280363
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="18.75"/>
Name of Employer	Occupation	
AFSCME MO CN 72	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.18"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="153.18"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 728 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. ALEXANDRA TOWNSEND		Date of Receipt
Mailing Address 3412 Knipp Drive Suite 102		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Jefferson City	State MO	Zip Code 65109
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.280371
Name of Employer AFSCME MO CN 72	Occupation STAFF REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="18.75"/>
	<input type="text" value="368.93"/>	

Full Name (Last, First, Middle Initial) B. DOROTHY TOWNSEND		Date of Receipt
Mailing Address 2418 Central Avenue		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City Indianapolis	State IN	Zip Code 46205
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276523
Name of Employer AFSCME INT'L	Occupation REGIONAL DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="65.48"/>
	<input type="text" value="1294.65"/>	

Full Name (Last, First, Middle Initial) C. DOROTHY TOWNSEND		Date of Receipt
Mailing Address 2418 Central Avenue		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City Indianapolis	State IN	Zip Code 46205
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276717
Name of Employer AFSCME INT'L	Occupation REGIONAL DIRECTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="65.48"/>
	<input type="text" value="1360.13"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="149.71"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 729 OF 846
	<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	<input 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

A. DAVID K. TRASK Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2271 Aulii Street
 City Honolulu State HI Zip Code 96817-1530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.280448
 Amount of Each Receipt this Period 200.00

B. ROYCE TREADAWAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 38 Shipway
 City Baltimore State MD Zip Code 21222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 545.00

Date of Receipt 11 / 05 / 2012
Transaction ID : SA11AI.280000
 Amount of Each Receipt this Period 45.00

C. VON TREAS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4031 Executive Park Drive
 City Harrisburg State PA Zip Code 17111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 762.43

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.279701
 Amount of Each Receipt this Period 58.48

SUBTOTAL of Receipts This Page (optional).....▶ 123.48
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 730 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. SOLVEIG TRIPP		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277307
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="210.00"/>	

Full Name (Last, First, Middle Initial) B. SOLVEIG TRIPP		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277888
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) C. LISA TROVALLI		Date of Receipt
Mailing Address 4031 Executive Park Drive		<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
City Harrisburg	State PA	Zip Code 17111
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.279702
Name of Employer AFSCME PA CN 13		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="68.26"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="746.10"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="88.26"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 731 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. HARVEY E. TRUITT			Date of Receipt
Mailing Address 1180 Sportsman Road			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279774
Penn Run	PA	15765	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="24.00"/>
Name of Employer	Occupation		<input type="text" value="204.00"/>
AFSCME PA CN 13/STATE OF PA	STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		

Full Name (Last, First, Middle Initial) B. LANI E. TSUNEISHI			Date of Receipt
Mailing Address 6847 Niumalu Loop			<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.280450
Honolulu	HI	96825	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		<input type="text" value="220.00"/>
AFSCME HI LOC 152	STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		

Full Name (Last, First, Middle Initial) C. GARY D. TUCKER			Date of Receipt
Mailing Address 647 State Highway 267			<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279479
Murrayville	IL	62668	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="31.26"/>
Name of Employer	Occupation		<input type="text" value="218.82"/>
AFSCME IL CN 31/STATE OF IL	PUBLIC SERVICE ADMIN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.26"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 732 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. GEORGE R. TUCKER
Full Name (Last, First, Middle Initial)

Mailing Address 13925 Sylvania Avenue

City State Zip Code
Berkey OH 43504

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME OH CN 8 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
828.88

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012
Transaction ID : SA11AI.279848

Amount of Each Receipt this Period
87.32

B. JAYMA L. TUCKER
Full Name (Last, First, Middle Initial)

Mailing Address 647 State Highway 267

City State Zip Code
Murrayville IL 62668

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME IL CN 31/STATE OF IL PUBLIC SERVICE ADMIN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
218.82

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2012
Transaction ID : SA11AI.279480

Amount of Each Receipt this Period
31.26

C. YULANDA TUCKER
Full Name (Last, First, Middle Initial)

Mailing Address 1217 Dalton Road

City State Zip Code
Parkville MD 21234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME MD CN 67 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.19

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2012
Transaction ID : SA11AI.279969

Amount of Each Receipt this Period
22.02

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.60

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 733 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DELBERTA J. TURNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4433 Crumley Road SW
 City Lancaster State OH Zip Code 43130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation COOK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 287.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2012
Transaction ID : SA11AI.280281
 Amount of Each Receipt this Period
 12.50

B. DELBERTA J. TURNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4433 Crumley Road SW
 City Lancaster State OH Zip Code 43130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation COOK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2012
Transaction ID : SA11AI.280311
 Amount of Each Receipt this Period
 12.50

C. DELBERTA J. TURNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4433 Crumley Road SW
 City Lancaster State OH Zip Code 43130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation COOK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.280341
 Amount of Each Receipt this Period
 12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 37.50
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 734 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MICHELLE N. TURNER
Full Name (Last, First, Middle Initial)

Mailing Address 8707 Township Road 34

City Galion	State OH	Zip Code 44833
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2012

Transaction ID : SA11AI.278603

Amount of Each Receipt this Period

11.00

B. MICHELLE N. TURNER
Full Name (Last, First, Middle Initial)

Mailing Address 8707 Township Road 34

City Galion	State OH	Zip Code 44833
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
242.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2012

Transaction ID : SA11AI.278961

Amount of Each Receipt this Period

11.00

C. MICHELLE N. TURNER
Full Name (Last, First, Middle Initial)

Mailing Address 8707 Township Road 34

City Galion	State OH	Zip Code 44833
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
253.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2012

Transaction ID : SA11AI.279319

Amount of Each Receipt this Period

11.00

SUBTOTAL of Receipts This Page (optional).....▶	33.00
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 735 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. THOMAS TVEIT
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson Street SE

City Olympia	State WA	Zip Code 98501
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11AI.277309

Amount of Each Receipt this Period

8	7	6	5	4	3	2	1	0	.	0	0
											10.00

B. THOMAS TVEIT
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson Street SE

City Olympia	State WA	Zip Code 98501
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.277890

Amount of Each Receipt this Period

8	7	6	5	4	3	2	1	0	.	0	0
											10.00

C. JOHN TWIFORD
Full Name (Last, First, Middle Initial)

Mailing Address 4031 Executive Park Drive

City Harrisburg	State PA	Zip Code 17111
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **726.21**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	14	/	2012

Transaction ID : SA11AI.279703

Amount of Each Receipt this Period

8	7	6	5	4	3	2	1	0	.	5	6
											62.56

SUBTOTAL of Receipts This Page (optional).....▶	82.56
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 736 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JAMES ULLMER Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 6911 58th Avenue N.
 City State Zip Code
 Crystal MN 55428-3411
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME MN CN 5/STATE OF MN STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.278257
 Amount of Each Receipt this Period
 20.00

B. TROY A. ULREY
 Full Name (Last, First, Middle Initial)
 Mailing Address 308 N. Division
 City State Zip Code
 Oblong IL 62449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME IL CN 31/STATE OF IL CORRECTIONAL OFFICER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 294.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.279481
 Amount of Each Receipt this Period
 29.40

C. JOSE URIBE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1707 Lindig Street
 Apt. 7
 City State Zip Code
 St. Paul MN 55113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME INT'L ORGANIZER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 323.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276524
 Amount of Each Receipt this Period
 20.12

SUBTOTAL of Receipts This Page (optional)..... ▶ 69.52
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 737 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JOSE URIBE		Date of Receipt
Mailing Address 1707 Lindig Street Apt. 7		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.276718
St. Paul	MN	Amount of Each Receipt this Period
Zip Code		<input type="text" value="18.92"/>
55113		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
AFSCME INT'L	ORGANIZER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="342.12"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. BARBARA S. UWEKOOLANI		Date of Receipt
Mailing Address 888 Mililani Street Suite 601		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.280451
Honolulu	HI	Amount of Each Receipt this Period
Zip Code		<input type="text" value="20.00"/>
96813-2991		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
AFSCME HI LOC 152	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. KRISelda VALDERRAMA-LOBO		Date of Receipt
Mailing Address 9303 Shady Tree Court		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.276525
Fort Washington	MD	Amount of Each Receipt this Period
Zip Code		<input type="text" value="32.53"/>
20744		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
AFSCME INT'L	STRATEGIC COMMUNICATIONS SPECIALIS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="477.77"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="71.45"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 738 OF 846
	<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	<input 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

Full Name (Last, First, Middle Initial) A. KRISelda VALDERRAMA-LOBO		Date of Receipt
Mailing Address 9303 Shady Tree Court		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.276719
Fort Washington	MD	Amount of Each Receipt this Period
Zip Code		<input type="text" value="32.53"/>
20744		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
AFSCME INT'L	STRATEGIC COMMUNICATIONS SPECIALIS	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="510.30"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. KAREN VALENTINE		Date of Receipt
Mailing Address 702 Ponderosa Road		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.280147
Magnolia	DE	Amount of Each Receipt this Period
Zip Code		<input type="text" value="65.34"/>
19962		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
AFSCME DE CN 81	STAFF REPRESENTATIVE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="721.85"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. ROBERT M. VALENTINE		Date of Receipt
Mailing Address 1226 W Main Street		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City	State	Transaction ID : SA11AI.278605
Ashland	OH	Amount of Each Receipt this Period
Zip Code		<input type="text" value="11.00"/>
44805		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
AFSCME OH LOC 11/STATE OF OH	BRIDGE SPECIALIST II	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="231.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="108.87"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 739 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. ROBERT M. VALENTINE		Date of Receipt
Mailing Address 1226 W Main Street		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City Ashland State OH Zip Code 44805		Transaction ID : SA11AI.278963
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="11.00"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation BRIDGE SPECIALIST II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="242.00"/>	

Full Name (Last, First, Middle Initial) B. ROBERT M. VALENTINE		Date of Receipt
Mailing Address 1226 W Main Street		<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City Ashland State OH Zip Code 44805		Transaction ID : SA11AI.279321
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="11.00"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation BRIDGE SPECIALIST II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="253.00"/>	

Full Name (Last, First, Middle Initial) C. OSVALDO VALENZUELA		Date of Receipt
Mailing Address 6962 N. Hamilton Avenue #E		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City Chicago State IL Zip Code 60645		Transaction ID : SA11AI.279593
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="67.74"/>
Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="677.40"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="89.74"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 740 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DONALD L. VAUGHAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7614 187th Avenue SW
 City Rochester State WA Zip Code 98579
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28 Occupation WORKERS COMPENSATION TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2012
Transaction ID : SA11AI.277019
 Amount of Each Receipt this Period
 20.00

B. DONALD L. VAUGHAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7614 187th Avenue SW
 City Rochester State WA Zip Code 98579
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28 Occupation WORKERS COMPENSATION TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277310
 Amount of Each Receipt this Period
 20.00

C. DONALD L. VAUGHAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7614 187th Avenue SW
 City Rochester State WA Zip Code 98579
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28 Occupation WORKERS COMPENSATION TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277891
 Amount of Each Receipt this Period
 20.00

