

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the linesAMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-  
ED

ADDRESS (number and street)

1625 L STREET NW

Check if different  
than previously  
reported. (ACC)

WASHINGTON

DC

20036

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00011114

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report(Q1)July 15  
Quarterly Report(Q2)October 15  
Quarterly Report(Q3)January 31  
Quarterly Report(YE)July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the  
State of

5. Covering Period

06

01

2008

through

06

30

2008

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

Type or Print Name of Treasurer

WILLIAM LUCY

Signature of Treasurer

Electronically Filed by WILLIAM LUCY

Date

07

18

2008

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

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

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

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2008</span>		950229.47
(b) Cash on Hand at Beginning of Reporting Period .....	1248337.77	
(c) Total Receipts (from Line 19) .....	637952.26	4665092.96
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1886290.03	5615322.43
7. Total Disbursements (from Line 31) .....	706177.76	4435210.16
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1180112.27	1180112.27
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	24335.95	

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

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

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

Report Covering the Period:

From:

M M D D Y Y W Y  
0 6 0 1 2 0 0 8

To:

M M D D Y Y W Y  
0 6 3 0 2 0 0 8

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	44860.47	169317.93
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	520171.76	3229111.19
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	565032.23	3398429.12
(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) ..... ➡	565032.23	3398429.12
12. Transfers From Affiliated/Other Party Committees .....	72510.26	237665.46
13. All Loans Received .....	0.00	1000000.00
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	26712.66
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	409.77	2285.72
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	637952.26	4665092.96
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	637952.26	4665092.96

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	287436.38	511039.79
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	287436.38	511039.79
22. Transfers to Affiliated/Other Party Committees.....	66000.00	686660.92
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	352150.00	659710.00
24. Independent Expenditure (use Schedule E) .....	564.43	1576970.03
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	1000000.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	26.95	829.42
(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)) .....	26.95	829.42
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	706177.76	4435210.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	706177.76	4435210.16

**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) .....	565032.23	3398429.12
34. Total Contribution Refunds (from Line 28(d)) .....	26.95	829.42
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	565005.28	3397599.70
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	287436.38	511039.79
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	26712.66
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	287436.38	484327.13

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

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

FOR LINE NUMBER: PAGE 6 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

KAREN ABBIATICI

Mailing Address 4602 W. Barlind

City

Pittsburgh

State

PA

Zip Code

15227

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME PA CN 13

Occupation

SECRETARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109230

Amount of Each Receipt this Period

43.68

**B.**

Full Name (Last, First, Middle Initial)

RICHARD ABELSON

Mailing Address 4315 N. LAKE DRIVE

City

SHOREWOOD

State

WI

Zip Code

53211

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 ▼

462.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.110466

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

RICHARD ABELSON

Mailing Address 4315 N. LAKE DRIVE

City

SHOREWOOD

State

WI

Zip Code

53211

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 ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.110467

Amount of Each Receipt this Period

42.00

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

127.68

**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 7 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

TRACEY ABMAN

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 ▼

635.92

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109493

Amount of Each Receipt this Period

80.28

**B.**

Full Name (Last, First, Middle Initial)

ADAM ACOSTA

Mailing Address 66 La Perla

City

Foothill Ranch

State

CA

Zip Code

92610

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CA CN 36

Occupation

POLITICAL ACTION REPRESENTATIVE III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.110224

Amount of Each Receipt this Period

67.32

**C.**

Full Name (Last, First, Middle Initial)

CATHYRN ACTON

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109824

Amount of Each Receipt this Period

50.00

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

197.60

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

DAVID ADAM

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

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 Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109376

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

DAVID ADAM

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109435

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

PARASETTA ADENIJI

Mailing Address 1003B S. Mechanic Street

City

Marion

State

IL

Zip Code

62959

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IL CN 31/SOIL

Occupation

EDUCATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109563

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)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

SHANA ADLERTON

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 ▼

320.54

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109661

Amount of Each Receipt this Period

29.65

**B.**

Full Name (Last, First, Middle Initial)

SHANA ADLERTON

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 ▼

350.19

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.109705

Amount of Each Receipt this Period

29.65

**C.**

Full Name (Last, First, Middle Initial)

MUSILIU ADE ALAGBALA

Mailing Address 5701 N. Sheridan  
#10A

City

Chicago

State

IL

Zip Code

60660

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 ▼

507.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109494

Amount of Each Receipt this Period

63.84

**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: PAGE 10 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

DIANN ALBRIGHT

Mailing Address 2405 South Fourth Sreet

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 ▼

367.56

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109231

Amount of Each Receipt this Period

61.26

**B.**

Full Name (Last, First, Middle Initial)

KENNETH L. ALLEN

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

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

973.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.110516

Amount of Each Receipt this Period

129.00

**C.**

Full Name (Last, First, Middle Initial)

KENNETH L. ALLEN

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

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

987.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109632

Amount of Each Receipt this Period

14.00

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

204.26

**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 11 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

MARVIN ANDERMAN

Mailing Address 88 Pheasant Run

City

Old Tappan

State

NJ

Zip Code

07675-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME NY LOC 1000

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.110147

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

CAROL A ANDERSON

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 ▼

544.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109000

Amount of Each Receipt this Period

49.49

**C.**

Full Name (Last, First, Middle Initial)

CAROL A ANDERSON

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 ▼

593.91

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.109113

Amount of Each Receipt this Period

49.49

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

348.98

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: PAGE 12 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

MICHAEL ANDREJCO

Mailing Address 5075 Pajabon Drive  
#201

City	State	Zip Code
Harrisburg	PA	17111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME PA CN 13Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.109232

Amount of Each Receipt this Period

66.30

**B.**

Full Name (Last, First, Middle Initial)

DAVID ANTLE

Mailing Address P.O. Box 1093

City	State	Zip Code
Moscow	PA	18444

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME PA CN 13Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

622.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.109233

Amount of Each Receipt this Period

103.80

**C.**

Full Name (Last, First, Middle Initial)

LOUISA ARCE

Mailing Address 303 Hawthorne Blvd.

City	State	Zip Code
Delaware	OH	43015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH CN 8Occupation  
CONTROLLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.07

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	5	/	2	0	0	8

Transaction ID: SA11AI.109571

Amount of Each Receipt this Period

82.82

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

252.92

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 13 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL L. ARTZ

Mailing Address 745 Irving Street, N.W.

City

Washington

State

DC

Zip Code

20010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

ASSOCIATE TO GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.14

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109001

Amount of Each Receipt this Period

35.01

**B.**

Full Name (Last, First, Middle Initial)

MICHAEL L. ARTZ

Mailing Address 745 Irving Street, N.W.

City

Washington

State

DC

Zip Code

20010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

ASSOCIATE TO GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.15

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109114

Amount of Each Receipt this Period

35.01

**C.**

Full Name (Last, First, Middle Initial)

LAURA M. ASKELIN

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109789

Amount of Each Receipt this Period

40.00

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

110.02

**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: PAGE 14 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JALADAH ASLAM

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109572

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

AL AUSTIN

Mailing Address 4562 Linden Avenue

City

Long Beach

State

CA

Zip Code

90807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CA CN 36

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.110225

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

RICHARD C. BADGER, II

Mailing Address P.O. Box 2825

City

Appleton

State

WI

Zip Code

54912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

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 Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110076

Amount of Each Receipt this Period

100.00

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

180.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

RICHARD C. BADGER, II

Mailing Address P.O. Box 2825

City

Appleton

State

WI

Zip Code

54912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.110110

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

CATHLEEN BAILEY

Mailing Address P O Box 12147

City

Olympia

State

WA

Zip Code

98508

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 ▼

231.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.110262

Amount of Each Receipt this Period

21.00

**C.**

Full Name (Last, First, Middle Initial)

CATHLEEN BAILEY

Mailing Address P O Box 12147

City

Olympia

State

WA

Zip Code

98508

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 ▼

252.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	6	/	2	0	0	8

Transaction ID: SA11AI.110340

Amount of Each Receipt this Period

21.00

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

142.00

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 16 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

PATRICIA A. BAILEY

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 ▼

371.88

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	0	8

Transaction ID: SA11AI.109759

Amount of Each Receipt this Period

61.58

**B.**

Full Name (Last, First, Middle Initial)

ANTHONY L. BAKKEN

Mailing Address 500 E Parish Street

City

Prair Du Chien

State

WI

Zip Code

53821

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 24/SOWI

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	0	8

Transaction ID: SA11AI.110564

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

ANTHONY L. BAKKEN

Mailing Address 500 E Parish Street

City

Prair Du Chien

State

WI

Zip Code

53821

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 24/SOWI

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	0	8

Transaction ID: SA11AI.110565

Amount of Each Receipt this Period

30.00

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

121.58

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 17 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

MATHEW BANAL

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.12

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109379

Amount of Each Receipt this Period

19.24

**B.**

Full Name (Last, First, Middle Initial)

MATHEW BANAL

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.36

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109438

Amount of Each Receipt this Period

19.24

**C.**

Full Name (Last, First, Middle Initial)

GINA M. BANKS

Mailing Address 946 Wilson Avenue

City

Columbus

State

OH

Zip Code

43206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 11/SOOH

Occupation

PUBLIC SAFETY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.10

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.109999

Amount of Each Receipt this Period

14.65

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

53.13

**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: PAGE 18 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

MARY ANNE BARNETT

Mailing Address 1155 Lakepointe

City

Grosse Pointe Park

State

MI

Zip Code

48230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, ORGANIZING DVLPT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

584.83

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109002

Amount of Each Receipt this Period

58.61

**B.**

Full Name (Last, First, Middle Initial)

MARY ANNE BARNETT

Mailing Address 1155 Lakepointe

City

Grosse Pointe Park

State

MI

Zip Code

48230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, ORGANIZING DVLPT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

643.44

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109115

Amount of Each Receipt this Period

58.61

**C.**

Full Name (Last, First, Middle Initial)

KATHLEEN BASS

Mailing Address RT 1, Box 108 C

City

Wayne City

State

IL

Zip Code

62895

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IL CN 31/SOIL

Occupation

CHILD WELFARE SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.64

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109564

Amount of Each Receipt this Period

38.08

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

155.30

**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 19 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

LINDA BATES

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 I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.67

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109003

Amount of Each Receipt this Period

26.06

**B.**

Full Name (Last, First, Middle Initial)

LINDA BATES

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 I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.109116

Amount of Each Receipt this Period

27.37

**C.**

Full Name (Last, First, Middle Initial)

MICHAEL D. BAUER

Mailing Address 23 Valley Forge Lane

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 ▼

503.59

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	5	/	2	0	0	8

Transaction ID: SA11AI.109573

Amount of Each Receipt this Period

84.76

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

138.19

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 20 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

PATRICIA BAUER

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 ▼

370.80

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109234

Amount of Each Receipt this Period

64.16

**B.**

Full Name (Last, First, Middle Initial)

HENRY BAYER

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 ▼

935.62

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109633

Amount of Each Receipt this Period

28.00

**C.**

Full Name (Last, First, Middle Initial)

HENRY BAYER

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 ▼

1046.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109495

Amount of Each Receipt this Period

110.58

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

202.74

**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 21 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

KENT BEAUCHAMP

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 ▼

606.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109496

Amount of Each Receipt this Period

76.56

**B.**

Full Name (Last, First, Middle Initial)

DENNIS BEAULIEU

Mailing Address 8802 Edison Lane

City

Clinton

State

MD

Zip Code

20735

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

MANAGER, FINANCIAL SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.84

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109004

Amount of Each Receipt this Period

40.08

**C.**

Full Name (Last, First, Middle Initial)

DENNIS BEAULIEU

Mailing Address 8802 Edison Lane

City

Clinton

State

MD

Zip Code

20735

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

MANAGER, FINANCIAL SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.92

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109117

Amount of Each Receipt this Period

40.08

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

156.72

**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 22 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

NEIL G. BEDNARCZYK

Mailing Address 7775 O'neil Road North

City

Keizer

State

OR

Zip Code

97303

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.110591

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

MICHAEL BEGATTO

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 ▼

526.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.109760

Amount of Each Receipt this Period

86.20

**C.**

Full Name (Last, First, Middle Initial)

JOSEPH BELLA

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 ▼

606.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109497

Amount of Each Receipt this Period

76.56

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

192.76

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER: PAGE 23 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

CHARLES BENN

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 ▼

556.53

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109235

Amount of Each Receipt this Period

85.62

**B.**

Full Name (Last, First, Middle Initial)

PETER J. BENNER

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 ▼

259.80

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.109749

Amount of Each Receipt this Period

43.30

**C.**

Full Name (Last, First, Middle Initial)

STACEY D. BENSON-TAYLOR

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 ▼

311.55

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109574

Amount of Each Receipt this Period

52.98

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

181.90

**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: PAGE 24 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

PAULA BENTLEY

Mailing Address 3701 Oakview Drive

City

Orlando

State

FL

Zip Code

32812

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 ▼

985.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109005

Amount of Each Receipt this Period

89.60

**B.**

Full Name (Last, First, Middle Initial)

PAULA BENTLEY

Mailing Address 3701 Oakview Drive

City

Orlando

State

FL

Zip Code

32812

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 ▼

1075.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109118

Amount of Each Receipt this Period

89.60

**C.**

Full Name (Last, First, Middle Initial)

STEVEN BERGER

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 ▼

250.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109825

Amount of Each Receipt this Period

41.68

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

220.88

**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: PAGE 25 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JACK BERNFELD

Mailing Address 8033 Excelsior Drive  
Suite B

City State Zip Code  
Madison WI 53717-1903

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME WI CN 40

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  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110078

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

JACK BERNFELD

Mailing Address 8033 Excelsior Drive  
Suite B

City State Zip Code  
Madison WI 53717-1903

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME WI CN 40

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.110112

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

JAMES BESTPITCH

Mailing Address 1410 Bush Street  
Suite A

City State Zip Code  
Baltimore MD 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 ▼

342.68

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.109838

Amount of Each Receipt this Period

52.72

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

152.72

**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

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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

DAVID BIELSKI

Mailing Address 4499 Battleridge Rd.

City

McDonald

State

PA

Zip Code

15057-3507

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 ▼

622.80

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109236

Amount of Each Receipt this Period

103.80

**B.**

Full Name (Last, First, Middle Initial)

JEFFREY BIGELOW

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 ▼

606.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109498

Amount of Each Receipt this Period

76.56

**C.**

Full Name (Last, First, Middle Initial)

KAREN BLACK

Mailing Address P.O. Box 304

City

Highspire

State

PA

Zip Code

17034-1409

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME PA CN 13

Occupation

EXECUTIVE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109237

Amount of Each Receipt this Period

100.18

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

280.54

**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: PAGE 27 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

ARCHER BLACKWELL

Mailing Address 8706 Jarwood Road

City

Baltimore

State

MD

Zip Code

21237

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 ▼

344.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.109839

Amount of Each Receipt this Period

52.96

**B.**

Full Name (Last, First, Middle Initial)

KORY BLAKE

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 ▼

261.95

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.109840

Amount of Each Receipt this Period

40.30

**C.**

Full Name (Last, First, Middle Initial)

LISA BLANTON

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 ▼

281.42

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109238

Amount of Each Receipt this Period

31.10

**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: PAGE 28 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

RONALD F. BLATT

Mailing Address 3969 Convenience Circle NW

City	State	Zip Code
Canton	OH	44718

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.109382

Amount of Each Receipt this Period

19.24

**B.**

Full Name (Last, First, Middle Initial)

RONALD F. BLATT

Mailing Address 3969 Convenience Circle NW

City	State	Zip Code
Canton	OH	44718

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.36

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	6	/	2	0	0	8

Transaction ID: SA11AI.109441

Amount of Each Receipt this Period

19.24

**C.**

Full Name (Last, First, Middle Initial)

JOHN A. BLESSING

Mailing Address 2119 Robinwood Avenue

City	State	Zip Code
Toledo	OH	43620

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH CN 8Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.92

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	5	/	2	0	0	8

Transaction ID: SA11AI.109576

Amount of Each Receipt this Period

51.32

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

89.80

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: PAGE 29 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

BARRY BOGARDE

Mailing Address 4303 Vermont Court

City

Harrisburg

State

PA

Zip Code

17112-9512

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME PA CN 13

Occupation

UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109240

Amount of Each Receipt this Period

100.18

**B.**

Full Name (Last, First, Middle Initial)

LYNDA L. BOLIN

Mailing Address 8 North 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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.12

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109384

Amount of Each Receipt this Period

19.24

**C.**

Full Name (Last, First, Middle Initial)

LYNDA L. BOLIN

Mailing Address 8 North 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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.36

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109443

Amount of Each Receipt this Period

19.24

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

138.66

**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 30 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

PAUL R. BOOTH

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 ▼

1977.13

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109006

Amount of Each Receipt this Period

179.74

**B.**

Full Name (Last, First, Middle Initial)

PAUL R. BOOTH

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 ▼

2156.87

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109119

Amount of Each Receipt this Period

179.74

**C.**

Full Name (Last, First, Middle Initial)

PAMELA BORDEN

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 ▼

215.42

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109663

Amount of Each Receipt this Period

19.72

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

379.20

**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 31 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

PAMELA BORDEN

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 ▼

235.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	0	8

Transaction ID: SA11AI.109707

Amount of Each Receipt this Period

19.72

**B.**

Full Name (Last, First, Middle Initial)

GLEN BOULDIN

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 ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	0	8

Transaction ID: SA11AI.109841

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

CAROL BOWSHIER

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 ▼

386.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	0	8

Transaction ID: SA11AI.109890

Amount of Each Receipt this Period

72.00

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

141.72

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 32 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

CAROL BOWSHIER

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 ▼

458.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.109913

Amount of Each Receipt this Period

72.00

**B.**

Full Name (Last, First, Middle Initial)

ERIC R. BOYD

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 ▼

308.54

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109577

Amount of Each Receipt this Period

52.57

**C.**

Full Name (Last, First, Middle Initial)

MIKE BRADLEY

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 ▼

233.87

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.109842

Amount of Each Receipt this Period

35.98

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

160.55

**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: PAGE 33 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JOSEPH BRAWNER

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  
AFSCME MD CN 982

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109826

Amount of Each Receipt this Period

38.34

**B.**

Full Name (Last, First, Middle Initial)

WILLIAM BRENNER

Mailing Address 3300 Old Trail Road

City State Zip Code  
York Haven PA 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 ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109241

Amount of Each Receipt this Period

66.30

**C.**

Full Name (Last, First, Middle Initial)

MARIA BRITTON

Mailing Address 12 Archer Avenue

City State Zip Code  
Springfield IL 62704

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 ▼

293.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109499

Amount of Each Receipt this Period

36.90

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

141.54

**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: PAGE 34 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

BILL BROCKMILLER

Mailing Address 1418 10th Street  
#204

City State Zip Code  
Lacrosse WI 54601

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
WI Dept of Workplace Dvlp-  
mnt

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.110566

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

BILL BROCKMILLER

Mailing Address 1418 10th Street  
#204

City State Zip Code  
Lacrosse WI 54601

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
WI Dept of Workplace Dvlp-  
mnt

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.110567

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

JEROME BROWN

Mailing Address 6917 Ridgeland Avenue

City State Zip Code  
Hammond IN 46324

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 ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109500

Amount of Each Receipt this Period

64.84

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

124.84

**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 35 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

SHARON L. BROWN

Mailing Address 1801 Cora Mill Road

City

Gallipolis

State

OH

Zip Code

45631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 11/SOOH

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
0	6	/	0	6	/	2	0	0	8

Transaction ID: SA11AI.109936

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

SHARON L. BROWN

Mailing Address 1801 Cora Mill Road

City

Gallipolis

State

OH

Zip Code

45631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 11/SOOH

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	0	/	2	0	0	8

Transaction ID: SA11AI.110003

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

TYLER BROWN

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 ▼

353.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.109501

Amount of Each Receipt this Period

60.56

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

100.56

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 36 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

WILLIAM H. BROWN

Mailing Address 17431 SE Forest Hill Drive

City

Damascus

State

OR

Zip Code

97089

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OR CN 75/SOOR

Occupation

ENVIRONMENTAL 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  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.110592

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

ALAN BRUBACHER

Mailing Address 2502 S. 4th 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

MAINTENANCE SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109242

Amount of Each Receipt this Period

43.68

**C.**

Full Name (Last, First, Middle Initial)

BARBARA A. BRUMFIELD

Mailing Address 211 St. Clair Drive

City

Fairview Heights

State

IL

Zip Code

62208

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 ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109502

Amount of Each Receipt this Period

50.00

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

123.68

**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 37 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL BUESING

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/SOMN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109856

Amount of Each Receipt this Period

44.00

**B.**

Full Name (Last, First, Middle Initial)

SHANE A. BUMGARNER

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 ▼

369.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109503

Amount of Each Receipt this Period

46.54

**C.**

Full Name (Last, First, Middle Initial)

DIANE B. BURKE

Mailing Address 6626 Potomac Avenue, A1

City

Alexandria

State

VA

Zip Code

22307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, LEGISLATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1199.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109007

Amount of Each Receipt this Period

109.00

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

199.54

**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  
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FOR LINE NUMBER: PAGE 38 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

DIANE B. BURKE

Mailing Address 6626 Potomac Avenue, A1

City

Alexandria

State

VA

Zip Code

22307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, LEGISLATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1308.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109120

Amount of Each Receipt this Period

109.00

**B.**

Full Name (Last, First, Middle Initial)

CAROL L. BURNETT

Mailing Address 1921 N. Westmoreland

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 ▼

509.46

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109008

Amount of Each Receipt this Period

46.88

**C.**

Full Name (Last, First, Middle Initial)

CAROL L. BURNETT

Mailing Address 1921 N. Westmoreland

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 ▼

556.34

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109121

Amount of Each Receipt this Period

46.88

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

202.76

**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  
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FOR LINE NUMBER: PAGE 39 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

DOUGLAS R. BURNETT

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

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109009

Amount of Each Receipt this Period

39.86

**B.**

Full Name (Last, First, Middle Initial)

DOUGLAS R. BURNETT

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

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.86

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109122

Amount of Each Receipt this Period

39.86

**C.**

Full Name (Last, First, Middle Initial)

MARY T. BURPEE

Mailing Address 609 W. Walworth Street

City

Elkhorn

State

WI

Zip Code

53121

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110114

Amount of Each Receipt this Period

30.00

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

109.72

**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 40 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

MARY T. BURPEE

Mailing Address 609 W. Walworth Street

City

Elkhorn

State

WI

Zip Code

53121

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

Occupation

ORGANIZER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.110555

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

SUSAN CAHEN

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

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 Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109385

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

SUSAN CAHEN

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109444

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: PAGE 41 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

PAULA J. CAIRA

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 I

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

569.02

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109010

Amount of Each Receipt this Period

51.73

**B.**

Full Name (Last, First, Middle Initial)

PAULA J. CAIRA

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 I

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.75

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109123

Amount of Each Receipt this Period

51.73

**C.**

Full Name (Last, First, Middle Initial)

NINA M. CALABRIA

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

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109386

Amount of Each Receipt this Period

25.00

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

128.46

**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: PAGE 42 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

NINA M. CALABRIA

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

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109445

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

ANGELA M. CALDWELL

Mailing Address 3664 Stirling Court

City

Cleveland

State

OH

Zip Code

44115-3091

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 ▼

370.16

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109579

Amount of Each Receipt this Period

62.30

**C.**

Full Name (Last, First, Middle Initial)

CHAD CALDWELL

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109387

Amount of Each Receipt this Period

25.00

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

112.30

**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 43 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

CHAD CALDWELL

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	6	/	2	0	0	8

Transaction ID: SA11AI.109446

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

ROBERT CALVIN

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 ▼

394.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.109243

Amount of Each Receipt this Period

66.30

**C.**

Full Name (Last, First, Middle Initial)

JOHN CAMERON

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 ▼

573.68

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.109504

Amount of Each Receipt this Period

72.44

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

163.74

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 44 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

TERESA CAMPBELL

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 ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109664

Amount of Each Receipt this Period

21.00

**B.**

Full Name (Last, First, Middle Initial)

TERESA CAMPBELL

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 ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.109708

Amount of Each Receipt this Period

21.00

**C.**

Full Name (Last, First, Middle Initial)

LINDA CANAN-STEPHENS

Mailing Address 9013 Advantage Ct.

City

Burke

State

VA

Zip Code

22003

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 ▼

1088.76

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109011

Amount of Each Receipt this Period

98.98

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

140.98

**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: PAGE 45 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

LINDA CANAN-STEPHENS

Mailing Address 9013 Advantage Ct.

City

Burke

State

VA

Zip Code

22003

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 ▼

1187.74

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109124

Amount of Each Receipt this Period

98.98

**B.**

Full Name (Last, First, Middle Initial)

RICHARD CAPONI

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 ▼

622.80

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109244

Amount of Each Receipt this Period

103.80

**C.**

Full Name (Last, First, Middle Initial)

MARCOS CARDENAS

Mailing Address 6927 Amherst Street

City

San Diego

State

CA

Zip Code

92109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CA CN 36

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.46

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.110228

Amount of Each Receipt this Period

48.78

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

251.56

**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 46 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)  
DENISE L. CAREY

Mailing Address P.O. Box 8154

City State Zip Code  
Columbus OH 43201

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME OH LOC 11/SOOH

Occupation  
OFFICE ASSISTANT 3

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.109939

Amount of Each Receipt this Period

16.00

**B.**

Full Name (Last, First, Middle Initial)  
DENISE L. CAREY

Mailing Address P.O. Box 8154

City State Zip Code  
Columbus OH 43201

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME OH LOC 11/SOOH

Occupation  
OFFICE ASSISTANT 3

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.110006

Amount of Each Receipt this Period

16.00

**C.**

Full Name (Last, First, Middle Initial)  
JOYCE CARLSON

Mailing Address 911 Aldine Street

City State Zip Code  
Saint Paul MN 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 ▼

380.62

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109794

Amount of Each Receipt this Period

61.66

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

93.66

**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 47 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

TAMMY D. CARSEY

Mailing Address 10453 Porter Lane

City

Athens

State

OH

Zip Code

45701

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 ▼

364.68

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109580

Amount of Each Receipt this Period

62.30

**B.**

Full Name (Last, First, Middle Initial)

LEROY CARTER

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 ▼

298.58

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109665

Amount of Each Receipt this Period

27.28

**C.**

Full Name (Last, First, Middle Initial)

LEROY CARTER

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 ▼

325.86

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.109709

Amount of Each Receipt this Period

27.28

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

116.86

**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 48 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

ANTHONY CASO

Mailing Address 9 Garden Court

City

Boston

State

MA

Zip Code

02113-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MA CN 93

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.52

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109634

Amount of Each Receipt this Period

41.67

**B.**

Full Name (Last, First, Middle Initial)

JEANETTE CHAVEZ

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

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.12

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109012

Amount of Each Receipt this Period

25.30

**C.**

Full Name (Last, First, Middle Initial)

JEANETTE CHAVEZ

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

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.42

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109125

Amount of Each Receipt this Period

25.30

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

92.27

**TOTAL** This Period (last page this line 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 49 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JUDY K CHOW

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  
AFSCME HI LOC 152

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.109339

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

LIN CHRIVIA

Mailing Address 2760 5th Avenue  
Suite 300

City State Zip Code  
San Diego CA 92103

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME CA LOC 3299 UDW

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.110449

Amount of Each Receipt this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

CAROLYN CLARK

Mailing Address 4415 Rolling Pine

City State Zip Code  
West Bloomfield MI 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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109666

Amount of Each Receipt this Period

25.00

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

200.00

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER: PAGE 50 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

CAROLYN CLARK

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.109710

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

DOROTHEA CLARK

Mailing Address 360 Brotzman Road

City

Binghamton

State

NY

Zip Code

13901

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME NY LOC 1000

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.65

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.110439

Amount of Each Receipt this Period

16.05

**C.**

Full Name (Last, First, Middle Initial)

KATIE Y. CLAY

Mailing Address 312 N. Francisco  
2nd Fl.