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 741 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. STEPHEN T. VELDHEER
 Full Name (Last, First, Middle Initial)
 Mailing Address 21733 Homer Street
 City Dearborn State MI Zip Code 48124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ORGANIZING COORDINATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 619.98

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276526
 Amount of Each Receipt this Period 31.58

B. STEPHEN T. VELDHEER
 Full Name (Last, First, Middle Initial)
 Mailing Address 21733 Homer Street
 City Dearborn State MI Zip Code 48124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ORGANIZING COORDINATOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 651.56

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276720
 Amount of Each Receipt this Period 31.58

C. ALDO E. VENNETTILLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 1087 Country Coach Drive
 City Henderson State NV Zip Code 89002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1850.68

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276527
 Amount of Each Receipt this Period 90.06

SUBTOTAL of Receipts This Page (optional).....▶ 153.22
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 742 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. ALDO E. VENNETTILLI		Date of Receipt
Mailing Address 1087 Country Coach Drive		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code
Henderson	NV	89002
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.276721
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME INT'L	AREA FIELD SERVICES DIRECTOR	<input type="text" value="90.06"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1940.74"/>	

Full Name (Last, First, Middle Initial) B. ANTHONY VERNELL		Date of Receipt
Mailing Address 14 Meadow Lane		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City	State	Zip Code
Athens	OH	45701
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.280197
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME OH LOC 4	REGIONAL DIRECTOR	<input type="text" value="30.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="670.00"/>	

Full Name (Last, First, Middle Initial) C. ANTHONY VERNELL		Date of Receipt
Mailing Address 14 Meadow Lane		<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City	State	Zip Code
Athens	OH	45701
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.280252
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME OH LOC 4	REGIONAL DIRECTOR	<input type="text" value="30.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="700.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="150.06"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 743 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. LOUIS VOLPI JR.
Full Name (Last, First, Middle Initial)

Mailing Address 195 Forest Blvd.
#A

City Park Forest State IL Zip Code 60466

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation MENTAL HEALTH TECH I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 441.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2012
Transaction ID : SA11AI.279483

Amount of Each Receipt this Period
63.00

B. MELVIN H. WADE
Full Name (Last, First, Middle Initial)

Mailing Address 534 Gerritt

City Philadelphia State PA Zip Code 19147

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012
Transaction ID : SA11AI.279777

Amount of Each Receipt this Period
20.00

C. SUSAN L. WAGONER
Full Name (Last, First, Middle Initial)

Mailing Address 5434 Briardale Lane
Apt. E

City Dublin State OH Zip Code 43016

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 644.26

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012
Transaction ID : SA11AI.279849

Amount of Each Receipt this Period
70.84

SUBTOTAL of Receipts This Page (optional)..... ▶ 153.84

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 744 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ARTHUR E. WAKE III
 Full Name (Last, First, Middle Initial)
 Mailing Address 1203 NE 135th Street
 City Seattle State WA Zip Code 98125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/UNIV OF WA Occupation PAINTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2012
Transaction ID : SA11AI.277361
 Amount of Each Receipt this Period
 500.00

B. ARTHUR E. WAKE III
 Full Name (Last, First, Middle Initial)
 Mailing Address 1203 NE 135th Street
 City Seattle State WA Zip Code 98125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/UNIV OF WA Occupation PAINTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277920
 Amount of Each Receipt this Period
 30.00

C. MARGARET WALCOTT
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 Martin Luther King Jr. Blvd.
 City Columbus State OH Zip Code 43203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation CUSTODIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2012
Transaction ID : SA11AI.280282
 Amount of Each Receipt this Period
 25.00

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: (check only one)	PAGE 745 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MARGARET WALCOTT
Full Name (Last, First, Middle Initial)

Mailing Address 200 Martin Luther King Jr. Blvd.

City Columbus	State OH	Zip Code 43203
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation CUSTODIAN
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	13	/	2012

Transaction ID : SA11AI.280312

Amount of Each Receipt this Period

25.00

B. MARGARET WALCOTT
Full Name (Last, First, Middle Initial)

Mailing Address 200 Martin Luther King Jr. Blvd.

City Columbus	State OH	Zip Code 43203
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation CUSTODIAN
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **625.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.280342

Amount of Each Receipt this Period

25.00

C. FLORA M. WALKER
Full Name (Last, First, Middle Initial)

Mailing Address 2492 Ram Crossingway

City Henderson	State NV	Zip Code 89074
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation REGIONAL DIRECTOR
----------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2918.20**

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276528

Amount of Each Receipt this Period

145.91

SUBTOTAL of Receipts This Page (optional).....▶	195.91
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 746 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. FLORA M. WALKER
Full Name (Last, First, Middle Initial)

Mailing Address 2492 Ram Crossingway

City Henderson State NV Zip Code 89074

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation REGIONAL DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3064.11

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276722

Amount of Each Receipt this Period 145.91

B. KIRK A. WALKER
Full Name (Last, First, Middle Initial)

Mailing Address 56 Orel Avenue

City Columbus State OH Zip Code 43204

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation ACCOUNTANT/EXAMINER III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 206.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278608

Amount of Each Receipt this Period 10.00

C. KIRK A. WALKER
Full Name (Last, First, Middle Initial)

Mailing Address 56 Orel Avenue

City Columbus State OH Zip Code 43204

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation ACCOUNTANT/EXAMINER III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278966

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional).....▶ 165.91

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 747 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. KIRK A. WALKER			Date of Receipt
Mailing Address 56 Orel Avenue			<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279324
Columbus	OH	43204	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		
AFSCME OH LOC 11/STATE OF OH	ACCOUNTANT/EXAMINER III		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="226.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. NAOMI A. WALKER			Date of Receipt
Mailing Address 1625 L Street NW			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276529
Washington	DC	20036	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="62.60"/>
Name of Employer	Occupation		
AFSCME INT'L	ASSISTANT TO THE PRESIDENT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.40"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. NAOMI A. WALKER			Date of Receipt
Mailing Address 1625 L Street NW			<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276723
Washington	DC	20036	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="62.60"/>
Name of Employer	Occupation		
AFSCME INT'L	ASSISTANT TO THE PRESIDENT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="313.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="135.20"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 748 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ANGELA M. WALLACE
Full Name (Last, First, Middle Initial)

Mailing Address 387 Chatterly Lane

City Columbus State OH Zip Code 43207

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation GRANTS COORDINATOR 2

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278610

Amount of Each Receipt this Period 10.00

B. ANGELA M. WALLACE
Full Name (Last, First, Middle Initial)

Mailing Address 387 Chatterly Lane

City Columbus State OH Zip Code 43207

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation GRANTS COORDINATOR 2

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278968

Amount of Each Receipt this Period 10.00

C. ANGELA M. WALLACE
Full Name (Last, First, Middle Initial)

Mailing Address 387 Chatterly Lane

City Columbus State OH Zip Code 43207

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation GRANTS COORDINATOR 2

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 16 / 2012
Transaction ID : SA11AI.279326

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional).....▶ 30.00

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 749 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. THOMAS P. WALSH
Full Name (Last, First, Middle Initial)

Mailing Address 7162 Brian Way

City Centerville	State MN	Zip Code 55038
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MN CN 5/STATE OF MN	Occupation STAFF REPRESENTATIVE
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.278260

Amount of Each Receipt this Period

45.00	45.00	45.00	45.00	45.00
230.00				

B. MARION E J. WARE
Full Name (Last, First, Middle Initial)

Mailing Address 4156 Berrybush Drive

City Columbus	State OH	Zip Code 43230
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation BUS DRIVER
---	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **287.50**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2012

Transaction ID : SA11AI.280283

Amount of Each Receipt this Period

12.50	12.50	12.50	12.50	12.50
12.50				

C. MARION E J. WARE
Full Name (Last, First, Middle Initial)

Mailing Address 4156 Berrybush Drive

City Columbus	State OH	Zip Code 43230
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation BUS DRIVER
---	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2012

Transaction ID : SA11AI.280313

Amount of Each Receipt this Period

12.50	12.50	12.50	12.50	12.50
12.50				

SUBTOTAL of Receipts This Page (optional).....▶	45.00
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 750 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. MARION E J. WARE		Date of Receipt
Mailing Address 4156 Berrybush Drive		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City State Zip Code Columbus OH 43230		Transaction ID : SA11AI.280343
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="12.50"/>
Name of Employer AFSCME OH LOC 4/COLUMBUS CITY	Occupation BUS DRIVER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="312.50"/>	

Full Name (Last, First, Middle Initial) B. LORRAINE K. WAREHAM		Date of Receipt
Mailing Address 3604 Teakwood		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City State Zip Code Springfield IL 62712		Transaction ID : SA11AI.279484
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="60.00"/>
Name of Employer AFSCME IL CN 31/STATE OF IL	Occupation MANPOWER PLANNER III	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="280.00"/>	

Full Name (Last, First, Middle Initial) C. CYNTHIA D. WARREN		Date of Receipt
Mailing Address 2268 Bryn Mawr Avenue		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City State Zip Code Philadelphia PA 19131		Transaction ID : SA11AI.279778
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer AFSCME PA CN 13/STATE OF PA	Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="92.50"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 751 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. DAVID WARRICK			Date of Receipt
Mailing Address 2638 Jay Court			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276341
Indianapolis	IN	46229	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="70.00"/>
Name of Employer	Occupation		
AFSCME IN CN 62	EXECUTIVE DIRECTOR		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1300.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. ANDRE' J. WASHINGTON			Date of Receipt
Mailing Address 45 Knollwood Drive			<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.280198
Perrysburg	OH	43551	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="19.24"/>
Name of Employer	Occupation		
AFSCME OH LOC 4	FIELD REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="404.04"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. ANDRE' J. WASHINGTON			Date of Receipt
Mailing Address 45 Knollwood Drive			<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.280253
Perrysburg	OH	43551	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="19.24"/>
Name of Employer	Occupation		
AFSCME OH LOC 4	FIELD REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="423.28"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="108.48"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 752 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. ALTON WATANABE		Date of Receipt
Mailing Address 836 Paloma Street		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City Wailuku State HI Zip Code 96793		Transaction ID : SA11AI.280452
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="275.00"/>	

Full Name (Last, First, Middle Initial) B. SUSAN M. WATANABE		Date of Receipt
Mailing Address 888 Mililani Street Suite 601		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City Honolulu State HI Zip Code 96813-2991		Transaction ID : SA11AI.280453
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE		<input type="text" value="23.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="253.00"/>	

Full Name (Last, First, Middle Initial) C. KEVIN J. WATSON		Date of Receipt
Mailing Address 1771 225th Place		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City Sauk Village State IL Zip Code 60411		Transaction ID : SA11AI.279594
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE		<input type="text" value="55.06"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="550.60"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="103.06"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 753 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. WENDY G. WATSON
Full Name (Last, First, Middle Initial)

Mailing Address 1800 Audrey Road

City Columbus State OH Zip Code 43224

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation BUS DRIVER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **359.49**

Date of Receipt **10 / 29 / 2012**
Transaction ID : SA11AI.280284

Amount of Each Receipt this Period **15.63**

B. WENDY G. WATSON
Full Name (Last, First, Middle Initial)

Mailing Address 1800 Audrey Road

City Columbus State OH Zip Code 43224

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation BUS DRIVER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **375.12**