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 ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109505

Amount of Each Receipt this Period

64.84

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

105.89

**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: PAGE 51 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

DONALD L. CLINE

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/SOWA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.110272

Amount of Each Receipt this Period

22.50

**B.**

Full Name (Last, First, Middle Initial)

DONALD L. CLINE

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/SOWA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	6	/	2	0	0	8

Transaction ID: SA11AI.110350

Amount of Each Receipt this Period

22.50

**C.**

Full Name (Last, First, Middle Initial)

LINCOLN COHEN

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 ▼

533.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.109506

Amount of Each Receipt this Period

67.12

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

112.12

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 52 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

TRACEY CONATY

Mailing Address 1789 Lanier Place NW  
#42

City State Zip Code  
Washington DC 20009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME INT'L

Occupation  
ASSISTANT DIRECTOR, PUBLIC AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.96

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109014

Amount of Each Receipt this Period

45.63

**B.**

Full Name (Last, First, Middle Initial)

TRACEY CONATY

Mailing Address 1789 Lanier Place NW  
#42

City State Zip Code  
Washington DC 20009

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME INT'L

Occupation  
ASSISTANT DIRECTOR, PUBLIC AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.59

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109127

Amount of Each Receipt this Period

45.63

**C.**

Full Name (Last, First, Middle Initial)

DONALD W. CONLEY

Mailing Address 2695 Schaff Drive

City State Zip Code  
Columbus OH 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 ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109892

Amount of Each Receipt this Period

44.00

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

135.26

**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 53 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

DONALD W. CONLEY

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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.109915

Amount of Each Receipt this Period

44.00

**B.**

Full Name (Last, First, Middle Initial)

BEVERLY S. CONTEE

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 ▼

322.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109015

Amount of Each Receipt this Period

29.28

**C.**

Full Name (Last, First, Middle Initial)

BEVERLY S. CONTEE

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 ▼

352.03

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109128

Amount of Each Receipt this Period

29.95

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

103.23

**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: PAGE 54 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

ROBERT COOPER

Mailing Address 931 South Walnut Street

City

West Chester

State

PA

Zip Code

19382

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 ▼

622.80

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109246

Amount of Each Receipt this Period

103.80

**B.**

Full Name (Last, First, Middle Initial)

IVAN CORPENIO-CHAVEZ

Mailing Address 14621 Clovis Street

City

Victorville

State

CA

Zip Code

92394

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
City of Los Angeles/ CA  
CN 36

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 Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.110250

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

IVAN CORPENIO-CHAVEZ

Mailing Address 14621 Clovis Street

City

Victorville

State

CA

Zip Code

92394

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
City of Los Angeles/ CA  
CN 36

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.110251

Amount of Each Receipt this Period

20.00

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

143.80

**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: PAGE 55 / 360

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

BARBARA COUFAL

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

LEGISLATIVE AFFAIRS SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.68

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109016

Amount of Each Receipt this Period

45.63

**B.**

Full Name (Last, First, Middle Initial)

BARBARA COUFAL

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

LEGISLATIVE AFFAIRS SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.31

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109129

Amount of Each Receipt this Period

45.63

**C.**

Full Name (Last, First, Middle Initial)

CHRISTOPHER COWEN

Mailing Address 47 Douglas Street

City

Saint Paul

State

MN

Zip Code

55102

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 ▼

373.36

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109796

Amount of Each Receipt this Period

64.16

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

155.42

**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 56 / 360

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

DANNY CRAIG

Mailing Address 18945 Littlefield

City

Detroit

State

MI

Zip Code

48235

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 ▼

298.58

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.109667

Amount of Each Receipt this Period

27.28

**B.**

Full Name (Last, First, Middle Initial)

DANNY CRAIG

Mailing Address 18945 Littlefield

City

Detroit

State

MI

Zip Code

48235

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 ▼

325.86

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	0	/	2	0	0	8

Transaction ID: SA11AI.109711

Amount of Each Receipt this Period

27.28

**C.**

Full Name (Last, First, Middle Initial)

FRED CRAMER

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 ▼

265.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.109827

Amount of Each Receipt this Period

44.18

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: PAGE 57 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

STEVEN W. CRISS

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  
AFSCME HI LOC 152

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.109342

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

DICK CROFTER

Mailing Address 238 S. Oak Park Avenue  
#1F

City State Zip Code  
Oak Park IL 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 ▼

492.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109508

Amount of Each Receipt this Period

61.98

**C.**

Full Name (Last, First, Middle Initial)

TERRELL L. CROSS

Mailing Address 6805 Oak Creek Drive

City State Zip Code  
Columbus OH 43229

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME OH LOC 4

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 Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109390

Amount of Each Receipt this Period

20.00

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

121.98

**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: PAGE 58 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

TERRELL L. CROSS

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109449

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

JENNY C.F. CROUCHER

Mailing Address 300 Hardman Avenue So. Ste 2

City

South St. Paul

State

MN

Zip Code

55075-2469

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MN CN 5/ST. PAUL  
PS

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 Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110472

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

JAMES B. CULLEN

Mailing Address 1111 Morningside Avenue

City

Schenectady

State

NY

Zip Code

12308

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 ▼

714.71

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109017

Amount of Each Receipt this Period

65.61

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

125.61

**TOTAL** This Period (last page this line 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 59 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

JAMES B. CULLEN

Mailing Address 1111 Morningside Avenue

City

Schenectady

State

NY

Zip Code

12308

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 ▼

780.32

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.109130

Amount of Each Receipt this Period

65.61

**B.**

Full Name (Last, First, Middle Initial)

DEBORAH CURRIE

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 ▼

203.31

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.109247

Amount of Each Receipt this Period

34.76

**C.**

Full Name (Last, First, Middle Initial)

PATRICIA K. CURRIE

Mailing Address 740 Hilltop Lane

City

Toledo

State

OH

Zip Code

43615

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 ▼

321.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	5	/	2	0	0	8

Transaction ID: SA11AI.109584

Amount of Each Receipt this Period

51.32

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

151.69

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: PAGE 60 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

JIM DAHLING

Mailing Address ROUTE 1

City

BELLECHESTER

State

MN

Zip Code

55027

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MN CN 65

Occupation

REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.17

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.110460

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

JEFFREY DAINS

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 ▼

324.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109797

Amount of Each Receipt this Period

54.00

**C.**

Full Name (Last, First, Middle Initial)

WILLIAM DANDO

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 ▼

444.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.109248

Amount of Each Receipt this Period

74.02

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

158.02

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: PAGE 61 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

MARK R. DAVIS

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 ▼

201.94

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109585

Amount of Each Receipt this Period

50.99

**B.**

Full Name (Last, First, Middle Initial)

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 ▼

503.59

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109586

Amount of Each Receipt this Period

84.76

**C.**

Full Name (Last, First, Middle Initial)

EDGAR DEJESUS

Mailing Address 8 Ralph Street,  
First Floor

City

Bergenfield

State

NJ

Zip Code

07621

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 ▼

497.75

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109226

Amount of Each Receipt this Period

46.03

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

181.78

**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 62 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)  
EDGAR DEJESUS

Mailing Address 8 Ralph Street,  
First Floor

City State Zip Code  
Bergenfield NJ 07621

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 ▼

543.78

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109227

Amount of Each Receipt this Period

46.03

**B.**

Full Name (Last, First, Middle Initial)  
CHERYL DELL'AGLIO

Mailing Address 125 State Street

City State Zip Code  
Nicholson PA 18446

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 ▼

262.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109249

Amount of Each Receipt this Period

43.68

**C.**

Full Name (Last, First, Middle Initial)  
ARTHUR DELO JR.

Mailing Address 340 Montrose Ave.

City State Zip Code  
South Orange NJ 07079

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME NJ CN 52

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.110464

Amount of Each Receipt this Period

40.00

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

129.71

**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: PAGE 63 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL A. DELUKE

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 ▼

304.92

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109587

Amount of Each Receipt this Period

51.32

**B.**

Full Name (Last, First, Middle Initial)

JAYSON DEMAGALL

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

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 Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109391

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

JAYSON DEMAGALL

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109450

Amount of Each Receipt this Period

20.00

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

91.32

**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 64 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JOHN C. DEMPSEY

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 ▼

988.56

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109018

Amount of Each Receipt this Period

89.87

**B.**

Full Name (Last, First, Middle Initial)

JOHN C. DEMPSEY

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 ▼

1078.43

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109131

Amount of Each Receipt this Period

89.87

**C.**

Full Name (Last, First, Middle Initial)

CONSTANCE DERR

Mailing Address P.O. Box 116

City

Maspeth

State

NY

Zip Code

11378

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 ▼

529.86

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109019

Amount of Each Receipt this Period

48.17

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

227.91

**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: PAGE 65 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)  
CONSTANCE DERR

Mailing Address P.O. Box 116

City State Zip Code  
Maspeth NY 11378

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 ▼

578.03

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109132

Amount of Each Receipt this Period

48.17

**B.**

Full Name (Last, First, Middle Initial)  
GREG DEVEREUX

Mailing Address 3561 S.E. Kamilehe  
Point Road

City State Zip Code  
Shelton WA 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 ▼

584.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109635

Amount of Each Receipt this Period

14.00

**C.**

Full Name (Last, First, Middle Initial)  
GREG DEVEREUX

Mailing Address 3561 S.E. Kamilehe  
Point Road

City State Zip Code  
Shelton WA 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 ▼

684.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.110169

Amount of Each Receipt this Period

100.00

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

162.17

**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 66 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JUDY DEVOE

Mailing Address 3256 Ocean Beach Hwy

City

Longview

State

WA

Zip Code

98632

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.110170

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

WILLIAM A. DEVORE

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 ▼

324.99

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109588

Amount of Each Receipt this Period

54.70

**C.**

Full Name (Last, First, Middle Initial)

JEAN M DIEDERICH

Mailing Address 4741 Grand Ave. S No. 3

City

Minneapolis

State

MN

Zip Code

55419-5443

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HENNEPIN COUNTY

Occupation

PRINCIPAL CHILD SUPPORT OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1065.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110473

Amount of Each Receipt this Period

108.00

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

202.70

**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 67 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

RACHEL DIETZ

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 ▼

262.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109250

Amount of Each Receipt this Period

43.68

**B.**

Full Name (Last, First, Middle Initial)

JEANETTE DIFLORIO

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 ▼

299.85

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109669

Amount of Each Receipt this Period

27.28

**C.**

Full Name (Last, First, Middle Initial)

JEANETTE DIFLORIO

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 ▼

327.13

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.109713

Amount of Each Receipt this Period

27.28

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

98.24

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 68 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JOHN A. DINICOLA

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 ▼

492.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109570

Amount of Each Receipt this Period

61.98

**B.**

Full Name (Last, First, Middle Initial)

LINDA DITTES

Mailing Address 1409 Saltair Avenue  
Apt #103

City

Los Angeles

State

CA

Zip Code

90025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CA CN 57

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 Y  
0 6 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.110451

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

THELMA DODSON

Mailing Address 525 West Stratford Place  
#581

City

Chicago

State

IL

Zip Code

60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IL CN 31

Occupation

ACCOUNTANT II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.96

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109509

Amount of Each Receipt this Period

55.64

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

177.62

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

KEVIN DOEING

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 ▼

395.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109251

Amount of Each Receipt this Period

65.84

**B.**

Full Name (Last, First, Middle Initial)

PETER DOMPIERE

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 ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109671

Amount of Each Receipt this Period

21.00

**C.**

Full Name (Last, First, Middle Initial)

PETER DOMPIERE

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 ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.109715

Amount of Each Receipt this Period

21.00

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

107.84

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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Detailed Summary Page

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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

LORI DONALDSON

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 ▼

262.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109252

Amount of Each Receipt this Period

43.68

**B.**

Full Name (Last, First, Middle Initial)

ANDY DOUGLAS

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 ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109894

Amount of Each Receipt this Period

80.00

**C.**

Full Name (Last, First, Middle Initial)

ANDY DOUGLAS

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 ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.109917

Amount of Each Receipt this Period

80.00

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

203.68

**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 71 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

THOMAS C. DRABICK, Jr.