Date of Receipt **11 / 13 / 2012**
Transaction ID : SA11AI.280314

Amount of Each Receipt this Period **15.63**

C. WENDY G. WATSON
Full Name (Last, First, Middle Initial)

Mailing Address 1800 Audrey Road

City Columbus State OH Zip Code 43224

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation BUS DRIVER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **390.75**

Date of Receipt **11 / 26 / 2012**
Transaction ID : SA11AI.280344

Amount of Each Receipt this Period **15.63**

SUBTOTAL of Receipts This Page (optional)..... **46.89**

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 754 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. JEFFERY M. WATT		Date of Receipt
Mailing Address 1299 Westwood Avenue		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2012"/>
City State Zip Code Grandview OH 43212		Transaction ID : SA11AI.278612
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation VIDEOGRAPHER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	

Full Name (Last, First, Middle Initial) B. JEFFERY M. WATT		Date of Receipt
Mailing Address 1299 Westwood Avenue		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City State Zip Code Grandview OH 43212		Transaction ID : SA11AI.278970
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation VIDEOGRAPHER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) C. JEFFERY M. WATT		Date of Receipt
Mailing Address 1299 Westwood Avenue		<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City State Zip Code Grandview OH 43212		Transaction ID : SA11AI.279328
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation VIDEOGRAPHER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="230.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="30.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 755 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JO ANN WAUGH
Full Name (Last, First, Middle Initial)

Mailing Address 4031 Executive Park Drive

City Harrisburg	State PA	Zip Code 17111
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **701.21**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2012

Transaction ID : SA11AI.279704

Amount of Each Receipt this Period

62.56

B. LONITA M. WAYBRIGHT
Full Name (Last, First, Middle Initial)

Mailing Address 3929 Whitemarsh Lane

City Edgewater	State MD	Zip Code 21037
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECTOR, BENEFITS
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1699.08**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276530

Amount of Each Receipt this Period

85.41

C. LONITA M. WAYBRIGHT
Full Name (Last, First, Middle Initial)

Mailing Address 3929 Whitemarsh Lane

City Edgewater	State MD	Zip Code 21037
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECTOR, BENEFITS
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1784.49**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2012

Transaction ID : SA11AI.276724

Amount of Each Receipt this Period

85.41

SUBTOTAL of Receipts This Page (optional).....▶	233.38
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 756 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KATHLEEN WEATHERFORD
 Full Name (Last, First, Middle Initial)
 Mailing Address 408 West Beacon Court
 City Mt Vernon State IL Zip Code 62864
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31/STATE OF IL Occupation CHILD WELFARE TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 399.84

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279485
 Amount of Each Receipt this Period 57.12

B. DEBORAH L. WEAVER
 Full Name (Last, First, Middle Initial)
 Mailing Address 15318 Judson Drive
 City Cleveland State OH Zip Code 44128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 10 / 19 / 2012
Transaction ID : SA11AI.278613
 Amount of Each Receipt this Period 10.00

C. DEBORAH L. WEAVER
 Full Name (Last, First, Middle Initial)
 Mailing Address 15318 Judson Drive
 City Cleveland State OH Zip Code 44128
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 11 / 02 / 2012
Transaction ID : SA11AI.278971
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 77.12
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 757 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. DEBORAH L. WEAVER
Full Name (Last, First, Middle Initial)

Mailing Address 15318 Judson Drive

City Cleveland	State OH	Zip Code 44128
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		16		2012

Transaction ID : SA11Al.279329

Amount of Each Receipt this Period

100.00

B. JANA WEAVER
Full Name (Last, First, Middle Initial)

Mailing Address 451 London Road

City Deerfield	State WI	Zip Code 53531
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WI CN 24	Occupation ASSISTANT DIRECTOR
-------------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **947.16**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2012

Transaction ID : SA11Al.277616

Amount of Each Receipt this Period

73.68

C. KENNETH E. WEAVER
Full Name (Last, First, Middle Initial)

Mailing Address 451 London Road

City Deerfield	State WI	Zip Code 53531
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WI CN 24/STATE OF WI	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		22		2012

Transaction ID : SA11Al.277600

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	108.68
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 758 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. KENNETH E. WEAVER		Date of Receipt
Mailing Address 451 London Road		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Zip Code
Deerfield	WI	53531
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.277601
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME WI CN 24/STATE OF WI	STAFF REPRESENTATIVE	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="550.00"/>	

Full Name (Last, First, Middle Initial) B. KENNETH E. WEAVER		Date of Receipt
Mailing Address 451 London Road		<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City	State	Zip Code
Deerfield	WI	53531
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.277602
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME WI CN 24/STATE OF WI	STAFF REPRESENTATIVE	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="575.00"/>	

Full Name (Last, First, Middle Initial) C. BRENDA WEBB		Date of Receipt
Mailing Address 4031 Executive Park Drive		<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2012"/>
City	State	Zip Code
Harrisburg	PA	17111
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.279705
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME PA CN 13	STAFF REPRESENTATIVE	<input type="text" value="33.88"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="359.78"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="83.88"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 759 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOANNA L. WEBB-GAUVIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1200 W. Lawrence #12
 City Springfield State IL Zip Code 62704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31 Occupation RETIREE PROGRAMS DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 733.40

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279595
 Amount of Each Receipt this Period 73.34

B. BRIAN V. WEEKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1522 A Street NE
 City Washington State DC Zip Code 20002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation DIRECTOR, POLITICAL ACTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1088.26

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276531
 Amount of Each Receipt this Period 63.73

C. BRIAN V. WEEKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1522 A Street NE
 City Washington State DC Zip Code 20002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation DIRECTOR, POLITICAL ACTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1151.99

Date of Receipt 11 / 15 / 2012
Transaction ID : SA11AI.276725
 Amount of Each Receipt this Period 63.73

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.80
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 760 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOSEPH W. WEIDNER
Full Name (Last, First, Middle Initial)

Mailing Address 255 Binns Boulevard

City Columbus State OH Zip Code 43204-2515

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH CN 8 Occupation EDITOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 653.41

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.279850

Amount of Each Receipt this Period
 65.44

B. KRISTA L. WEIHS
Full Name (Last, First, Middle Initial)

Mailing Address 625 N Prospect Street

City Tacoma State WA Zip Code 98406

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277313

Amount of Each Receipt this Period
 10.00

C. KRISTA L. WEIHS
Full Name (Last, First, Middle Initial)

Mailing Address 625 N Prospect Street

City Tacoma State WA Zip Code 98406

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277894

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	85.44
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 761 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JESSICA WEINSTEIN
Full Name (Last, First, Middle Initial)

Mailing Address 2112 New Hampshire Avenue NW
Apt #405

City Washington State DC Zip Code 20009

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation ASSISTANT TO THE PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3156.60

Date of Receipt
10 / 31 / 2012
Transaction ID : SA11AI.276532

Amount of Each Receipt this Period
151.93

B. JESSICA WEINSTEIN
Full Name (Last, First, Middle Initial)

Mailing Address 2112 New Hampshire Avenue NW
Apt #405

City Washington State DC Zip Code 20009

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation ASSISTANT TO THE PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3308.53

Date of Receipt
11 / 15 / 2012
Transaction ID : SA11AI.276726

Amount of Each Receipt this Period
151.93

C. LINDA K. WELCH
Full Name (Last, First, Middle Initial)

Mailing Address 1446 E. Gates Street

City Columbus State OH Zip Code 43206

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CRIMINAL JUSTICE CLERK

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt
10 / 19 / 2012
Transaction ID : SA11AI.278615

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 318.86

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 762 OF 846
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input 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

A. LINDA K. WELCH
Full Name (Last, First, Middle Initial)

Mailing Address 1446 E. Gates Street

City Columbus	State OH	Zip Code 43206
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CRIMINAL JUSTICE CLERK
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2012

Transaction ID : SA11AI.278973

Amount of Each Receipt this Period

15.00

B. LINDA K. WELCH
Full Name (Last, First, Middle Initial)

Mailing Address 1446 E. Gates Street

City Columbus	State OH	Zip Code 43206
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CRIMINAL JUSTICE CLERK
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2012

Transaction ID : SA11AI.279331

Amount of Each Receipt this Period

15.00

C. JANELL WELKER
Full Name (Last, First, Middle Initial)

Mailing Address 14720 SE Wanda Drive

City Milwaukie	State OR	Zip Code 97267
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OR CN 75	Occupation STAFF REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.279372

Amount of Each Receipt this Period

30.00

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: PAGE 763 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CHRISTOPHER RYAN WELLES
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 Hardman Avenue South
 City State Zip Code
 South St. Paul MN 55075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME MN CN 5/CN14 STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 554.72

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.280061
 Amount of Each Receipt this Period
 51.70

B. KELLY WELLS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4650 Beard Road
 City State Zip Code
 Sunbury OH 43074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 4 ACCOUNT CLERK
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2012
Transaction ID : SA11AI.280199
 Amount of Each Receipt this Period
 10.00

C. KELLY WELLS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4650 Beard Road
 City State Zip Code
 Sunbury OH 43074
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 4 ACCOUNT CLERK
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2012
Transaction ID : SA11AI.280254
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 71.70
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 764 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ROSETTA WELLS
 Full Name (Last, First, Middle Initial)
 Mailing Address 5065 Hannan Trace Road
 City State Zip Code
 Patriot OH 45658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH THERAPUTIC PROGRAM TECH
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 399.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278616
 Amount of Each Receipt this Period
 21.00

B. ROSETTA WELLS
 Full Name (Last, First, Middle Initial)
 Mailing Address 5065 Hannan Trace Road
 City State Zip Code
 Patriot OH 45658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH THERAPUTIC PROGRAM TECH
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278974
 Amount of Each Receipt this Period
 21.00

C. ROSETTA WELLS
 Full Name (Last, First, Middle Initial)
 Mailing Address 5065 Hannan Trace Road
 City State Zip Code
 Patriot OH 45658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 11/STATE OF OH THERAPUTIC PROGRAM TECH
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 441.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279332
 Amount of Each Receipt this Period
 21.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 63.00
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 765 OF 846
	<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	<input type="checkbox"/>

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CHERYL L. WEST
Full Name (Last, First, Middle Initial)

Mailing Address 124 Elma McCleary Road
Trailer 7

City Elma State WA Zip Code 98541

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
10 / 25 / 2012
Transaction ID : SA11AI.277023

Amount of Each Receipt this Period
12.50

B. CHERYL L. WEST
Full Name (Last, First, Middle Initial)

Mailing Address 124 Elma McCleary Road
Trailer 7

City Elma State WA Zip Code 98541

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 262.50

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277314

Amount of Each Receipt this Period
12.50

C. CHERYL L. WEST
Full Name (Last, First, Middle Initial)

Mailing Address 124 Elma McCleary Road
Trailer 7

City Elma State WA Zip Code 98541

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277895

Amount of Each Receipt this Period
12.50

SUBTOTAL of Receipts This Page (optional).....▶ 37.50

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 766 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JOHN P. WESTMORELAND
 Full Name (Last, First, Middle Initial)
 Mailing Address 4678 West Road
 City State Zip Code
 Moose Lake MN 55767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME MN CN 5/CN14 BUSINESS AGENT
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 795.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.280062
 Amount of Each Receipt this Period
 72.28