Mailing Address 982 Fortkort Dr.

City

Reynoldsburg

State

OH

Zip Code

43068-6803

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 ▼

570.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	0	8

Transaction ID: SA11AI.110556

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

THOMAS C. DRABICK, Jr.

Mailing Address 982 Fortkort Dr.

City

Reynoldsburg

State

OH

Zip Code

43068-6803

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 ▼

610.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	0	8

Transaction ID: SA11AI.109393

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

THOMAS C. DRABICK, Jr.

Mailing Address 982 Fortkort Dr.

City

Reynoldsburg

State

OH

Zip Code

43068-6803

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 ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	0	8

Transaction ID: SA11AI.109452

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)  
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FOR LINE NUMBER: PAGE 72 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

LAURA E. DRAKE

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 ▼

492.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109510

Amount of Each Receipt this Period

61.98

**B.**

Full Name (Last, First, Middle Initial)

PAMELA DUNCAN

Mailing Address 2895 Arrow Smith 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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109394

Amount of Each Receipt this Period

38.50

**C.**

Full Name (Last, First, Middle Initial)

PAMELA DUNCAN

Mailing Address 2895 Arrow Smith 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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

539.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109453

Amount of Each Receipt this Period

38.50

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

138.98

**TOTAL** This Period (last page this line number only) .....



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

DENNIS EAGLE

Mailing Address 5007 26th Ave., SE

City

Lacey

State

WA

Zip Code

98503

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 ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.110173

Amount of Each Receipt this Period

80.00

**B.**

Full Name (Last, First, Middle Initial)

LAURIE ECKELS

Mailing Address 42 Profio Road

City

McDonald

State

PA

Zip Code

15057

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 ▼

210.31

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109253

Amount of Each Receipt this Period

36.51

**C.**

Full Name (Last, First, Middle Initial)

THOMAS EDSTROM

Mailing Address 4106 N. Sacramento

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 ▼

575.92

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109511

Amount of Each Receipt this Period

72.52

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

189.03

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 74 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)  
MICHELLE EDWARDS

Mailing Address 1410 Bush Street  
Suite A

City State Zip Code  
Baltimore MD 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 ▼

234.91

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.109844

Amount of Each Receipt this Period

36.14

**B.**

Full Name (Last, First, Middle Initial)  
FLORENCE S. ESTES

Mailing Address 4328 N. Hermitage Avenue  
#1-W

City State Zip Code  
Chicago IL 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 ▼

492.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109512

Amount of Each Receipt this Period

61.98

**C.**

Full Name (Last, First, Middle Initial)  
GEORGE ESTRIGHT

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  
AFSCME PA CN 13

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.56

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109254

Amount of Each Receipt this Period

34.76

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

132.88

**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  
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FOR LINE NUMBER: PAGE 75 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

SUSAN ESTY

Mailing Address 2257 Park Hill Avenue

City State Zip Code  
 Baltimore MD 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 ▼

408.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109828

Amount of Each Receipt this Period

68.00

**B.**

Full Name (Last, First, Middle Initial)

MICHELLE R. EVANS

Mailing Address 10201 Galena Pointe Drive

City State Zip Code  
 Galena OH 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 ▼

386.55

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109590

Amount of Each Receipt this Period

65.06

**C.**

Full Name (Last, First, Middle Initial)

MARY FALK

Mailing Address 11236 Georgia Avenue North

City State Zip Code  
 North Champlin MN 55316-3800

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MN CN 5/SOMN

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109860

Amount of Each Receipt this Period

60.00

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

193.06

**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  
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FOR LINE NUMBER: PAGE 76 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

STEPHAN FANTAUZZO

Mailing Address 3840 N. Delaware Street

City

Indianapolis

State

IN

Zip Code

46205

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 ▼

649.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109021

Amount of Each Receipt this Period

59.00

**B.**

Full Name (Last, First, Middle Initial)

STEPHAN FANTAUZZO

Mailing Address 3840 N. Delaware Street

City

Indianapolis

State

IN

Zip Code

46205

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 ▼

708.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109134

Amount of Each Receipt this Period

59.00

**C.**

Full Name (Last, First, Middle Initial)

JAY FARRELL

Mailing Address 3800 Spruce Street

City

Philadelphia

State

PA

Zip Code

19104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNIVERSITY OF PENNSYLVANIA

Occupation

PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.110071

Amount of Each Receipt this Period

50.00

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

168.00

**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 77 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

RICHARD M. FELLER

Mailing Address 4705 Butterworth Place, NW

City

Washington

State

DC

Zip Code

20016

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 ▼

590.41

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109022

Amount of Each Receipt this Period

53.67

**B.**

Full Name (Last, First, Middle Initial)

RICHARD M. FELLER

Mailing Address 4705 Butterworth Place, NW

City

Washington

State

DC

Zip Code

20016

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 ▼

644.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109135

Amount of Each Receipt this Period

53.67

**C.**

Full Name (Last, First, Middle Initial)

CATHRYN FELLINGER

Mailing Address 2271 Edmonton Road

City

Columbus

State

OH

Zip Code

43229-4705

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 ▼

313.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109895

Amount of Each Receipt this Period

50.00

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

157.34

**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 78 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

CATHRYN FELLINGER

Mailing Address 2271 Edmonton Road

City

Columbus

State

OH

Zip Code

43229-4705

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 ▼

363.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.109918

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

RICHARD C. FERLAUTO

Mailing Address 2806 North Somerset 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, PENSION INVESTMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.47

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109023

Amount of Each Receipt this Period

49.49

**C.**

Full Name (Last, First, Middle Initial)

RICHARD C. FERLAUTO

Mailing Address 2806 North Somerset 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, PENSION INVESTMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.96

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109136

Amount of Each Receipt this Period

49.49

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

148.98

**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: PAGE 79 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JASPER FERRARO

Mailing Address 710 John Street

City

Rockford

State

IL

Zip Code

61103

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 ▼

507.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109513

Amount of Each Receipt this Period

63.84

**B.**

Full Name (Last, First, Middle Initial)

JOHN J. FILAK, Jr.

Mailing Address 6160 Clingan Road

City

Poland

State

OH

Zip Code

44514

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 ▼

503.59

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109591

Amount of Each Receipt this Period

84.76

**C.**

Full Name (Last, First, Middle Initial)

DAVID FILLMAN

Mailing Address 2520 Helen Street

City

Hatboro

State

PA

Zip Code

19040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME PA CN 13

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1243.16

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109255

Amount of Each Receipt this Period

128.86

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

277.46

**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: PAGE 80 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

DAVID FILLMAN

Mailing Address 2520 Helen Street

City

Hatboro

State

PA

Zip Code

19040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME PA CN 13

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1257.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	0	8

Transaction ID: SA11AI.109637

Amount of Each Receipt this Period

14.00

**B.**

Full Name (Last, First, Middle Initial)

DIANE FIRKUS

Mailing Address 82203 Trails End Road

City

Bruno

State

MN

Zip Code

55712

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MN CN 5/SOMN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.54

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	0	8

Transaction ID: SA11AI.109799

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

DIANE FIRKUS

Mailing Address 82203 Trails End Road

City

Bruno

State

MN

Zip Code

55712

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MN CN 5/SOMN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.82

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	0	8

Transaction ID: SA11AI.109861

Amount of Each Receipt this Period

28.28

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

92.28

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 81 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

GERALD FIRKUS

Mailing Address 44935 Deerfield Rd.

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/SOMN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.81

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109862

Amount of Each Receipt this Period

34.74

**B.**

Full Name (Last, First, Middle Initial)

WILLIAM F. FOGLE

Mailing Address 1534 Bernath Parkway

City

Toledo

State

OH

Zip Code

43615

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 ▼

370.16

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109592

Amount of Each Receipt this Period

62.30

**C.**

Full Name (Last, First, Middle Initial)

NANETTE FOLSOM

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

BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109397

Amount of Each Receipt this Period

25.00

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

122.04

**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 82 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

NANETTE FOLSOM

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

BUS DRIVER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109456

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

JEFFREY S. FOWLER

Mailing Address 7664 Hinton Avenue South  
Apt. #9

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109800

Amount of Each Receipt this Period

44.80

**C.**

Full Name (Last, First, Middle Initial)

MICHAEL E. FOX

Mailing Address 3818 Sheffield Lane

City

Harrisburg

State

PA

Zip Code

17110-3044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME PA CN 13

Occupation

COUNCIL DIRECTOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

972.80

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109256

Amount of Each Receipt this Period

103.80

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

173.60

**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 83 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL E. FOX

Mailing Address 3818 Sheffield Lane

City

Harrisburg

State

PA

Zip Code

17110-3044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME PA CN 13

Occupation

COUNCIL DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1042.80

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109638

Amount of Each Receipt this Period

70.00

**B.**

Full Name (Last, First, Middle Initial)

WALTER FRANCIS

Mailing Address 1002 Cypress Rd.

City

Wilmington

State

DE

Zip Code

19810

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 ▼

229.56

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109257

Amount of Each Receipt this Period

38.26

**C.**

Full Name (Last, First, Middle Initial)

GARETH J. FRANK

Mailing Address 2309 Parkway

City

Cheverly

State

MD

Zip Code

20785

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

ASSOC DIRECTOR ORGANIZING & FIELD SVCS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.41

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109024

Amount of Each Receipt this Period

53.67

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

161.93

**TOTAL** This Period (last page this line 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 84 / 360

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-  
ED**A.**Full Name (Last, First, Middle Initial)  
GARETH J. FRANK

Mailing Address 2309 Parkway

City	State	Zip Code
Cheverly	MD	20785

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'LOccupation  
ASSOC DIRECTOR ORGANIZING & FIELD SVCS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

644.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	0	8

Transaction ID: SA11AI.109137

Amount of Each Receipt this Period

53.67

**B.**Full Name (Last, First, Middle Initial)  
BRIAN FUITEN

Mailing Address 445 Mayfair Drive

City	State	Zip Code
Lincoln	IL	62656

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IL CN 31Occupation  
DATA PROCESSING SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: SA11AI.109514

Amount of Each Receipt this Period

70.00

**C.**Full Name (Last, First, Middle Initial)  
GAIL FUJIMOTOMailing 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  
AFSCME HI LOC 152Occupation  
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
0	6		1	7		2	0	0	8

Transaction ID: SA11AI.109345

Amount of Each Receipt this Period

30.00

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

153.67

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  
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FOR LINE NUMBER: PAGE 85 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

AMY H. GALATIAN

Mailing Address 10925 Southern Highlands Parkway

City

Las Vegas

State

NV

Zip Code

89141

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 ▼

373.02

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109025

Amount of Each Receipt this Period

34.08

**B.**

Full Name (Last, First, Middle Initial)

AMY H. GALATIAN

Mailing Address 10925 Southern Highlands Parkway

City

Las Vegas

State

NV

Zip Code

89141

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 ▼

407.10

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109138

Amount of Each Receipt this Period

34.08

**C.**

Full Name (Last, First, Middle Initial)

KERRI GALLAGHER

Mailing Address 8 South Main Street

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:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.06

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109258

Amount of Each Receipt this Period

38.26

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

106.42

**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 86 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

JOHN GALUSKA

Mailing Address 205 Green Vista Drive

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:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.31

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.109259

Amount of Each Receipt this Period

38.26

**B.**

Full Name (Last, First, Middle Initial)

DEBRA L. GARCIA

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 OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.92

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	5	/	2	0	0	8

Transaction ID: SA11AI.109593

Amount of Each Receipt this Period

51.32

**C.**

Full Name (Last, First, Middle Initial)

ALBERT GARRETT

Mailing Address 18491 Lauder

City

Detroit

State

MI

Zip Code

48235-2738

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MI CN 25

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1227.10

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.109673

Amount of Each Receipt this Period

110.20

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

199.78

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  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

ALBERT GARRETT

Mailing Address 18491 Lauder

City

Detroit

State

MI

Zip Code

48235-2738

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MI CN 25

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1337.30

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.109717

Amount of Each Receipt this Period

110.20

**B.**

Full Name (Last, First, Middle Initial)

ALBERT GARRETT

Mailing Address 18491 Lauder

City

Detroit

State

MI

Zip Code

48235-2738

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MI CN 25

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1351.30

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109639

Amount of Each Receipt this Period

14.00

**C.**

Full Name (Last, First, Middle Initial)

DAVID GASH

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 ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109260

Amount of Each Receipt this Period

66.30

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

190.50

**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 88 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

RAGLAN GEORGE

Mailing Address 75 Varick Street  
Suite #1404

City State Zip Code  
New York NY 10013-9902

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME NY CN 1707

Occupation  
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

783.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110557

Amount of Each Receipt this Period

95.76

**B.**

Full Name (Last, First, Middle Initial)

RAGLAN GEORGE

Mailing Address 75 Varick Street  
Suite #1404

City State Zip Code  
New York NY 10013-9902

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME NY CN 1707

Occupation  
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

797.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109640

Amount of Each Receipt this Period

14.00

**C.**

Full Name (Last, First, Middle Initial)  
RAGLAN GEORGE

Mailing Address 75 Varick Street  
Suite #1404

City State Zip Code  
New York NY 10013-9902

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME NY CN 1707

Occupation  
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

893.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.110148

Amount of Each Receipt this Period

95.76

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

205.52

**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 89 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

THOMAS GIBBS

Mailing Address 152 Upper Claar Rd.