B. JAMES R. WESTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1495 Irvin-Shoots Road
 City State Zip Code
 Morral OH 43337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 4 DIRECTOR, POLITICAL ACTION
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1090.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2012
Transaction ID : SA11AI.280200
 Amount of Each Receipt this Period
 50.00

C. JAMES R. WESTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1495 Irvin-Shoots Road
 City State Zip Code
 Morral OH 43337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME OH LOC 4 DIRECTOR, POLITICAL ACTION
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1140.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2012
Transaction ID : SA11AI.280255
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	172.28
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 767 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ROBERT WHEATON
Full Name (Last, First, Middle Initial)

Mailing Address 725 NE 80th Avenue

City Portland State OR Zip Code 97213

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OR CN 75 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.279373

Amount of Each Receipt this Period
 210.00

B. BECKY WHETHAM
Full Name (Last, First, Middle Initial)

Mailing Address 11911 241st Avenue Court E

City Buckley State WA Zip Code 98321

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2012
Transaction ID : SA11AI.277315

Amount of Each Receipt this Period
 10.00

C. BECKY WHETHAM
Full Name (Last, First, Middle Initial)

Mailing Address 11911 241st Avenue Court E

City Buckley State WA Zip Code 98321

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2012
Transaction ID : SA11AI.277896

Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	41.00
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 768 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ELAINA M. WHITE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1017 S. 13th Street
 City Springfield State IL Zip Code 62703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IL CN 31/STATE OF IL Occupation DATA PROCESSING TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 01 / 2012
Transaction ID : SA11AI.279486
 Amount of Each Receipt this Period 30.00

B. JEANETTE C. WHITE
 Full Name (Last, First, Middle Initial)
 Mailing Address 7903 189th Place SW
 City Edmonds State WA Zip Code 98026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11AI.277316
 Amount of Each Receipt this Period 10.00

C. JEANETTE C. WHITE
 Full Name (Last, First, Middle Initial)
 Mailing Address 7903 189th Place SW
 City Edmonds State WA Zip Code 98026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.277897
 Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00
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 769 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KENNETH J. WHITE
 Full Name (Last, First, Middle Initial)
 Mailing Address 137 Wisconsin
 City Elyria State OH Zip Code 44035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278618
 Amount of Each Receipt this Period
 10.00

B. KENNETH J. WHITE
 Full Name (Last, First, Middle Initial)
 Mailing Address 137 Wisconsin
 City Elyria State OH Zip Code 44035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278976
 Amount of Each Receipt this Period
 10.00

C. KENNETH J. WHITE
 Full Name (Last, First, Middle Initial)
 Mailing Address 137 Wisconsin
 City Elyria State OH Zip Code 44035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279334
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional).....▶	30.00
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 770 OF 846
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input 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

A. LACHEZ WHITE
Full Name (Last, First, Middle Initial)

Mailing Address 190 W. Ostend Street
Suite 101

City Baltimore State MD Zip Code 21230

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **339.24**

Date of Receipt
11 / 05 / 2012
Transaction ID : SA11AI.280001

Amount of Each Receipt this Period
30.84

B. ROBIN WHITE
Full Name (Last, First, Middle Initial)

Mailing Address 4320 NW Second Avenue

City Des Moines State IA Zip Code 50313

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IA CN 61 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
11 / 07 / 2012
Transaction ID : SA11AI.280089

Amount of Each Receipt this Period
30.00

C. TAMARA V. WHITE
Full Name (Last, First, Middle Initial)

Mailing Address 3355 Alden Place NE

City Washington State DC Zip Code 20019

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation ADMINISTRATIVE ASSISTANT I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **623.90**

Date of Receipt
10 / 31 / 2012
Transaction ID : SA11AI.276533

Amount of Each Receipt this Period
33.76

SUBTOTAL of Receipts This Page (optional).....▶	94.60
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 771 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. TAMARA V. WHITE		Date of Receipt
Mailing Address 3355 Alden Place NE		<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City Washington State DC Zip Code 20019		Transaction ID : SA11AI.276727
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer AFSCME INT'L Occupation ADMINISTRATIVE ASSISTANT I		<input type="text" value="33.76"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="657.66"/>	

Full Name (Last, First, Middle Initial) B. DIANE WHITE-HARRIS		Date of Receipt
Mailing Address 1142 Wolf Run Drive		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/>
City Lansing State MI Zip Code 48917		Transaction ID : SA11AI.279901
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer AFSCME MI CN 25 Occupation EXECUTIVE SECRETARY		<input type="text" value="29.47"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="618.87"/>	

Full Name (Last, First, Middle Initial) C. DIANE WHITE-HARRIS		Date of Receipt
Mailing Address 1142 Wolf Run Drive		<input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City Lansing State MI Zip Code 48917		Transaction ID : SA11AI.279951
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer AFSCME MI CN 25 Occupation EXECUTIVE SECRETARY		<input type="text" value="29.47"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="648.34"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="92.70"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 772 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JACQUELINE K. WHITT
 Full Name (Last, First, Middle Initial)
 Mailing Address 10509 Rosehill Avenue
 City Cleveland State OH Zip Code 44104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation WKRS COMPENSATION SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278622
 Amount of Each Receipt this Period
 10.00

B. JACQUELINE K. WHITT
 Full Name (Last, First, Middle Initial)
 Mailing Address 10509 Rosehill Avenue
 City Cleveland State OH Zip Code 44104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation WKRS COMPENSATION SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278980
 Amount of Each Receipt this Period
 10.00

C. JACQUELINE K. WHITT
 Full Name (Last, First, Middle Initial)
 Mailing Address 10509 Rosehill Avenue
 City Cleveland State OH Zip Code 44104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation WKRS COMPENSATION SPECIALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279338
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 773 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. BRYCE WICKSTROM
 Full Name (Last, First, Middle Initial)
 Mailing Address 1267 Matilda Street
 City State Zip Code
 St. Paul MN 55117-4473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME MN CN 5/STATE OF MN RECORDING SECRETARY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.278264
 Amount of Each Receipt this Period
 110.00

B. GUY WIEDERHOLD
 Full Name (Last, First, Middle Initial)
 Mailing Address 906 Laurel Boulevard
 City State Zip Code
 Pottsville PA 17901-2324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME PA CN 13 STAFF REPRESENTATIVE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 785.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.279706
 Amount of Each Receipt this Period
 53.46

C. RON G. WIGGINS
 Full Name (Last, First, Middle Initial)
 Mailing Address 15 Melody Drive
 City State Zip Code
 Rochester IL 62563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME IL CN 31/STATE OF IL PUBLIC SERVICE ADMIN
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 219.24

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2012
Transaction ID : SA11AI.279487
 Amount of Each Receipt this Period
 31.32

SUBTOTAL of Receipts This Page (optional)..... ▶ 194.78
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 774 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. CHRISTOPHER WILHELMI			Date of Receipt
Mailing Address 965 Campbell Street			<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279488
Joliet	IL	60435	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="19.22"/>
Name of Employer	Occupation		
AFSCME IL CN 31/STATE OF IL	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="211.42"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. JOANN WILK			Date of Receipt
Mailing Address 305 W. Grace Street			<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.279782
Old Forge	PA	18518	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="30.00"/>
Name of Employer	Occupation		
AFSCME PA CN 13/STATE OF PA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="270.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. ROBERT L. WILKES			Date of Receipt
Mailing Address 1015 E. 26th Avenue			<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.280285
Columbus	OH	43211	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="12.50"/>
Name of Employer	Occupation		
AFSCME OH LOC 4/COLUMBUS CITY	CUSTODIAN		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="287.50"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="61.72"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 775 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. ROBERT L. WILKES
Full Name (Last, First, Middle Initial)

Mailing Address 1015 E. 26th Avenue

City Columbus State OH Zip Code 43211

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation CUSTODIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 13 / 2012
Transaction ID : SA11AI.280315

Amount of Each Receipt this Period 12.50

B. ROBERT L. WILKES
Full Name (Last, First, Middle Initial)

Mailing Address 1015 E. 26th Avenue

City Columbus State OH Zip Code 43211

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation CUSTODIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 312.50

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.280345

Amount of Each Receipt this Period 12.50

C. WILLIAM WILKINSON
Full Name (Last, First, Middle Initial)

Mailing Address 5272 Bradgen Court

City Springfield State VA Zip Code 22151

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, RESEARCH

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.276534

Amount of Each Receipt this Period 52.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 77.50

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 776 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. WILLIAM WILKINSON		Date of Receipt										
Mailing Address 5272 Bradgen Court		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>15</td> <td></td> <td>2012</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	11		15		2012
M M M	/	D D D	/	Y Y Y Y Y Y								
11		15		2012								
City State Zip Code Springfield VA 22151		Transaction ID : SA11AI.276728										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 52.50										
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, RESEARCH											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1102.50											

Full Name (Last, First, Middle Initial) B. BRENDA M. WILLIAMS		Date of Receipt										
Mailing Address 444 NE Ravenna Blvd. Suite 108		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>09</td> <td></td> <td>2012</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	11		09		2012
M M M	/	D D D	/	Y Y Y Y Y Y								
11		09		2012								
City State Zip Code Seattle WA 98115		Transaction ID : SA11AI.277318										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00										
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00											

Full Name (Last, First, Middle Initial) C. BRENDA M. WILLIAMS		Date of Receipt										
Mailing Address 444 NE Ravenna Blvd. Suite 108		<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>26</td> <td></td> <td>2012</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	11		26		2012
M M M	/	D D D	/	Y Y Y Y Y Y								
11		26		2012								
City State Zip Code Seattle WA 98115		Transaction ID : SA11AI.277899										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00										
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00											

SUBTOTAL of Receipts This Page (optional).....▶	72.50
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 777 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. CARLA WILLIAMS		Date of Receipt
Mailing Address 2338 N Spaulding Apt. 2A		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City Chicago	State IL	Zip Code 60647
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.279596
Name of Employer AFSCME IL CN 31	Occupation STAFF REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="67.74"/>
	<input type="text" value="677.40"/>	

Full Name (Last, First, Middle Initial) B. DEBORAH J. WILLIAMS		Date of Receipt
Mailing Address 1008 S. Walnut		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City Springfield	State IL	Zip Code 62704
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.279489
Name of Employer AFSCME IL CN 31/STATE OF IL	Occupation TECHNICAL ADVISOR II	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="20.00"/>
	<input type="text" value="210.00"/>	

Full Name (Last, First, Middle Initial) C. DONNIE R. WILLIAMS		Date of Receipt
Mailing Address 10 S 140 Suffield Drive		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2012"/>
City Downers Grove	State IL	Zip Code 60516
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.279491
Name of Employer AFSCME IL CN 31/STATE OF IL	Occupation PUBLIC SERVICE ADMIN	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="90.00"/>
	<input type="text" value="645.52"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="177.74"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 778 OF 846
	<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	<input 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