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:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109261

Amount of Each Receipt this Period

66.30

**B.**

Full Name (Last, First, Middle Initial)

LEE W. GIERKE

Mailing Address 8033 Excelsior Drive  
#B

City

Madison

State

WI

Zip Code

53717-1903

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110083

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

LEE W. GIERKE

Mailing Address 8033 Excelsior Drive  
#B

City

Madison

State

WI

Zip Code

53717-1903

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

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 Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.110117

Amount of Each Receipt this Period

50.00

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

166.30

**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 90 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

SAMUEL J. GIERYN

Mailing Address 222 Crocker Street

City

Mazomanie

State

WI

Zip Code

53560

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

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 Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.110118

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

LENORA R. GILES

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

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 Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109398

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

LENORA R. GILES

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109457

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: PAGE 91 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

KAREN GILGOFF

Mailing Address 3003 Van Ness Street, NW  
#W1023

City State Zip Code  
Washington DC 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 ▼

618.53

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109026

Amount of Each Receipt this Period

58.96

**B.**

Full Name (Last, First, Middle Initial)

KAREN GILGOFF

Mailing Address 3003 Van Ness Street, NW  
#W1023

City State Zip Code  
Washington DC 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 ▼

677.49

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109139

Amount of Each Receipt this Period

58.96

**C.**

Full Name (Last, First, Middle Initial)

GEORGE GISIN

Mailing Address 1410 Bush Street  
Suite A

City State Zip Code  
Baltimore MD 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 ▼

327.86

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.109845

Amount of Each Receipt this Period

50.44

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

168.36

**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 92 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

PATRICIA GLYNN

Mailing Address 55 Aberdeen Avenue

City

Cambridge

State

MA

Zip Code

02138-4646

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 ▼

979.67

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109028

Amount of Each Receipt this Period

43.61

**B.**

Full Name (Last, First, Middle Initial)

PATRICIA GLYNN

Mailing Address 55 Aberdeen Avenue

City

Cambridge

State

MA

Zip Code

02138-4646

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 ▼

1023.28

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109141

Amount of Each Receipt this Period

43.61

**C.**

Full Name (Last, First, Middle Initial)

ALICE GOFF

Mailing Address 8124 Alix Ave.

City

Los Angeles

State

CA

Zip Code

90001-3517

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CA CN 36

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.110229

Amount of Each Receipt this Period

40.00

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

127.22

**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

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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

ALICE GOFF

Mailing Address 8124 Alix Ave.

City

Los Angeles

State

CA

Zip Code

90001-3517

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CA CN 36

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109641

Amount of Each Receipt this Period

14.00

**B.**

Full Name (Last, First, Middle Initial)

MARK GOLDEN

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 ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109262

Amount of Each Receipt this Period

66.30

**C.**

Full Name (Last, First, Middle Initial)

RICHARD GOLLIN

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 ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109642

Amount of Each Receipt this Period

10.00

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

90.30

**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  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

RICHARD GOLLIN

Mailing Address 900 Randolph Place

City

State

Zip Code

Union

NJ

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 ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.110465

Amount of Each Receipt this Period

80.00

**B.**

Full Name (Last, First, Middle Initial)

JAMES GOLLINGS

Mailing Address 6805 Oak Creek Drive

City

State

Zip Code

Columbus

OH

43229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

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 Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109399

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

JAMES GOLLINGS

Mailing Address 6805 Oak Creek Drive

City

State

Zip Code

Columbus

OH

43229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109458

Amount of Each Receipt this Period

20.00

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

120.00

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER: PAGE 95 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

SHERRYL GORDON

Mailing Address 3 Longwood Lane

City

Columbus

State

NJ

Zip Code

08022-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME NJ CN 1

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109643

Amount of Each Receipt this Period

14.00

**B.**

Full Name (Last, First, Middle Initial)

MARY M. GOULDING

Mailing Address 2483 Hemlock Court

City

Green Bay

State

WI

Zip Code

54311

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

Occupation

SECRETARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110085

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

MARY M. GOULDING

Mailing Address 2483 Hemlock Court

City

Green Bay

State

WI

Zip Code

54311

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

Occupation

SECRETARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110143

Amount of Each Receipt this Period

35.00

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

109.00

**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 96 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

MARY M. GOULDING

Mailing Address 2483 Hemlock Court

City

Green Bay

State

WI

Zip Code

54311

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

Occupation

SECRETARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.110119

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

JOHN GRABEL

Mailing Address 1725 Fremont Avenue

City

Madison

State

WI

Zip Code

53704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WI CN 11

Occupation

REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.36

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110430

Amount of Each Receipt this Period

51.06

**C.**

Full Name (Last, First, Middle Initial)

ELIZABETH GRACE

Mailing Address 4673 Bailey Road

City

Dimondale

State

MI

Zip Code

48821

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 ▼

215.42

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109674

Amount of Each Receipt this Period

19.72

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

130.78

**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 97 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

ELIZABETH GRACE

Mailing Address 4673 Bailey Road

City

Dimondale

State

MI

Zip Code

48821

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 ▼

235.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	0	/	2	0	0	8

Transaction ID: SA11AI.109718

Amount of Each Receipt this Period

19.72

**B.**

Full Name (Last, First, Middle Initial)

STEPHEN M. GRAHAM

Mailing Address 10105 Baltimore Avenue  
Apt. 3407

City

College Park

State

MD

Zip Code

20740

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

PROJECT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.84

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109029

Amount of Each Receipt this Period

40.08

**C.**

Full Name (Last, First, Middle Initial)

STEPHEN M. GRAHAM

Mailing Address 10105 Baltimore Avenue  
Apt. 3407

City

College Park

State

MD

Zip Code

20740

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

PROJECT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.92

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.109142

Amount of Each Receipt this Period

40.08

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

99.88

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: PAGE 98 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

PATRICIA K. GRANT

Mailing Address 17420 Aquasco Farm Road

City

Aquasco

State

MD

Zip Code

20608

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 ▼

381.05

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109030

Amount of Each Receipt this Period

35.56

**B.**

Full Name (Last, First, Middle Initial)

PATRICIA K. GRANT

Mailing Address 17420 Aquasco Farm Road

City

Aquasco

State

MD

Zip Code

20608

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 ▼

416.61

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109143

Amount of Each Receipt this Period

35.56

**C.**

Full Name (Last, First, Middle Initial)

R. SEAN GRAYSON

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

GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

613.02

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109594

Amount of Each Receipt this Period

103.18

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

174.30

**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 99 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JONATHAN GREBNER

Mailing Address 840 Randolph Avenue

City

Saint Paul

State

MN

Zip Code

55102

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 ▼

368.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109801

Amount of Each Receipt this Period

56.59

**B.**

Full Name (Last, First, Middle Initial)

PATRICIA GREEN

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 ▼

218.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.109263

Amount of Each Receipt this Period

87.36

**C.**

Full Name (Last, First, Middle Initial)

PATRICIA GREEN

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 ▼

262.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.110597

Amount of Each Receipt this Period

43.68

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

187.63

**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: PAGE 100 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

RONALD J. GREEN

Mailing Address 16425 Bubbling View Drive

City

Cerritos

State

CA

Zip Code

90703

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
AFSCME CA CN 36/Local 3634

Occupation

TRANSIT SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	0	8

Transaction ID: SA11AI.110255

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

RONALD J. GREEN

Mailing Address 16425 Bubbling View Drive

City

Cerritos

State

CA

Zip Code

90703

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
AFSCME CA CN 36/Local 3634

Occupation

TRANSIT SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	0	8

Transaction ID: SA11AI.110256

Amount of Each Receipt this Period

800.00

**C.**

Full Name (Last, First, Middle Initial)

FRANKLIN GREENE

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 ▼

215.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	0	8

Transaction ID: SA11AI.109675

Amount of Each Receipt this Period

19.72

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

1019.72

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 101 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

FRANKLIN GREENE

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 ▼

235.14

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.109719

Amount of Each Receipt this Period

19.72

**B.**

Full Name (Last, First, Middle Initial)

STEVE GRETSUK

Mailing Address 7803 Desiree Street

City

Alexandria

State

VA

Zip Code

22315

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

DIRECTOR, INFORMATION SYSTEMS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

849.54

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109031

Amount of Each Receipt this Period

77.23

**C.**

Full Name (Last, First, Middle Initial)

STEVE GRETSUK

Mailing Address 7803 Desiree Street

City

Alexandria

State

VA

Zip Code

22315

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

DIRECTOR, INFORMATION SYSTEMS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

926.77

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109144

Amount of Each Receipt this Period

77.23

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

174.18

**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 102 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

KIMBERLY GRIFFIN

Mailing Address 4109 Silver Park Terrace

City

Suitland

State

MD

Zip Code

20746

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 ▼

280.90

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	0	8

Transaction ID: SA11AI.109032

Amount of Each Receipt this Period

25.54

**B.**

Full Name (Last, First, Middle Initial)

KIMBERLY GRIFFIN

Mailing Address 4109 Silver Park Terrace

City

Suitland

State

MD

Zip Code

20746

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 ▼

306.44

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	0	8

Transaction ID: SA11AI.109145

Amount of Each Receipt this Period

25.54

**C.**

Full Name (Last, First, Middle Initial)

ALLA GRIFFING

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

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	0	8

Transaction ID: SA11AI.110175

Amount of Each Receipt this Period

42.00

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

93.08

**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 103 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

DANIEL GROVE

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 ▼

394.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.109264

Amount of Each Receipt this Period

66.30

**B.**

Full Name (Last, First, Middle Initial)

CAROL GUTHRIE

Mailing Address 241 S San Gabriel Loop

City

Liberty Hill

State

TX

Zip Code

78642-5747

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME TX LOC 1624

Occupation

UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.110424

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

JON A. GWYNNE

Mailing Address 2052 Sherwood Lake Drive

City

Schereville

State

IN

Zip Code

46375

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 ▼

369.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.109516

Amount of Each Receipt this Period

46.54

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

127.84

**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 104 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL A. HAGGARD

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 ▼

266.32

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.109761

Amount of Each Receipt this Period

40.80

**B.**

Full Name (Last, First, Middle Initial)

DERRYL HALL

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109400

Amount of Each Receipt this Period

19.24

**C.**

Full Name (Last, First, Middle Initial)

DERRYL HALL

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.36

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109459

Amount of Each Receipt this Period

19.24

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

79.28

**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 105 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JENNIFER E. HALL

Mailing Address 1205 Sweeney Drive  
Apt. 6

City State Zip Code  
Middleton WI 53562

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 ▼

325.83

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109033

Amount of Each Receipt this Period

29.62

**B.**

Full Name (Last, First, Middle Initial)

JENNIFER E. HALL

Mailing Address 1205 Sweeney Drive  
Apt. 6

City State Zip Code  
Middleton WI 53562

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 ▼

355.45

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109146

Amount of Each Receipt this Period

29.62

**C.**

Full Name (Last, First, Middle Initial)

DAWN HANDY

Mailing Address 2560 Edmondson Avenue

City State Zip Code  
Baltimore MD 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 ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.109846

Amount of Each Receipt this Period

40.00

**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: PAGE 106 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

EUGINE HANKS

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 ▼

215.07

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	9	/	2	0	0	8

Transaction ID: SA11AI.109762

Amount of Each Receipt this Period

32.88

**B.**

Full Name (Last, First, Middle Initial)

RYAN HANSON

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 ▼

250.98

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109802

Amount of Each Receipt this Period

42.00

**C.**

Full Name (Last, First, Middle Initial)

YVONNE J. HARGROVE

Mailing Address 12832 Evansport PI

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 ▼

338.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109034

Amount of Each Receipt this Period

30.75

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

105.63

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: PAGE 107 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

YVONNE J. HARGROVE

Mailing Address 12832 Evansport PI

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 ▼

369.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.109147

Amount of Each Receipt this Period

30.75

**B.**

Full Name (Last, First, Middle Initial)

WILLIAM HARPER

Mailing Address 5073 Rohns

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 SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.109677

Amount of Each Receipt this Period

30.01

**C.**

Full Name (Last, First, Middle Initial)

WILLIAM HARPER

Mailing Address 5073 Rohns

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 SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.71

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	0	/	2	0	0	8

Transaction ID: SA11AI.109721

Amount of Each Receipt this Period

30.01

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

90.77

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: PAGE 108 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

MARK HARRINGTON

Mailing Address 1371 Goldmill Way

City

Columbus

State

OH

Zip Code

43204

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.110469

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

LORA HARRIS

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 ▼

492.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109517

Amount of Each Receipt this Period

61.98

**C.**

Full Name (Last, First, Middle Initial)

LOUIS HARRIS

Mailing Address 1516 172nd Street East

City

Spanaway

State

WA

Zip Code

98387

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CA CN 36

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.110230

Amount of Each Receipt this Period

62.40

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

374.38

**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: PAGE 109 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)  
RAYMOND HARRIS

Mailing Address 3 Indigo Court

City State Zip Code  
Bolingbrook IL 60440

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME IL CN 31

Occupation  
DIRECTOR INT GOVERNMENT RELATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

558.16

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109518

Amount of Each Receipt this Period

70.28

**B.**

Full Name (Last, First, Middle Initial)  
STEPHANIE HARRISON

Mailing Address 7824 Main Falls Creek

City State Zip Code  
Catonsville MD 21228

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME INT'L

Occupation  
EXECUTIVE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

897.26

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109035

Amount of Each Receipt this Period

81.57

**C.**

Full Name (Last, First, Middle Initial)  
STEPHANIE HARRISON

Mailing Address 7824 Main Falls Creek

City State Zip Code  
Catonsville MD 21228

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME INT'L

Occupation  
EXECUTIVE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

978.83

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109148

Amount of Each Receipt this Period

81.57

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

233.42

**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 110 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

EDWARD HARTMAN

Mailing Address 710 County Road

City

Proctorville

State

WV

Zip Code

45669

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WV CN 77

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	6	/	2	0	0	8

Transaction ID: SA11AI.110590

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

MICHAEL D. HATCHER

Mailing Address P. O. Box 231

City

Monticello

State

KY

Zip Code

42633

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 ▼

626.23

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109036

Amount of Each Receipt this Period

56.93

**C.**

Full Name (Last, First, Middle Initial)

MICHAEL D. HATCHER

Mailing Address P. O. Box 231

City

Monticello

State

KY

Zip Code

42633

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 ▼

683.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.109149

Amount of Each Receipt this Period

56.93

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

163.86

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 111 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JIMMIE HEARNS

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 ▼

355.15

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109679

Amount of Each Receipt this Period

32.81

**B.**

Full Name (Last, First, Middle Initial)

JIMMIE HEARNS

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 ▼

387.96

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.109723

Amount of Each Receipt this Period

32.81

**C.**

Full Name (Last, First, Middle Initial)

PHILIP W. HELMS

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 ▼

559.11

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109680

Amount of Each Receipt this Period

50.86

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

116.48

**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 112 / 360

(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, QUALIFI-  
ED**A.**Full Name (Last, First, Middle Initial)  
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  
AFSCME MI CN 25Occupation  
EDITOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.97

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	0	/	2	0	0	8

Transaction ID: SA11AI.109724

Amount of Each Receipt this Period

50.86

**B.**Full Name (Last, First, Middle Initial)  
SIDNEY L. HELSETH

Mailing Address 6554 Craig Avenue

City	State	Zip Code
Inver Grove Hgts.	MN	55076-1700

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MN CN 5/CN14Occupation  
BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109803

Amount of Each Receipt this Period

66.72

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

Mailing Address 2040 Spring Valley Road

City	State	Zip Code
Pittsburgh	PA	15243-1422

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME PA CN 13Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.109266

Amount of Each Receipt this Period

66.30

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

183.88

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: PAGE 113 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

KAY HENDERSON

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  
AFSCME WA CN 28/SOWA

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  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.110287

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

KAY HENDERSON

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  
AFSCME WA CN 28/SOWA

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  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.110365

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

RICK HENSON

Mailing Address 317 South F Street

City State Zip Code  
Springfield OR 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 ▼

485.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.110523

Amount of Each Receipt this Period

85.00

**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: PAGE 114 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

DANA E. HERMAN

Mailing Address 30 E. Broad Street

City

Columbus

State

OH

Zip Code

43215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 11/SOCH

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  
0 6 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.109956

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

DANA E. HERMAN

Mailing Address 30 E. Broad Street

City

Columbus

State

OH

Zip Code

43215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 11/SOCH

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  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.110023

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

ELIZABETH C. HO

Mailing Address 1511 Kalanawai Street

City

Honolulu

State

HI

Zip Code

96821

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 ▼

479.67

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109037

Amount of Each Receipt this Period

43.61

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

83.61

**TOTAL** This Period (last page this line 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 115 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

ELIZABETH C. HO

Mailing Address 1511 Kalaniewai Street

City

Honolulu

State

HI

Zip Code

96821

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 ▼

523.28

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109150

Amount of Each Receipt this Period

43.61

**B.**

Full Name (Last, First, Middle Initial)

MARGARET HOAK

Mailing Address P.O. Box 264

City

Warren

State

PA

Zip Code

16365

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 ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109268

Amount of Each Receipt this Period

66.30

**C.**

Full Name (Last, First, Middle Initial)

KARLA HODGE

Mailing Address 1212 N. 14th Street

City

Harrisburg

State

PA

Zip Code

17103

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 ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109269

Amount of Each Receipt this Period

66.30

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

176.21

**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: PAGE 116 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

JOHN HOHLHEPP

Mailing Address 615 S. 2nd Street

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 ▼

478.43

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: SA11AI.109520

Amount of Each Receipt this Period

60.56

**B.**

Full Name (Last, First, Middle Initial)

DANNY HOMAN

Mailing Address 3000 Isabella

City

Sioux City

State

IA

Zip Code

51103-2134

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IA CN 61

Occupation

REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

996.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	0	8

Transaction ID: SA11AI.110558

Amount of Each Receipt this Period

71.64

**C.**

Full Name (Last, First, Middle Initial)

DANNY HOMAN

Mailing Address 3000 Isabella

City

Sioux City

State

IA

Zip Code

51103-2134

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IA CN 61

Occupation

REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1138.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	0	8

Transaction ID: SA11AI.109644

Amount of Each Receipt this Period

142.00

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

274.20

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 117 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

JESSIE F R HOOMALU

Mailing Address P. O. BOX 908

City

Haleiwa

State

HI

Zip Code

96712

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 ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	0	8

Transaction ID: SA11AI.109347

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

JOHN D. HORN

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	0	8

Transaction ID: SA11AI.109401

Amount of Each Receipt this Period

19.24

**C.**

Full Name (Last, First, Middle Initial)

JOHN D. HORN

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.88

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	0	8

Transaction ID: SA11AI.109460

Amount of Each Receipt this Period

19.24

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

88.48

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 118 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

ROBERT J. HUBBARD

Mailing Address 150 S. Iowa Avenue

City

State

Zip Code

Payette

ID

83661

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OR CN 75/SOOR

Occupation

SECURITY GUARD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	5	/	2	0	0	8

Transaction ID: SA11AI.110541

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

SAMUEL M. HUGGINS

Mailing Address 235 Scenic Hill Drive

City

State

Zip Code

Carnegie

PA

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 ▼

239.03

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109038

Amount of Each Receipt this Period

21.73

**C.**

Full Name (Last, First, Middle Initial)

SAMUEL M. HUGGINS

Mailing Address 235 Scenic Hill Drive

City

State

Zip Code

Carnegie

PA

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 ▼

260.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.109151

Amount of Each Receipt this Period

21.73

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

83.46

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: PAGE 119 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

STEVE HUGHES

Mailing Address 825 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

COUNCIL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.110524

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

REIDUN C. INMAN

Mailing Address 7005 203rd Avenue East

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

SOCIAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.110294

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

REIDUN C. INMAN

Mailing Address 7005 203rd Avenue East

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

SOCIAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.110372

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: PAGE 120 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

CARLA INSINGA-MINSER

Mailing Address 4287 South Carolina Drive

City

Blue Ridge

State

PA

Zip Code

17112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME PA CN 13

Occupation

ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

513.72

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109270

Amount of Each Receipt this Period

85.62

**B.**

Full Name (Last, First, Middle Initial)

ANNE IRVING

Mailing Address 5243 N. Lland Avenue

City

Chicago

State

IL

Zip Code

60630

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IL CN 31

Occupation

DIRECTOR OF PUBLIC POLICY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109521

Amount of Each Receipt this Period

67.12

**C.**

Full Name (Last, First, Middle Initial)

WILLIAM ISLER

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

ASST DIRECTOR, GENERAL SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.76

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109039

Amount of Each Receipt this Period

37.26

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

190.00

**TOTAL** This Period (last page this line number only) .....



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

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

FOR LINE NUMBER: PAGE 121 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

WILLIAM ISLER

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

ASST DIRECTOR, GENERAL SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.73

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109152

Amount of Each Receipt this Period

37.97

**B.**

Full Name (Last, First, Middle Initial)

JUSTUS JAMES

Mailing Address 1705 Platt Court

City

Allentown

State

PA

Zip Code

18104

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 ▼

229.56

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109271

Amount of Each Receipt this Period

38.26

**C.**

Full Name (Last, First, Middle Initial)

EDWIN S. JAYNE

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 ▼

590.41

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109040

Amount of Each Receipt this Period

53.67

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

129.90

**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  
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FOR LINE NUMBER: PAGE 122 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

EDWIN S. JAYNE

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 ▼

644.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109153

Amount of Each Receipt this Period

53.67

**B.**

Full Name (Last, First, Middle Initial)

PAMELA L. JENKINS

Mailing Address 47604 Sandbank Square

City

Sterling

State

VA

Zip Code

20165

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 ▼

437.05

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109041

Amount of Each Receipt this Period

39.73

**C.**

Full Name (Last, First, Middle Initial)

PAMELA L. JENKINS

Mailing Address 47604 Sandbank Square

City

Sterling

State

VA

Zip Code

20165

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 ▼

476.78

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109154

Amount of Each Receipt this Period

39.73

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

133.13

**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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

RUTH JERELS

Mailing Address 1170 Winton Avenue

City

Akron

State

OH

Zip Code

44320

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
COUNTY OF SUMMIT

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 Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.110066

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

RUTH JERELS

Mailing Address 1170 Winton Avenue

City

Akron

State

OH

Zip Code

44320

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
COUNTY OF SUMMIT

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.110068

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

FRANK X. JEREZ

Mailing Address 460 Center Street  
Apt. #3

City

Nutley

State

NJ

Zip Code

07110

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 ▼

358.01

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109228

Amount of Each Receipt this Period

32.95

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

132.95

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

FRANK X. JEREZ

Mailing Address 460 Center Street  
Apt. #3

City State Zip Code  
Nutley NJ 07110

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 ▼

390.96

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109229

Amount of Each Receipt this Period

32.95

**B.**

Full Name (Last, First, Middle Initial)

BRUCE C. JETT

Mailing Address 4503 Sandy Oak Terrace

City State Zip Code  
Chester VA 23831

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109042

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

BRUCE C. JETT

Mailing Address 4503 Sandy Oak Terrace

City State Zip Code  
Chester VA 23831

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109155

Amount of Each Receipt this Period

20.00

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

72.95

**TOTAL** This Period (last page this line number only) .....

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

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☒ 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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

EMILY M. JOHNSON

Mailing Address 444 Driftwood Drive

City

Hobart

State

IN

Zip Code

46342

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 ▼

517.32

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109522

Amount of Each Receipt this Period

65.14

**B.**

Full Name (Last, First, Middle Initial)

GEORGE T. JOHNSON

Mailing Address 3853 Fairfax Square

City

Fairfax

State

VA

Zip Code

22031-4200

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 ▼

479.67

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109043

Amount of Each Receipt this Period

43.61

**C.**

Full Name (Last, First, Middle Initial)

GEORGE T. JOHNSON

Mailing Address 3853 Fairfax Square

City

Fairfax

State

VA

Zip Code

22031-4200

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 ▼

523.28

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109156

Amount of Each Receipt this Period

43.61

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

152.36

**TOTAL** This Period (last page this line number only) .....

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

JEFFREY A. JOHNSON

Mailing Address P.O. Box 7925

City

Madison

State

WI

Zip Code

53707-7925

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WA DEPT OF CORRECTIONS

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.110568

Amount of Each Receipt this Period

22.00

**B.**

Full Name (Last, First, Middle Initial)

JEFFREY A. JOHNSON

Mailing Address P.O. Box 7925

City

Madison

State

WI

Zip Code

53707-7925

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WA DEPT OF CORRECTIONS

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 Y  
0 6 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.110569

Amount of Each Receipt this Period

22.00

**C.**

Full Name (Last, First, Middle Initial)

RON JOHNSON

Mailing Address 514 Shatto Place  
3rd Floor

City

Los Angeles

State

CA

Zip Code

90020

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CA CN 36

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 Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.110231

Amount of Each Receipt this Period

30.00

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

74.00

**TOTAL** This Period (last page this line number only) .....

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

WINSTON JOHNSON

Mailing Address 14574 Longacre

City

Detroit

State

MI

Zip Code

48227-1448

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 ▼

298.48

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109683

Amount of Each Receipt this Period

27.28

**B.**

Full Name (Last, First, Middle Initial)

WINSTON JOHNSON

Mailing Address 14574 Longacre

City

Detroit

State

MI

Zip Code

48227-1448

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 ▼

325.76

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.109727

Amount of Each Receipt this Period

27.28

**C.**

Full Name (Last, First, Middle Initial)

JUDY A. JONES

Mailing Address 115 S Oak Street

City

Falls Church

State

VA

Zip Code

22046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

ASSOC. DIRECTOR, INFORMATION SYSTEMS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.41

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109044

Amount of Each Receipt this Period

53.67

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

108.23

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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☒ 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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JUDY A. JONES

Mailing Address 115 S Oak Street

City

Falls Church

State

VA

Zip Code

22046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

ASSOC. DIRECTOR, INFORMATION SYSTEMS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

644.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109157

Amount of Each Receipt this Period

53.67

**B.**

Full Name (Last, First, Middle Initial)