Full Name (Last, First, Middle Initial) A. FRANK WILLIAMS		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277028
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="10.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="210.00"/>	

Full Name (Last, First, Middle Initial) B. FRANK WILLIAMS		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277319
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="10.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="220.50"/>	

Full Name (Last, First, Middle Initial) C. FRANK WILLIAMS		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277900
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="10.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="231.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="31.50"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 779 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. HERBERT WILLIAMS JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 106 Kettering bnd
 City Delaware State OH Zip Code 43015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278626
 Amount of Each Receipt this Period
 10.00

B. HERBERT WILLIAMS JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 106 Kettering bnd
 City Delaware State OH Zip Code 43015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278984
 Amount of Each Receipt this Period
 10.00

C. HERBERT WILLIAMS JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 106 Kettering bnd
 City Delaware State OH Zip Code 43015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279342
 Amount of Each Receipt this Period
 10.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00
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 780 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MARION L. WILLIAMS
Full Name (Last, First, Middle Initial)

Mailing Address 12904 Clearfield Drive

City State Zip Code
Bowie MD 20715

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME INT'L ADMINISTRATIVE ASSISTANT II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012
Transaction ID : SA11AI.276729

Amount of Each Receipt this Period
10.00

B. PHILLIP S. WILLIAMS Sr.
Full Name (Last, First, Middle Initial)

Mailing Address 31 E. Bellamy Drive

City State Zip Code
New Castle DE 19720

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME DE CN 81 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
721.85

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2012
Transaction ID : SA11AI.280148

Amount of Each Receipt this Period
65.34

C. SAUNDRA WILLIAMS
Full Name (Last, First, Middle Initial)

Mailing Address 3264 Oxford W

City State Zip Code
Auburn Hills MI 48326

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME MI CN 25 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
783.75

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2012
Transaction ID : SA11AI.279902

Amount of Each Receipt this Period
41.25

SUBTOTAL of Receipts This Page (optional)..... ▶ 116.59

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 781 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. STEVEN WILLIAMS
Full Name (Last, First, Middle Initial)

Mailing Address 18241 Icicle Road

City Sparta	State WI	Zip Code 54656
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WI CN 24	Occupation FIELD REPRESENTATIVE
-------------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **642.72**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2012
Transaction ID : SA11AI.277618

Amount of Each Receipt this Period
53.56

B. CHARLES H. WILLIAMSON
Full Name (Last, First, Middle Initial)

Mailing Address 162 South Street

City Minford	State OH	Zip Code 45653
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278627

Amount of Each Receipt this Period
25.00

C. CHARLES H. WILLIAMSON
Full Name (Last, First, Middle Initial)

Mailing Address 162 South Street

City Minford	State OH	Zip Code 45653
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation CORRECTION OFFICER
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278985

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	103.56
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 782 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. CHARLES H. WILLIAMSON
Full Name (Last, First, Middle Initial)

Mailing Address 162 South Street

City Minford State OH Zip Code 45653

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **575.00**

Date of Receipt **11 / 16 / 2012**

Transaction ID : SA11AI.279343

Amount of Each Receipt this Period **25.00**

B. MICHAEL WILMORE
Full Name (Last, First, Middle Initial)

Mailing Address 608 Hessel Boulevard

City Champaign State IL Zip Code 61820

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **435.51**

Date of Receipt **11 / 01 / 2012**

Transaction ID : SA11AI.279597

Amount of Each Receipt this Period **34.60**

C. ANGELA L. WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 1815 143rd Street

City New Richmond State WI Zip Code 54017

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 22 / 2012**

Transaction ID : SA11AI.277603

Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional).....▶	69.60
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 783 OF 846
	<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	<input 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

A. ANGELA L. WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 1815 143rd Street

City New Richmond State WI Zip Code 54017

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 02 / 2012**

Transaction ID : SA11AI.277604

Amount of Each Receipt this Period **10.00**

B. ANGELA L. WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 1815 143rd Street

City New Richmond State WI Zip Code 54017

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 16 / 2012**

Transaction ID : SA11AI.277605

Amount of Each Receipt this Period **10.00**

C. JOE D. WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 500 East Third Street Apt #521

City Dayton State OH Zip Code 45402

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.23**

Date of Receipt **10 / 31 / 2012**

Transaction ID : SA11AI.279851

Amount of Each Receipt this Period **16.70**

SUBTOTAL of Receipts This Page (optional)..... **36.70**

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 784 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. SARAH C. WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 3609 Apollo Street, SE

City Lacey	State WA	Zip Code 98503
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **426.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2012

Transaction ID : SA11AI.277030

Amount of Each Receipt this Period

18.50

B. SARAH C. WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 3609 Apollo Street, SE

City Lacey	State WA	Zip Code 98503
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **444.50**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11AI.277321

Amount of Each Receipt this Period

18.50

C. SARAH C. WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 3609 Apollo Street, SE

City Lacey	State WA	Zip Code 98503
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **463.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.277902

Amount of Each Receipt this Period

18.50

SUBTOTAL of Receipts This Page (optional).....▶	55.50
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 785 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. TRACY WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
292.50

Date of Receipt
10 / 25 / 2012
Transaction ID : SA11AI.277031

Amount of Each Receipt this Period
15.00

B. TRACY WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
307.50

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277322

Amount of Each Receipt this Period
15.00

C. TRACY WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
322.50

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277903

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00

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 786 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. ROBIN WINDHAUSEN		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277032
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="10.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="210.00"/>	

Full Name (Last, First, Middle Initial) B. ROBIN WINDHAUSEN		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277323
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="10.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="220.50"/>	

Full Name (Last, First, Middle Initial) C. ROBIN WINDHAUSEN		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277904
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="10.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="231.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="31.50"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 787 OF 846
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input 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

A. BRUCE H. WITHAM
Full Name (Last, First, Middle Initial)

Mailing Address 1329 S. 96th Street

City Tacoma	State WA	Zip Code 98444
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		25		2012

Transaction ID : SA11AI.277033

Amount of Each Receipt this Period

30.00

B. BRUCE H. WITHAM
Full Name (Last, First, Middle Initial)

Mailing Address 1329 S. 96th Street

City Tacoma	State WA	Zip Code 98444
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		09		2012

Transaction ID : SA11AI.277324

Amount of Each Receipt this Period

30.00

C. BRUCE H. WITHAM
Full Name (Last, First, Middle Initial)

Mailing Address 1329 S. 96th Street

City Tacoma	State WA	Zip Code 98444
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **660.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		26		2012

Transaction ID : SA11AI.277905

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 788 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. KRISTIE WOLF-MALONEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4923C Haverford Road
 City Harrisburg State PA Zip Code 17109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1002.84

Date of Receipt 11 / 14 / 2012
Transaction ID : SA11AI.279707
 Amount of Each Receipt this Period 91.74

B. TIMOTHY J. WOLFE
 Full Name (Last, First, Middle Initial)
 Mailing Address 57 E. Main Street P.O. Box 30
 City Newville State PA Zip Code 17241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279784
 Amount of Each Receipt this Period 80.00

C. DIANNE J. WOMACK
 Full Name (Last, First, Middle Initial)
 Mailing Address 1310 S. Central Road
 City Medical Lake State WA Zip Code 99022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt 10 / 25 / 2012
Transaction ID : SA11AI.277034
 Amount of Each Receipt this Period 28.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 199.74
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 789 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. WILLIAM O. WOMACK
 Full Name (Last, First, Middle Initial)
 Mailing Address 3227 Genevieve Drive
 City Columbus State OH Zip Code 43219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation CUSTODIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 327.50

Date of Receipt 10 / 29 / 2012
Transaction ID : SA11AI.280286
 Amount of Each Receipt this Period 12.50

B. WILLIAM O. WOMACK
 Full Name (Last, First, Middle Initial)
 Mailing Address 3227 Genevieve Drive
 City Columbus State OH Zip Code 43219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation CUSTODIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 11 / 13 / 2012
Transaction ID : SA11AI.280316
 Amount of Each Receipt this Period 12.50

C. WILLIAM O. WOMACK
 Full Name (Last, First, Middle Initial)
 Mailing Address 3227 Genevieve Drive
 City Columbus State OH Zip Code 43219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation CUSTODIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 352.50

Date of Receipt 11 / 26 / 2012
Transaction ID : SA11AI.280346
 Amount of Each Receipt this Period 12.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 37.50
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 790 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)
A. LYNN WONG

Mailing Address 2752 Kaaha Street
 #304

City State Zip Code
 Honolulu HI 96836-4754

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME HI LOC 152 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.280454

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
B. ARTHUR WOOD

Mailing Address 31062 Birchwood

City State Zip Code
 Westland MI 48185

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME MI CN 25 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 672.63

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2012
Transaction ID : SA11AI.279903

Amount of Each Receipt this Period
 32.03

Full Name (Last, First, Middle Initial)
C. ARTHUR WOOD

Mailing Address 31062 Birchwood

City State Zip Code
 Westland MI 48185

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 AFSCME MI CN 25 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 704.66

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2012
Transaction ID : SA11AI.279952

Amount of Each Receipt this Period
 32.03

SUBTOTAL of Receipts This Page (optional)..... ▶ 84.06

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 791 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. WILLIAM T. WOOD
 Full Name (Last, First, Middle Initial)
 Mailing Address 6541 Blacks Road SW
 City Pataskala State OH Zip Code 43062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012
Transaction ID : SA11AI.278631
 Amount of Each Receipt this Period
 15.00

B. WILLIAM T. WOOD
 Full Name (Last, First, Middle Initial)
 Mailing Address 6541 Blacks Road SW
 City Pataskala State OH Zip Code 43062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012
Transaction ID : SA11AI.278989
 Amount of Each Receipt this Period
 15.00

C. WILLIAM T. WOOD
 Full Name (Last, First, Middle Initial)
 Mailing Address 6541 Blacks Road SW
 City Pataskala State OH Zip Code 43062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 246.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 16 / 2012
Transaction ID : SA11AI.279347
 Amount of Each Receipt this Period
 15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 45.00
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 792 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. SHELBY L. WOODALL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1006 Ironwood Circle
 City Akron State OH Zip Code 44312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 581.15

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11AI.279852
 Amount of Each Receipt this Period 58.20

B. PHELTON WOODS
 Full Name (Last, First, Middle Initial)
 Mailing Address 5435 York Lane S.
 City Columbus State OH Zip Code 43232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation LAB TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 10 / 29 / 2012
Transaction ID : SA11AI.280287
 Amount of Each Receipt this Period 25.00

C. PHELTON WOODS
 Full Name (Last, First, Middle Initial)
 Mailing Address 5435 York Lane S.
 City Columbus State OH Zip Code 43232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation LAB TECH
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 13 / 2012
Transaction ID : SA11AI.280317
 Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional).....▶ 108.20
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 793 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. PHELTON WOODS
Full Name (Last, First, Middle Initial)

Mailing Address 5435 York Lane S.