MARK JONES

Mailing Address 1201 Old Highway 63 South  
Apt. 105

City

Columbia

State

MO

Zip Code

65201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MO CN 72

Occupation

CAMPAIGN MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.70

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109771

Amount of Each Receipt this Period

26.07

**C.**

Full Name (Last, First, Middle Initial)

MARK JONES

Mailing Address 1201 Old Highway 63 South  
Apt. 105

City

Columbia

State

MO

Zip Code

65201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MO CN 72

Occupation

CAMPAIGN MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.77

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.109778

Amount of Each Receipt this Period

26.07

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

105.81

**TOTAL** This Period (last page this line number only) .....



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 129 / 360

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

MARK JONES

Mailing Address 1201 Old Highway 63 South  
Apt. 105

City State Zip Code  
Columbia MO 65201

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME MO CN 72

Occupation  
CAMPAIGN MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.84

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109784

Amount of Each Receipt this Period

26.07

**B.**

Full Name (Last, First, Middle Initial)

BLONDIE JORDAN

Mailing Address 7811 Bay Cedar Drive

City State Zip Code  
Orlando FL 32835

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.109752

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

CHARLES JURGONIS

Mailing Address 11704 Bobs Ford Road

City State Zip Code  
Fairfax VA 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 ▼

1699.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109045

Amount of Each Receipt this Period

154.47

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

230.54

**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  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

CHARLES JURGONIS

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 ▼

1853.67

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109158

Amount of Each Receipt this Period

154.47

**B.**

Full Name (Last, First, Middle Initial)

JASON KAY

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 ▼

533.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109523

Amount of Each Receipt this Period

67.12

**C.**

Full Name (Last, First, Middle Initial)

RONALD T. KEENAN

Mailing Address 1015 N 10th Street

City

Milwaukee

State

WI

Zip Code

53233

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 24/SOWI

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  
0 6 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.110570

Amount of Each Receipt this Period

20.00

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

241.59

**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: PAGE 131 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

RONALD T. KEENAN

Mailing Address 1015 N 10th Street

City

Milwaukee

State

WI

Zip Code

53233

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 24/SOWI

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
0	6		1	9		2	0	0	8

Transaction ID: SA11AI.110571

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

LISA HARRIS KELLY

Mailing Address 9800 Muirfield Drive

City

Upper Marlboro

State

MD

Zip Code

20772

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

SENIOR SPEECH WRITER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

544.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	0	8

Transaction ID: SA11AI.109046

Amount of Each Receipt this Period

49.49

**C.**

Full Name (Last, First, Middle Initial)

LISA HARRIS KELLY

Mailing Address 9800 Muirfield Drive

City

Upper Marlboro

State

MD

Zip Code

20772

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

SENIOR SPEECH WRITER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

593.91

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	0	8

Transaction ID: SA11AI.109159

Amount of Each Receipt this Period

49.49

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

118.98

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: PAGE 132 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)  
DEBORAH KENNARD

Mailing Address 14955 Avenue Venusto #67

City State Zip Code  
San Diego CA 92128

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
KAISER PERMANENTE

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 Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.110588

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)  
DEBORAH L. KERBEN

Mailing Address 852 66TH AVE

City State Zip Code  
BROOKLYN CENTER MN 55430-1612

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
UNIVERSITY OF MINNESOTA

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.110474

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)  
ADRIENNE J. KERN

Mailing Address P.O. Box 44

City State Zip Code  
Hawthorne WI 54842

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 ▼

233.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109804

Amount of Each Receipt this Period

38.90

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

103.90

**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: PAGE 133 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

DEBRA KIDNEY

Mailing Address 6420 N. Willamette Blvd.

City

Portland

State

OR

Zip Code

97203-5655

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OR CN 75

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.110525

Amount of Each Receipt this Period

65.00

**B.**

Full Name (Last, First, Middle Initial)

JILL KIELBLOCK

Mailing Address 581 Gotzian Street

City

Saint Paul

State

MN

Zip Code

55106

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 ▼

413.70

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109805

Amount of Each Receipt this Period

66.72

**C.**

Full Name (Last, First, Middle Initial)

GREGORY J. KING

Mailing Address 147 W Linvale Street

City

Baltimore

State

MD

Zip Code

21217

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.41

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109047

Amount of Each Receipt this Period

53.67

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

185.39

**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: PAGE 134 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

GREGORY J. KING

Mailing Address 147 W Linvale Street

City

Baltimore

State

MD

Zip Code

21217

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

644.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109160

Amount of Each Receipt this Period

53.67

**B.**

Full Name (Last, First, Middle Initial)

R. MICHAEL KIRKPATRICK

Mailing Address 6131 Mifflin Avenue

City

Harrisburg

State

PA

Zip Code

17111-4259

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME PA CN 13

Occupation

DIRECTOR, GRIEVANCE DEPT.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109272

Amount of Each Receipt this Period

88.10

**C.**

Full Name (Last, First, Middle Initial)

SHIRLEY KIRKWOOD

Mailing Address 1232 Winding Way

City

Tobyhanna

State

PA

Zip Code

18466

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 ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109273

Amount of Each Receipt this Period

66.30

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

208.07

**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 135 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

JOHN M. KIRWIN

Mailing Address 1426 Fairview Avenue

City

Columbus

State

OH

Zip Code

43212

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 11/SOCH

Occupation

ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	6	/	2	0	0	8

Transaction ID: SA11AI.109965

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

JOHN M. KIRWIN

Mailing Address 1426 Fairview Avenue

City

Columbus

State

OH

Zip Code

43212

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 11/SOCH

Occupation

ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	0	/	2	0	0	8

Transaction ID: SA11AI.110032

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

CHRISTINE E. KISTNER

Mailing Address 501 High Street

City

Colfax

State

WI

Zip Code

54730

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

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
0	6	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.110088

Amount of Each Receipt this Period

40.00

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  
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FOR LINE NUMBER: PAGE 136 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

CHRISTINE E. KISTNER

Mailing Address 501 High Street

City

Colfox

State

WI

Zip Code

54730

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.110122

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

JOSEPH KLEMAN

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 ▼

485.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109274

Amount of Each Receipt this Period

80.84

**C.**

Full Name (Last, First, Middle Initial)

CAROLYN KLINGLESMITH

Mailing Address 2812 Windsor Forest Drive

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 ▼

473.87

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109048

Amount of Each Receipt this Period

43.61

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

139.45

**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  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

CAROLYN KLINGLESMTIH

Mailing Address 2812 Windsor Forest Drive

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 ▼

517.48

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109161

Amount of Each Receipt this Period

43.61

**B.**

Full Name (Last, First, Middle Initial)

NANCY KNEPP

Mailing Address 22 Edgewood Drive

City

Mechanicsburg

State

PA

Zip Code

17055

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 ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109275

Amount of Each Receipt this Period

66.30

**C.**

Full Name (Last, First, Middle Initial)

MARCIA R. KNOX

Mailing Address 1660 Newton Avenue

City

Dayton

State

OH

Zip Code

45406-4110

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 ▼

531.09

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109596

Amount of Each Receipt this Period

86.01

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

195.92

**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 138 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

STEVE KOFFROTH

Mailing Address 17824 Autry Ct

City

Chino Hills

State

CA

Zip Code

91709

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CA CN 36

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	0	8

Transaction ID: SA11AI.110232

Amount of Each Receipt this Period

62.40

**B.**

Full Name (Last, First, Middle Initial)

KERRY KORPI

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 ▼

756.43

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	0	8

Transaction ID: SA11AI.109049

Amount of Each Receipt this Period

68.77

**C.**

Full Name (Last, First, Middle Initial)

KERRY KORPI

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 ▼

825.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	0	8

Transaction ID: SA11AI.109162

Amount of Each Receipt this Period

68.77

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

199.94

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  
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FOR LINE NUMBER: PAGE 139 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

STEVEN KREISBERG

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 ▼

800.41

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109050

Amount of Each Receipt this Period

74.67

**B.**

Full Name (Last, First, Middle Initial)

STEVEN KREISBERG

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 ▼

875.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109163

Amount of Each Receipt this Period

74.67

**C.**

Full Name (Last, First, Middle Initial)

BARBARA KREMP

Mailing Address 302 Donnelly Avenue

City

Aston

State

PA

Zip Code

19014

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 ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109276

Amount of Each Receipt this Period

66.30

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

215.64

**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: PAGE 140 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)  
BEVERLY KRISS

Mailing Address 1410 Bush Street  
Suite A

City State Zip Code  
Baltimore MD 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 ▼

249.99

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.109847

Amount of Each Receipt this Period

38.46

**B.**

Full Name (Last, First, Middle Initial)  
THOMAS E. KULIKOSKY

Mailing Address 400 Old Dominion Avenue

City State Zip Code  
Herndon VA 20170

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME INT'L

Occupation  
AUDITING MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

621.34

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109051

Amount of Each Receipt this Period

56.88

**C.**

Full Name (Last, First, Middle Initial)  
THOMAS E. KULIKOSKY

Mailing Address 400 Old Dominion Avenue

City State Zip Code  
Herndon VA 20170

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME INT'L

Occupation  
AUDITING MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.22

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109164

Amount of Each Receipt this Period

56.88

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

152.22

**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 141 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

PATRICIA A. KUNK

Mailing Address 3517 Pine Green Drive

City

Dayton

State

OH

Zip Code

45414

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 ▼

226.68

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	0	8

Transaction ID: SA11AI.109597

Amount of Each Receipt this Period

38.74

**B.**

Full Name (Last, First, Middle Initial)

JEANINE LAKE

Mailing Address P.O. Box 1016

City

Carson City

State

NV

Zip Code

89702

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME NV LOC 4041

Occupation

REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	0	8

Transaction ID: SA11AI.110432

Amount of Each Receipt this Period

34.00

**C.**

Full Name (Last, First, Middle Initial)

FRANCIS M. LALLY, III

Mailing Address 5 Vansant 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 ▼

375.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	0	8

Transaction ID: SA11AI.109763

Amount of Each Receipt this Period

61.58

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

134.32

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 142 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)  
JOSE A. LALUZ, JR.

Mailing Address 16 E 98 Street  
Apt. 6F

City State Zip Code  
New York NY 10029

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME INT'L

Occupation  
SPECIAL PROJECTS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.02

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109052

Amount of Each Receipt this Period

56.73

**B.**

Full Name (Last, First, Middle Initial)  
JOSE A. LALUZ, JR.

Mailing Address 16 E 98 Street  
Apt. 6F

City State Zip Code  
New York NY 10029

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME INT'L

Occupation  
SPECIAL PROJECTS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.75

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109165

Amount of Each Receipt this Period

56.73

**C.**

Full Name (Last, First, Middle Initial)  
ELIZABETH LARSEN

Mailing Address 900 Grant Street SW

City State Zip Code  
Tumwater WA 98512-6335

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.110183

Amount of Each Receipt this Period

40.00

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

153.46

**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: PAGE 143 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

THOMAS LARSEN

Mailing Address 1734 Arrowhead Drive

City

Beloit

State

WI

Zip Code

53511

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110089

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

THOMAS LARSEN

Mailing Address 1734 Arrowhead Drive

City

Beloit

State

WI

Zip Code

53511

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

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 Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.110123

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

DANA LARSON

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 ▼

211.78

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109277

Amount of Each Receipt this Period

35.62

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

135.62

**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 144 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

ALAN L. LEE

Mailing Address 1539 Tigertail Court

City

Palmdale

State

CA

Zip Code

93551

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

INTERNATIONAL UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109053

Amount of Each Receipt this Period

34.19

**B.**

Full Name (Last, First, Middle Initial)

ALAN L. LEE

Mailing Address 1539 Tigertail Court

City

Palmdale

State

CA

Zip Code

93551

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

INTERNATIONAL UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

411.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.109166

Amount of Each Receipt this Period

34.96

**C.**

Full Name (Last, First, Middle Initial)

NEILDA C. LEE

Mailing Address 1217 Gallatin 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 ▼

973.52

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109054

Amount of Each Receipt this Period

88.50

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

157.65

TOTAL This Period (last page this line 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 145 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

NEILDAC. LEE

Mailing Address 1217 Gallatin 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 ▼

1062.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.109167

Amount of Each Receipt this Period

88.50

**B.**

Full Name (Last, First, Middle Initial)

SUE C. LEE-ALLEN

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 ▼

490.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	5	/	2	0	0	8

Transaction ID: SA11AI.110526

Amount of Each Receipt this Period

70.00

**C.**

Full Name (Last, First, Middle Initial)

EDWARD LEHMAN

Mailing Address 7864 Misson Vista Drive

City

San Diego

State

CA

Zip Code

92120

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CA CN 36

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	9	/	2	0	0	8

Transaction ID: SA11AI.110233

Amount of Each Receipt this Period

30.00

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

188.50

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 146 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

ERIC N. LEHTO

Mailing Address 2122 West 2nd Street  
Apt. #2City State Zip Code  
Duluth MN 55086FEC ID number of contributing  
federal political committee.**C**Name of Employer  
AFSCME MN CN 5/CN14Occupation  
DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

619.32

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109806

Amount of Each Receipt this Period

103.22

**B.**

Full Name (Last, First, Middle Initial)

DANIEL LEMBO

Mailing Address 190 W. Ostend Street  
Suite 101City State Zip Code  
Baltimore MD 21230FEC ID number of contributing  
federal political committee.**C**Name of Employer  
AFSCME MD CN 982Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.109832

Amount of Each Receipt this Period

37.50

**C.**

Full Name (Last, First, Middle Initial)

DINO LEONE

Mailing Address 9115 Turkey Hollow Rd.