City Columbus State OH Zip Code 43232

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 4/COLUMBUS CITY Occupation LAB TECH

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **625.00**

Date of Receipt **11 / 26 / 2012**

Transaction ID : SA11AI.280347

Amount of Each Receipt this Period **25.00**

B. A DUFF WOODSIDE
Full Name (Last, First, Middle Initial)

Mailing Address 5051 Sandman Drive Apt. 86

City Taylor Mill State KY Zip Code 41015

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CUSTOMER SERVICE REP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **383.68**

Date of Receipt **10 / 19 / 2012**

Transaction ID : SA11AI.278632

Amount of Each Receipt this Period **23.36**

C. A DUFF WOODSIDE
Full Name (Last, First, Middle Initial)

Mailing Address 5051 Sandman Drive Apt. 86

City Taylor Mill State KY Zip Code 41015

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CUSTOMER SERVICE REP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **407.04**

Date of Receipt **11 / 02 / 2012**

Transaction ID : SA11AI.278990

Amount of Each Receipt this Period **23.36**

SUBTOTAL of Receipts This Page (optional)..... **71.72**

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 794 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. A DUFF WOODSIDE
Full Name (Last, First, Middle Initial)
Mailing Address 5051 Sandman Drive
Apt. 86
City Taylor Mill State KY Zip Code 41015
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CUSTOMER SERVICE REP
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **430.40**

Date of Receipt **11 / 16 / 2012**
Transaction ID : SA11AI.279348
Amount of Each Receipt this Period **23.36**

B. DOUGLAS N. WOODSON
Full Name (Last, First, Middle Initial)
Mailing Address 108 Elgin
Apt. 1
City Forest Park State IL Zip Code 60130
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME IL CN 31 Occupation ORGANIZER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **719.00**

Date of Receipt **11 / 01 / 2012**
Transaction ID : SA11AI.279598
Amount of Each Receipt this Period **71.90**

C. PAMELA WOOLUM
Full Name (Last, First, Middle Initial)
Mailing Address 2068 Entrada Drive
City Beavercreek State OH Zip Code 45431
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt **10 / 24 / 2012**
Transaction ID : SA11AI.280202
Amount of Each Receipt this Period **10.00**

SUBTOTAL of Receipts This Page (optional)..... **105.26**
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 795 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. PAMELA WOOLUM
Full Name (Last, First, Middle Initial)

Mailing Address 2068 Entrada Drive

City State Zip Code
Beavercreek OH 45431

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME OH LOC 4 FIELD REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2012
Transaction ID : SA11AI.280257

Amount of Each Receipt this Period
100.00

B. TERESA F. WRAY
Full Name (Last, First, Middle Initial)

Mailing Address 390 Worthington Road

City State Zip Code
Westerville OH 43082

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME OH LOC 11 STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 24 / 2012
Transaction ID : SA11AI.280134

Amount of Each Receipt this Period
20.00

C. PETER WRIGHT
Full Name (Last, First, Middle Initial)

Mailing Address 28 Washington Street

City State Zip Code
Marblehead MA 01945-0000

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AFSCME MA CN 93 DIRECTOR POLITICAL ACTION & LEGIS.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
815.54

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 07 / 2012
Transaction ID : SA11AI.280021

Amount of Each Receipt this Period
74.14

SUBTOTAL of Receipts This Page (optional)..... ▶ 104.14

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 796 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. SHERRY L. WRIGHT			Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2012 Transaction ID : SA11AI.276536
Mailing Address 1229 Jasmine Drive			Amount of Each Receipt this Period 41.38
City Madison	State WI	Zip Code 53719	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L		Occupation ORGANIZING COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 827.60	

Full Name (Last, First, Middle Initial) B. SHERRY L. WRIGHT			Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2012 Transaction ID : SA11AI.276730
Mailing Address 1229 Jasmine Drive			Amount of Each Receipt this Period 41.38
City Madison	State WI	Zip Code 53719	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L		Occupation ORGANIZING COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 868.98	

Full Name (Last, First, Middle Initial) C. ANNETTE WUERTZ			Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2012 Transaction ID : SA11AI.278267
Mailing Address 364 Jessamine Avenue E.			Amount of Each Receipt this Period 22.00
City St. Paul	State MN	Zip Code 55130-3732	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MN CN 5/STATE OF MN		Occupation STAFF REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 253.00	

SUBTOTAL of Receipts This Page (optional).....▶	104.76
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: (check only one)	PAGE 797 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MARI K. WYATT
Full Name (Last, First, Middle Initial)

Mailing Address 9344 54th Avenue S.

City Seattle	State WA	Zip Code 98118
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2012

Transaction ID : SA11AI.277035

Amount of Each Receipt this Period
10.50

B. MARI K. WYATT
Full Name (Last, First, Middle Initial)

Mailing Address 9344 54th Avenue S.

City Seattle	State WA	Zip Code 98118
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11AI.277325

Amount of Each Receipt this Period
10.50

C. MARI K. WYATT
Full Name (Last, First, Middle Initial)

Mailing Address 9344 54th Avenue S.

City Seattle	State WA	Zip Code 98118
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.277906

Amount of Each Receipt this Period
10.50

SUBTOTAL of Receipts This Page (optional).....▶	31.50
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 798 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JEANETTE WYNN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3064 Highland Oak Terrace
 City Tallahassee State FL Zip Code 32301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME FL CN 79 Occupation PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 824.04

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2012
Transaction ID : SA11AI.280459
 Amount of Each Receipt this Period
 77.56

B. JEANETTE WYNN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3064 Highland Oak Terrace
 City Tallahassee State FL Zip Code 32301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME FL CN 79 Occupation PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 838.04

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA11AI.276342
 Amount of Each Receipt this Period
 14.00

C. JEANETTE WYNN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3064 Highland Oak Terrace
 City Tallahassee State FL Zip Code 32301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME FL CN 79 Occupation PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 915.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2012
Transaction ID : SA11AI.280458
 Amount of Each Receipt this Period
 77.56

SUBTOTAL of Receipts This Page (optional).....▶	169.12
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 799 OF 846
	<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	<input 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

Full Name (Last, First, Middle Initial) A. FLORENCE YAMADA		Date of Receipt
Mailing Address 888 Mililani Street Suite 601		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City Honolulu	State HI	Zip Code 96813-2991
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.280455
Name of Employer AFSCME HI LOC 152		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="200.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) B. WAYNE J. YAMASAKI		Date of Receipt
Mailing Address 1185 Kaeleku Street		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City Honolulu	State HI	Zip Code 96825-3007
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.280456
Name of Employer AFSCME HI LOC 152		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="550.00"/>	

Full Name (Last, First, Middle Initial) C. STEVEN YATES		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277036
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		<input type="text" value="10.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="210.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="80.50"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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 800 OF 846
<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. STEVEN YATES
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.50

Date of Receipt
11 / 09 / 2012
Transaction ID : SA11AI.277326

Amount of Each Receipt this Period
10.50

B. STEVEN YATES
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson St., SE
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231.00

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11AI.277907

Amount of Each Receipt this Period
10.50

C. VIRGINIA E. YATES
Full Name (Last, First, Middle Initial)

Mailing Address 3071 Old 51th Road

City Sandoval State IL Zip Code 62882

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31/STATE OF IL Occupation RETIREE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
224.00

Date of Receipt
11 / 01 / 2012
Transaction ID : SA11AI.279509

Amount of Each Receipt this Period
28.00

SUBTOTAL of Receipts This Page (optional).....▶ 49.00

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 801 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. TIMOTHY A. YOUNG		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277037
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation CANVASSER		<input type="text" value="10.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="210.00"/>	

Full Name (Last, First, Middle Initial) B. TIMOTHY A. YOUNG		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277327
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation CANVASSER		<input type="text" value="10.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="220.50"/>	

Full Name (Last, First, Middle Initial) C. TIMOTHY A. YOUNG		Date of Receipt
Mailing Address 1212 Jefferson St., SE Suite 300		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City Olympia	State WA	Zip Code 98501
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.277908
Name of Employer AFSCME WA CN 28/STATE OF WA		Amount of Each Receipt this Period
Occupation CANVASSER		<input type="text" value="10.50"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="231.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="31.50"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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 802 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. MARIA ZARATE
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson Street SE

City Olympia	State WA	Zip Code 98501
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11AI.277328

Amount of Each Receipt this Period
10.00

B. MARIA ZARATE
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson Street SE

City Olympia	State WA	Zip Code 98501
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.277909

Amount of Each Receipt this Period
10.00

C. DON ZAVODNY
Full Name (Last, First, Middle Initial)

Mailing Address 9801 West O Street

City Lincoln	State NE	Zip Code 68528
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation AREA FIELD SERVICES DIRECTOR
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2012

Transaction ID : SA11AI.276537

Amount of Each Receipt this Period
46.26

SUBTOTAL of Receipts This Page (optional).....▶	66.26
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 803 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. DON ZAVODNY			Date of Receipt
Mailing Address 9801 West O Street			<input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.276731
Lincoln	NE	68528	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="46.26"/>
Name of Employer	Occupation		
AFSCME INT'L	AREA FIELD SERVICES DIRECTOR		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="971.46"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. THOMAS ZEBAR			Date of Receipt
Mailing Address 390 Worthington Road			<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.280136
Westerville	OH	43082	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="62.04"/>
Name of Employer	Occupation		
AFSCME OH LOC 11	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="682.44"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. BRUCE E. ZELLER			Date of Receipt
Mailing Address 518 H Street, SW			<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/>
City	State	Zip Code	Transaction ID : SA11AI.277910
Tumwater	WA	98512	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="118.30"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 804 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial) A. FAYE M. ZEPEDA		Date of Receipt
Mailing Address 1131 Fabry Road SE		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
Salem	OR	97306
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.279375
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME OR CN 75	STAFF REPRESENTATIVE	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) B. SUHAIL S. ZIDAN		Date of Receipt
Mailing Address 390 Worthington Road		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2012"/>
City	State	Zip Code
Westerville	OH	43082
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.280137
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME OH LOC 11	STAFF REPRESENTATIVE	<input type="text" value="20.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) C. JANE ZIMMER		Date of Receipt
Mailing Address 1212 Jefferson Street SE		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2012"/>
City	State	Zip Code
Olympia	WA	98501
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.277040
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME WA CN 28/STATE OF WA	STAFF REPRESENTATIVE	<input type="text" value="12.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="234.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="57.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 805 OF 846
	<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)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. JANE ZIMMER
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson Street SE

City Olympia	State WA	Zip Code 98501
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
246.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	09	/	2012

Transaction ID : SA11AI.277330

Amount of Each Receipt this Period
12.00

B. JANE ZIMMER
Full Name (Last, First, Middle Initial)

Mailing Address 1212 Jefferson Street SE

City Olympia	State WA	Zip Code 98501
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
258.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2012

Transaction ID : SA11AI.277911

Amount of Each Receipt this Period
12.00

C. NOEL A. ZUPANCIC
Full Name (Last, First, Middle Initial)

Mailing Address 2231 176th Place

City Lansing	State IL	Zip Code 60438
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME IL CN 31/STATE OF IL	Occupation INVESTIGATOR III
---	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11AI.279492

Amount of Each Receipt this Period
19.22

SUBTOTAL of Receipts This Page (optional).....▶	43.22
TOTAL This Period (last page this line number only).....▶	74664.31

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 806 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

Mailing Address 125 Barclay Street

City New York State NY Zip Code 10007

FEC ID number of contributing federal political committee. **C** C00149211

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
547550.21

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 25 / 2012
Transaction ID : SA12.278044

Amount of Each Receipt this Period
65243.88

Transfer

B. Full Name (Last, First, Middle Initial)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

Mailing Address 125 Barclay Street

City New York State NY Zip Code 10007

FEC ID number of contributing federal political committee. **C** C00149211

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
566562.93

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 21 / 2012
Transaction ID : SA12.278045

Amount of Each Receipt this Period
19012.72

Transfer

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	84256.60
TOTAL This Period (last page this line number only).....▶	84256.60

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 807 OF 846
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)
A. AMALGAMATED BANK
 Mailing Address 275 7th Avenue
 City State Zip Code
 New York NY 10001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 16173.91

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2012
Transaction ID : SA17.278031
 Amount of Each Receipt this Period
 337.40
 Interest Income 10/31/2012

Full Name (Last, First, Middle Initial)
B.
 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

Full Name (Last, First, Middle Initial)
C.
 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

SUBTOTAL of Receipts This Page (optional).....▶	337.40
TOTAL This Period (last page this line number only).....▶	337.40

**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 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. ADELSTEIN LISTON

Mailing Address 222 West Ontario Street
Suite 600

City Chicago State IL Zip Code 60610

Purpose of Disbursement
Advance payment for future communication

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		22		2012

Transaction ID : **SB21B.280476**

Amount of Each Disbursement this Period

-1199534.33

B. ADELSTEIN LISTON

Full Name (Last, First, Middle Initial)

Mailing Address 222 West Ontario Street
Suite 600

City Chicago State IL Zip Code 60610

Purpose of Disbursement
Advance payment for future communication

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2012

Transaction ID : **SB21B.280477**

Amount of Each Disbursement this Period

-130107.42

C. AMALGAMATED BANK LOANS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 5660

City Hicksville State NY Zip Code 11802-5660

Purpose of Disbursement
Interest payment 10/31/2012

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2012

Transaction ID : **SB21B.278063**

Amount of Each Disbursement this Period

14143.05

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

-1315498.70

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**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 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement
Merchant Service Charges

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2012

Transaction ID : SB21B.278032

Amount of Each Disbursement this Period

0.87

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement
Merchant Service Charges

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 01 / 2012

Transaction ID : SB21B.278033

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement
Merchant Service Charges

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 13 / 2012

Transaction ID : SB21B.278034

Amount of Each Disbursement this Period

0.73

SUBTOTAL of Disbursements This Page (optional)..... ▶

9.55

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. BART GROUP

Mailing Address 171 Main Street

City Port Washington State NY Zip Code 11050

Purpose of Disbursement
Merchant Service Charges

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 06 / 2012

Transaction ID : SB21B.278035

Amount of Each Disbursement this Period

154.15

Full Name (Last, First, Middle Initial)

B. BART GROUP

Mailing Address 171 Main Street

City Port Washington State NY Zip Code 11050

Purpose of Disbursement
Merchant Service Charges

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 06 / 2012

Transaction ID : SB21B.278036

Amount of Each Disbursement this Period

102.45

Full Name (Last, First, Middle Initial)

C. FIS MERCHANT SERVICES-LL

Mailing Address 11000 W. Lake Park Drive

City Milwaukee State WI Zip Code 53224

Purpose of Disbursement
Merchant Service Charges

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 14 / 2012

Transaction ID : SB21B.278037

Amount of Each Disbursement this Period

260.72

SUBTOTAL of Disbursements This Page (optional)..... ▶

517.32

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. GARBER'S TRAVEL SERVICE

Mailing Address 27 Boylston Street

City Chestnut Hill State MA Zip Code 02467

Purpose of Disbursement
Airfare/DNC 2012

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB21B.278064**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. CORDELIA LEWIS-BURKS

Mailing Address 2943 N. Kenwood Avenue

City Indianapolis State IN Zip Code 46208

Purpose of Disbursement
Delegate Travel DNC Non-Cash Stipend - Airfare

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB21B.278071**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. MACK CROUNSE GROUP, LLC

Mailing Address 2001 N. Beauregard Street
Suite 420

City Alexandria State VA Zip Code 22311

Purpose of Disbursement
Advance payment for future communication

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB21B.280482**

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.278071

US Airways

Form/Schedule:

Transaction ID:

**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 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. MACK CROUNSE GROUP, LLC

Mailing Address 2001 N. Beauregard Street
Suite 420

City Alexandria State VA Zip Code 22311

Purpose of Disbursement
Advance payment for future communication

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

004

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 19 / 2012

Transaction ID : **SB21B.280483**

Amount of Each Disbursement this Period

-38443.68

Full Name (Last, First, Middle Initial)

B. MACK CROUNSE GROUP, LLC

Mailing Address 2001 N. Beauregard Street
Suite 420

City Alexandria State VA Zip Code 22311

Purpose of Disbursement
Advance payment for future communication

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

004

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2012

Transaction ID : **SB21B.280484**

Amount of Each Disbursement this Period

-25043.13

Full Name (Last, First, Middle Initial)

C. MACK CROUNSE GROUP, LLC

Mailing Address 2001 N. Beauregard Street
Suite 420

City Alexandria State VA Zip Code 22311

Purpose of Disbursement
Advance payment for future communication

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

004

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2012

Transaction ID : **SB21B.280501**

Amount of Each Disbursement this Period

-21554.89

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

-85041.70

**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 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. MACK CROUNSE GROUP, LLC

Mailing Address 2001 N. Beauford Street
Suite 420

City Alexandria State VA Zip Code 22311

Purpose of Disbursement
Advance payment for future communication

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

004
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.280485

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. MACK CROUNSE GROUP, LLC

Mailing Address 2001 N. Beauford Street
Suite 420

City Alexandria State VA Zip Code 22311

Purpose of Disbursement
Advance payment for future communication

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

004
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.280486

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. MACK CROUNSE GROUP, LLC

Mailing Address 2001 N. Beauford Street
Suite 420

City Alexandria State VA Zip Code 22311

Purpose of Disbursement
Advance payment for future communication

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

004
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.280499

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. MACK CROUNSE GROUP, LLC

Mailing Address 2001 N. Beaugard Street
Suite 420

City Alexandria State VA Zip Code 22311

Purpose of Disbursement
Advance payment for future communication

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

004

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2012

Transaction ID : **SB21B.280487**

Amount of Each Disbursement this Period

-44852.13

Full Name (Last, First, Middle Initial)

B. MACK CROUNSE GROUP, LLC

Mailing Address 2001 N. Beaugard Street
Suite 420

City Alexandria State VA Zip Code 22311

Purpose of Disbursement
Advance payment for future communication

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

004

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2012

Transaction ID : **SB21B.280488**

Amount of Each Disbursement this Period

-23865.06

Full Name (Last, First, Middle Initial)

C. DIANA MILLER

Mailing Address 110 King Street
Suite 203

City Madison State WI Zip Code 53703

Purpose of Disbursement
Delegate Travel DNC Non-Cash Stipend - Hotel

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

002

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		19		2012

Transaction ID : **SB21B.278072**

Amount of Each Disbursement this Period

1306.92

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

-67410.27

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: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.278072

Embassy Suites

Form/Schedule:

Transaction ID:

**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 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. PAYPAL INC.

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Online Service Charges

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 14 / 2012

Transaction ID : SB21B.278038

Amount of Each Disbursement this Period

139.85

Full Name (Last, First, Middle Initial)

B. RED HORSE STRATEGIES

Mailing Address 55 WASHINGTON STREET
SUITE 624

City BROOKLYN State NY Zip Code 11201

Purpose of Disbursement
Advance payment for future communication

004

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 18 / 2012

Transaction ID : SB21B.280503

Amount of Each Disbursement this Period

-247000.00

Full Name (Last, First, Middle Initial)

C. RED HORSE STRATEGIES

Mailing Address 55 WASHINGTON STREET
SUITE 624

City BROOKLYN State NY Zip Code 11201

Purpose of Disbursement
Advance payment for future communication

004

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 18 / 2012

Transaction ID : SB21B.280504

Amount of Each Disbursement this Period

-39350.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

-286210.15

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. KARLA SALAZAR

Mailing Address 800 W. 6th Street
Suite 1010

City Los Angeles State CA Zip Code 90017

Purpose of Disbursement
Delegate Travel DNC Non-Cash Stipend - Hotel

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2012			

Transaction ID : SB21B.278073

Amount of Each Disbursement this Period

1416.23									
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Full Name (Last, First, Middle Initial)

B. MARY E. SULLIVAN

Mailing Address 1880 9th Avenue

City Watervliet State NY Zip Code 12189

Purpose of Disbursement
Delegate Travel DNC Non-Cash Stipend - Airfare

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			19			2012			

Transaction ID : SB21B.278068

Amount of Each Disbursement this Period

400.10									
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Full Name (Last, First, Middle Initial)

C. THE CAMPAIGN GROUP

Mailing Address 1600 Locust Street

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement
Advance payment for future communication

004

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			23			2012			

Transaction ID : SB21B.280478

Amount of Each Disbursement this Period

-700000.00									
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SUBTOTAL of Disbursements This Page (optional)..... ▶

-698183.67									
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TOTAL This Period (last page this line number only)..... ▶

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: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.278073

Hilton

Form/Schedule: SB21B

Transaction ID: SB21B.278068

US Airways

**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 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. THE CAMPAIGN WORKSHOP

Mailing Address 1129 20th Street NW
Suite 200

City Washington State DC Zip Code 20036

Purpose of Disbursement
Advance payment for future communication

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

004
Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 24 / 2012

Transaction ID : SB21B.280479

Amount of Each Disbursement this Period

-10134.67

Full Name (Last, First, Middle Initial)

B. THE CAMPAIGN WORKSHOP

Mailing Address 1129 20th Street NW
Suite 200

City Washington State DC Zip Code 20036

Purpose of Disbursement
Advance payment for future communication

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

004
Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2012

Transaction ID : SB21B.280480

Amount of Each Disbursement this Period

-10134.67

Full Name (Last, First, Middle Initial)

C. THE CAMPAIGN WORKSHOP

Mailing Address 1129 20th Street NW
Suite 200

City Washington State DC Zip Code 20036

Purpose of Disbursement
Advance payment for future communication

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

004
Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2012

Transaction ID : SB21B.280481

Amount of Each Disbursement this Period

-10134.67

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

-30404.01

**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 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. FRANCINE TURNER

Mailing Address 1732 Coon Hill Road

City Skaneateles State NY Zip Code 13152

Purpose of Disbursement
Delegate Travel DNC Non-Cash Stipend - Airfare

002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.278069

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. WATERFRONT STRATEGIES

Mailing Address 3050 K Street NW
Suite 100

City Washington State DC Zip Code 20007

Purpose of Disbursement
Advance payment for future communication

004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.280490

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. WATERFRONT STRATEGIES

Mailing Address 3050 K Street NW
Suite 100

City Washington State DC Zip Code 20007

Purpose of Disbursement
Advance payment for future communication

004
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.280502

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.278069

US Airways

Form/Schedule:

Transaction ID:

**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 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. COLLEEN J. WHEATON

Mailing Address 768 East Hill Road

City South Colton State NY Zip Code 13687

Purpose of Disbursement
Delegate Travel DNC Non-Cash Stipend - Airfare

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.278070

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : SB21B.278070

US Airways

Form/Schedule:

Transaction ID:

**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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. AFSCME PEOPLE- Non Federal Account

Mailing Address 1625 L Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Tfr non-fed acct for non-fed activity

008
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB22.278039

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. AFSCME PEOPLE- Non Federal Account

Mailing Address 1625 L Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Tfr non-fed acct for non-fed activity

008
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB22.278040

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. AFSCME PEOPLE- Non Federal Account

Mailing Address 1625 L Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Tfr non-fed acct for non-fed activity

008
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB22.278042

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input 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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. AFSCME PEOPLE- Non Federal Account

Mailing Address 1625 L Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Tfr non-fed acct for non-fed activity

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB22.278043

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. DCCC RECOUNT FUND

Mailing Address 430 S. Capital Street SE
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) PAC

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 17 / 2012

Transaction ID : SB23.278050

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

B. MIKE MCINTYRE FOR CONGRESS

Mailing Address P.O. Box 1

City Lumberton State NC Zip Code 28359

Purpose of Disbursement
Contribution

Candidate Name

MIKE MCINTYRE

Office Sought: House Senate President
State: NC District: 07

Disbursement For: 2012
 Primary General
 Other (specify) Recount

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 17 / 2012

Transaction ID : SB23.278056

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. MURPHY ELECTION PROTECTION FUND

Mailing Address 1050 17th Street NW
Suite 590

City Washington State DC Zip Code 20036

Purpose of Disbursement
Contribution

Candidate Name

PATRICK MURPHY

Office Sought: House Senate President
State: FL District: 18

Disbursement For: 2012
 Primary General
 Other (specify) Recount

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 17 / 2012

Transaction ID : SB23.278062

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

25000.00

**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)

<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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. NEW AMERICANS FUND

Mailing Address P.O. Box 1988

City State Zip Code
Oak Park IL 60304

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼
PAC

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		02		2012

Transaction ID : SB23.278053

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. NEW YORK JOBS PAC

Mailing Address P.O. Box 763

City State Zip Code
Deer Park NY 11729

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼
PAC

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2012

Transaction ID : SB23.278054

Amount of Each Disbursement this Period

-5000.00

Full Name (Last, First, Middle Initial)

C. NEW YORK JOBS PAC

Mailing Address P.O. Box 763

City State Zip Code
Deer Park NY 11729

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼
PAC

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2012

Transaction ID : SB23.278055

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

5000.00

TOTAL This Period (last page this line number only)..... ▶

30000.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input checked="" 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)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Full Name (Last, First, Middle Initial)

A. AMALGAMATED BANK LOANS

Mailing Address P.O. Box 5660

City Hicksville State NY Zip Code 11802-5660

Purpose of Disbursement
Loan payment/11-21-12

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB26.280470

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.269663**
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

LOAN SOURCE Full Name (Last, First, Middle Initial) AMALGAMATED BANK	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 275 7th Avenue	
City New York State NY ZIP Code 10001	

Original Amount of Loan 3500000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 3500000.00
---------------------------------------	------------------------------------	---

TERMS

Date Incurred MM / DD / YYYY 09 / 28 / 2012	Date Due MM / DD / YYYY 03/31/2014	Interest Rate 4.25 % (apr)	Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
---	--	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶	[] 3500000.00
TOTALS This Period (last page in this line only)..... ▶	[]
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.272176**
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

LOAN SOURCE Full Name (Last, First, Middle Initial) AMALGAMATED BANK	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 275 7th Avenue	
City New York State NY ZIP Code 10001	

Original Amount of Loan 600000.00	Cumulative Payment To Date 600000.00	Balance Outstanding at Close of This Period 0.00
--------------------------------------	---	---

TERMS

Date Incurred MM / DD / YYYY 10 / 17 / 2012	Date Due MM / DD / YYYY 03/31/2014	Interest Rate 4.25 % (apr)	Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
---	--	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....▶	[] 0.00
TOTALS This Period (last page in this line only).....▶	[] 3500000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00011114 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee ENVISION COMMUNICATIONS	Date <div style="border: 1px solid black; padding: 2px;"> 10 / 23 / 2012 </div>
Mailing Address 2715 M Street Suite 100	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4687.00</div>
City Washington State DC Zip Code 20007	Transaction ID : SE.274566
Purpose of Expenditure Production cost 'NY-27' 'Chance'	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 27 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTOPHER CARL COLLINS	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">342454.65</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee MACK CROUNSE GROUP, LLC	Date <div style="border: 1px solid black; padding: 2px;"> 10 / 18 / 2012 </div>
Mailing Address 2001 N. Beauregard Street Suite 420	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">23865.06</div>
City Alexandria State VA Zip Code 22311	Transaction ID : SE.273702
Purpose of Expenditure MPND12004 - Medicare #4	Office Sought: <input type="checkbox"/> House State: ND <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD A BERG	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">131025.93</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">28552.06</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Signature LAURA REYES Date 03 / 14 / 2013
[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00011114 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee RED HORSE STRATEGIES		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 10 / 18 / 2012 </div>
Mailing Address 55 WASHINGTON STREET SUITE 624		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 35750.00 </div>
City BROOKLYN	State NY	Zip Code 11201
Purpose of Expenditure Mail 'NY-27' 'Collins 4'	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 27 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTOPHER CARL COLLINS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 158000.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.273697

Full Name (Last, First, Middle Initial) of Payee RED HORSE STRATEGIES		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y 10 / 18 / 2012 </div>
Mailing Address 55 WASHINGTON STREET SUITE 624		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 24500.00 </div>
City BROOKLYN	State NY	Zip Code 11201
Purpose of Expenditure Phone 'NY-27'	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 27 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: KATHLEEN COURTNEY HOCHUL		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 182500.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.273700

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 60250.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>

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LAURA REYES
[Electronically Filed]
Date
M M / D D / Y Y Y Y
 03 / 14 / 2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00011114 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee RED HORSE STRATEGIES		Date <div style="border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y 10 / 25 / 2012 </div>
Mailing Address 55 WASHINGTON STREET SUITE 624		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 35750.00 </div>
City BROOKLYN	State NY	Zip Code 11201
Purpose of Expenditure Mail 'NY-27' 'Collins 6'	Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;"> 004 </div>	Office Sought: <input checked="" type="checkbox"/> House State: <u>NY</u> <input type="checkbox"/> Senate District: <u>27</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTOPHER CARL COLLINS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 378204.65 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.274549

Full Name (Last, First, Middle Initial) of Payee RED HORSE STRATEGIES		Date <div style="border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2012 </div>
Mailing Address 55 WASHINGTON STREET SUITE 624		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 24500.00 </div>
City BROOKLYN	State NY	Zip Code 11201
Purpose of Expenditure Phone 'NY-27'	Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;"> 004 </div>	Office Sought: <input checked="" type="checkbox"/> House State: <u>NY</u> <input type="checkbox"/> Senate District: <u>27</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: KATHLEEN COURTNEY HOCHUL		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 402704.65 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.276275

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 60250.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 0.00 </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 60250.00 </div>

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LAURA REYES
[Electronically Filed]
Date 03 / 14 / 2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00011114 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee RED HORSE STRATEGIES		Date <div style="border: 1px solid black; padding: 2px;"> 10 / 30 / 2012 </div>
Mailing Address 55 WASHINGTON STREET SUITE 624		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35750.00</div>
City BROOKLYN	State NY	Zip Code 11201
Purpose of Expenditure Mail 'NY-27' 'Collins 7'	Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 27 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTOPHER CARL COLLINS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">438454.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.276290

Full Name (Last, First, Middle Initial) of Payee RED HORSE STRATEGIES		Date <div style="border: 1px solid black; padding: 2px;"> 11 / 01 / 2012 </div>
Mailing Address 55 WASHINGTON STREET SUITE 624		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">35750.00</div>
City BROOKLYN	State NY	Zip Code 11201
Purpose of Expenditure Mail 'NY-27' 'Collins 8'	Category/ Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 27 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHRISTOPHER CARL COLLINS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">474204.65</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.276302

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">71500.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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LAURA REYES
[Electronically Filed]
Date 03 / 14 / 2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00011114 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee RED HORSE STRATEGIES		Date <div style="border: 1px solid black; padding: 2px;"> 11 / 02 / 2012 </div>
Mailing Address 55 WASHINGTON STREET SUITE 624		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 8250.00 </div>
City BROOKLYN	State NY	Zip Code 11201
Purpose of Expenditure Phone 'NY-27'	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: <u>NY</u> <input type="checkbox"/> Senate District: <u>27</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: KATHLEEN COURTNEY HOCHUL		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 482454.65 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.276299

Full Name (Last, First, Middle Initial) of Payee RED HORSE STRATEGIES		Date <div style="border: 1px solid black; padding: 2px;"> 11 / 05 / 2012 </div>
Mailing Address 55 WASHINGTON STREET SUITE 624		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 2100.00 </div>
City BROOKLYN	State NY	Zip Code 11201
Purpose of Expenditure Phone 'NY-18'	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: <u>NY</u> <input type="checkbox"/> Senate District: <u>18</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SEAN PATRICK MALONEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 350604.49 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.276306

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 10350.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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LAURA REYES
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Date 03 / 14 / 2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00011114 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee THE CAMPAIGN GROUP		Date <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 10 / 23 / 2012 </div>
Mailing Address 1600 Locust Street		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">690075.00</div>
City Philadelphia State PA Zip Code 19103		
Purpose of Expenditure TV ad 'Nice'	Category/Type 004	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DEAN HELLER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1932825.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.276221

Full Name (Last, First, Middle Initial) of Payee THE CAMPAIGN GROUP		Date <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 10 / 23 / 2012 </div>
Mailing Address 1600 Locust Street		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9925.00</div>
City Philadelphia State PA Zip Code 19103		
Purpose of Expenditure Online ad 'Nice'	Category/Type 004	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DEAN HELLER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1942750.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.276222

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;">700000.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

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LAURA REYES
[Electronically Filed]
Date 03 / 14 / 2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E	FEC IDENTIFICATION NUMBER ▼ C C00011114
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name (Last, First, Middle Initial) of Payee WATERFRONT STRATEGIES		Date M M / D D / Y Y Y Y Y Y 10 / 23 / 2012
Mailing Address 3050 K Street NW Suite 100		Amount 6182.00
City Washington State DC Zip Code 20007	Transaction ID : SE.276231	
Purpose of Expenditure Production Cost - 30 TV 'Education-AFSCME'	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: VA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: GEORGE ALLEN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 747347.67		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee		Date M M / D D / Y Y Y Y Y Y
Mailing Address		Amount
City State Zip Code	Transaction ID : SE.276231	
Purpose of Expenditure	Category/ Type 	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	6182.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	2738665.44

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

LAURA REYES
Signature [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
03 / 14 / 2013