City State Zip Code  
Taylor Ridge IL 61284-9646FEC ID number of contributing  
federal political committee.**C**Name of Employer  
AFSCME IL CN 31Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.109524

Amount of Each Receipt this Period

63.84

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

204.56

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 147 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

BARBARA LEWIS

Mailing Address 2650 S. M-52 Highway

City

Owosso

State

MI

Zip Code

48867

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 ▼

269.83

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109684

Amount of Each Receipt this Period

24.53

**B.**

Full Name (Last, First, Middle Initial)

BARBARA LEWIS

Mailing Address 2650 S. M-52 Highway

City

Owosso

State

MI

Zip Code

48867

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 ▼

294.36

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.109728

Amount of Each Receipt this Period

24.53

**C.**

Full Name (Last, First, Middle Initial)

VALERY LIGHT

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 ▼

367.56

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109278

Amount of Each Receipt this Period

61.26

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

110.32

**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 148 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

ANDERS LINDALL

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 ▼

495.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: SA11AI.109525

Amount of Each Receipt this Period

62.42

**B.**

Full Name (Last, First, Middle Initial)

THERESA LIPKO

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 ▼

208.56

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	0	8

Transaction ID: SA11AI.109279

Amount of Each Receipt this Period

34.76

**C.**

Full Name (Last, First, Middle Initial)

DEBORAH LIPPINCOTT

Mailing Address 535 Birdwell Church Lane

City

Creal Springs

State

IL

Zip Code

62922

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 ▼

492.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: SA11AI.109526

Amount of Each Receipt this Period

61.98

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

159.16

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  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

ISMAEL LIRIANO

Mailing Address 6905 Victoria Drive  
#2

City State Zip Code  
Alexandria VA 22310

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME INT'L

Occupation  
STAFF ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.18

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109055

Amount of Each Receipt this Period

28.72

**B.**

Full Name (Last, First, Middle Initial)

ISMAEL LIRIANO

Mailing Address 6905 Victoria Drive  
#2

City State Zip Code  
Alexandria VA 22310

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME INT'L

Occupation  
STAFF ACCOUNTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.90

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109168

Amount of Each Receipt this Period

28.72

**C.**

Full Name (Last, First, Middle Initial)

COREY LOCKARD

Mailing Address P.O. Box 22

City State Zip Code  
Benton PA 17814

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 ▼

364.05

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109280

Amount of Each Receipt this Period

66.30

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

123.74

**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 PageFOR LINE NUMBER: PAGE 150 / 360  
(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

KIP LOCKHART

Mailing Address 139 Simpkins Drive

City

Bristol

State

CT

Zip Code

06010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CT CN 4

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.97

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.110453

Amount of Each Receipt this Period

62.02

**B.**

Full Name (Last, First, Middle Initial)

PAMELA J. LOFQUIST

Mailing Address 43426 Birchview Road

City

Sturgeon Lake

State

MN

Zip Code

55783-9802

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MN CN 5/CN14

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109807

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

LISABETH LONG

Mailing Address P.O. Box 82

City

Falls Creek

State

PA

Zip Code

15840-0082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME PA CN 13

Occupation

EDUCATION DIRECTOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

513.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.109281

Amount of Each Receipt this Period

85.62

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

197.64

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

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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

RANDY LORELLO

Mailing Address 3628 55th Court, SE

City

Olympia

State

WA

Zip Code

98503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WA CN 28

Occupation

DIR. UNION / MGMT. ACTIV.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.110184

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

CHARLES M. LOVELESS

Mailing Address 1112 Euclid Street NW

City

WASHINGTON

State

DC

Zip Code

20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

DIRECTOR, LEGISLATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

806.74

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109056

Amount of Each Receipt this Period

73.34

**C.**

Full Name (Last, First, Middle Initial)

CHARLES M. LOVELESS

Mailing Address 1112 Euclid Street NW

City

WASHINGTON

State

DC

Zip Code

20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

DIRECTOR, LEGISLATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109169

Amount of Each Receipt this Period

73.34

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

196.68

**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  
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FOR LINE NUMBER: PAGE 152 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

SALVATORE LUCIANO

Mailing Address 947 Bunker Hill Rd

City

Watertown

State

CT

Zip Code

06795-3231

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 ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.110454

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

SALVATORE LUCIANO

Mailing Address 947 Bunker Hill Rd

City

Watertown

State

CT

Zip Code

06795-3231

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 ▼

734.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109646

Amount of Each Receipt this Period

14.00

**C.**

Full Name (Last, First, Middle Initial)

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

Occupation

SECRETARY TREASURER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1414.16

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109057

Amount of Each Receipt this Period

128.56

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

242.56

**TOTAL** This Period (last page this line number only) .....



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

Use separate schedule(s)  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

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

Occupation

SECRETARY TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1542.72

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109170

Amount of Each Receipt this Period

128.56

**B.**

Full Name (Last, First, Middle Initial)

CAROLE LUTNESS

Mailing Address 914 Shatto Place  
3rd Floor

City

Los Angeles

State

CA

Zip Code

90020

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CA CN 36/Local 2712

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.110603

Amount of Each Receipt this Period

280.00

**C.**

Full Name (Last, First, Middle Initial)

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

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

816.64

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109598

Amount of Each Receipt this Period

125.66

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

534.22

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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☒ 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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

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

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.64

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109647

Amount of Each Receipt this Period

14.00

**B.**

Full Name (Last, First, Middle Initial)

RANDELL LYNCH

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 ▼

492.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109527

Amount of Each Receipt this Period

61.98

**C.**

Full Name (Last, First, Middle Initial)

ROBERTA LYNCH

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 ▼

774.84

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109648

Amount of Each Receipt this Period

14.00

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

89.98

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

ROBERTA LYNCH

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 ▼

874.36

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109528

Amount of Each Receipt this Period

99.52

**B.**

Full Name (Last, First, Middle Initial)

MICHAEL C. LYTER

Mailing Address P.O. Box 102

City

Elliottsburg

State

PA

Zip Code

17024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME PA CN 13/SOPA

Occupation

TRADESMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.110486

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

LONIE MACCONNELL

Mailing Address 618 Frances Drive

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 ▼

395.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109282

Amount of Each Receipt this Period

65.84

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

205.36

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

TIMOTHY MACKEY

Mailing Address 2243 Ohio Avenue

City

Signal Hill

State

CA

Zip Code

90755

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CA CN 36

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.38

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.110234

Amount of Each Receipt this Period

53.34

**B.**

Full Name (Last, First, Middle Initial)

JOHN P. MAGLIO

Mailing Address P.O. Box 624

City

Racine

State

WI

Zip Code

53401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

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  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110090

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

JOHN P. MAGLIO

Mailing Address P.O. Box 624

City

Racine

State

WI

Zip Code

53401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.110124

Amount of Each Receipt this Period

40.00

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

133.34

**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  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

LOUIS J. MAHOLIC

Mailing Address 2726 Juno Place  
Apt. #2

City State Zip Code  
Fairlawn OH 44333

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 ▼

314.80

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109599

Amount of Each Receipt this Period

52.98

**B.**

Full Name (Last, First, Middle Initial)

DENNIS MALLORY

Mailing Address P.O. Box 1016

City State Zip Code  
Carson City NV 89702

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME NV LOC 4041

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110434

Amount of Each Receipt this Period

34.00

**C.**

Full Name (Last, First, Middle Initial)

KATHRYN S. MALONE

Mailing Address 988 Circle On The Green

City State Zip Code  
Columbus OH 43235

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME INT'L

Occupation  
DIRECTOR OF PUBLIC AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.109837

Amount of Each Receipt this Period

77.00

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

163.98

**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

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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

LARRY MALONE

Mailing Address 5185 Horseshoe Falls D

City

Dublin

State

OH

Zip Code

43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109403

Amount of Each Receipt this Period

38.50

**B.**

Full Name (Last, First, Middle Initial)

LARRY MALONE

Mailing Address 5185 Horseshoe Falls D

City

Dublin

State

OH

Zip Code

43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

539.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109462

Amount of Each Receipt this Period

38.50

**C.**

Full Name (Last, First, Middle Initial)

LINDA FAY MANN

Mailing Address 15103 Hunter Mountain Lane

City

Silver Spring

State

MD

Zip Code

20906

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 ▼

373.15

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109058

Amount of Each Receipt this Period

34.22

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

111.22

**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 159 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

LINDA FAY MANN

Mailing Address 15103 Hunter Mountain Lane

City

Silver Spring

State

MD

Zip Code

20906

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 ▼

407.37

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.109171

Amount of Each Receipt this Period

34.22

**B.**

Full Name (Last, First, Middle Initial)

MICHAEL MANN

Mailing Address 15103 Hunter Mountain Lane

City

Silver Spring

State

MD

Zip Code

20906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, AUDITING

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

590.41

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109059

Amount of Each Receipt this Period

53.67

**C.**

Full Name (Last, First, Middle Initial)

MICHAEL MANN

Mailing Address 15103 Hunter Mountain Lane

City

Silver Spring

State

MD

Zip Code

20906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, AUDITING

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

644.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.109172

Amount of Each Receipt this Period

53.67

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

141.56

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 160 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

TED MANNA

Mailing Address 510 45th Street

City

Altoona

State

PA

Zip Code

16601-9788

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 ▼

394.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	0	8

Transaction ID: SA11AI.109283

Amount of Each Receipt this Period

66.30

**B.**

Full Name (Last, First, Middle Initial)

MICHAEL A. MARETTE

Mailing Address P.O. Box 314

City

Charlestown

State

WV

Zip Code

25414

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

ASST. DIRECTOR, ORG &amp; FIELD SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

544.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	0	8

Transaction ID: SA11AI.109060

Amount of Each Receipt this Period

49.49

**C.**

Full Name (Last, First, Middle Initial)

MICHAEL A. MARETTE

Mailing Address P.O. Box 314

City

Charlestown

State

WV

Zip Code

25414

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

ASST. DIRECTOR, ORG &amp; FIELD SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

593.91

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	0	8

Transaction ID: SA11AI.109173

Amount of Each Receipt this Period

49.49

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

165.28

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



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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

STEPHEN MARINCEL

Mailing Address 247 Kennard Street

City

Saint Paul

State

MN

Zip Code

55106

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 ▼

413.70

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109809

Amount of Each Receipt this Period

66.72

**B.**

Full Name (Last, First, Middle Initial)

ALIXETTA MARLOW

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

ADMN. ASST. DIR. OF ACCTG.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.110559

Amount of Each Receipt this Period

90.00

**C.**

Full Name (Last, First, Middle Initial)

ALIXETTA MARLOW

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

ADMN. ASST. DIR. OF ACCTG.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109404

Amount of Each Receipt this Period

38.50

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

195.22

**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

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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

ALIXETTA MARLOW

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

ADMN. ASST. DIR. OF ACCTG.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

629.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109463

Amount of Each Receipt this Period

38.50

**B.**

Full Name (Last, First, Middle Initial)

TIM MARSHALL

Mailing Address 323 Division Street

City

Lacrosse

State

WI

Zip Code

54601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WI DEPT OF CORRECTIONS

Occupation

CORRECTIONS OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.110572

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

TIM MARSHALL

Mailing Address 323 Division Street

City

Lacrosse

State

WI

Zip Code

54601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WI DEPT OF CORRECTIONS

Occupation

CORRECTIONS OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.110573

Amount of Each Receipt this Period

20.00

**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)  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

GARY V. MARTIN

Mailing Address 890 Orchard Hill Road

City

Zanesville

State

OH

Zip Code

43701

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 ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109405

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

GARY V. MARTIN

Mailing Address 890 Orchard Hill Road

City

Zanesville

State

OH

Zip Code

43701

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109464

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

KIMBERLY A. MASSENGILL-BERNARDIN

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 ▼

412.84

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109600

Amount of Each Receipt this Period

69.48

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

149.48

**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 164 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

CLYDE F. MAUK

Mailing Address 4842 Bridge Lane  
Apt. #1City State Zip Code  
Mason OH 45050FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4Occupation  
REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	0	8

Transaction ID: SA11AI.109406

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

CLYDE F. MAUK

Mailing Address 4842 Bridge Lane  
Apt. #1City State Zip Code  
Mason OH 45050FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4Occupation  
REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	0	8

Transaction ID: SA11AI.109465

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

JAMES MAUPIN, JR.

Mailing Address 535 Birdwell Church Lane

City State Zip Code  
Creal Springs IL 62922FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IL CN 31Occupation  
REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: SA11AI.109529

Amount of Each Receipt this Period

76.56

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

156.56

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  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JEFF MAZUR

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

BUSINESS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.10

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109773

Amount of Each Receipt this Period

27.11

**B.**

Full Name (Last, First, Middle Initial)

JEFF MAZUR

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

BUSINESS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.21

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.109779

Amount of Each Receipt this Period

27.11

**C.**

Full Name (Last, First, Middle Initial)

JEFF MAZUR

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

BUSINESS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.32

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109785

Amount of Each Receipt this Period

27.11

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

81.33

**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  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

ELISSA MCBRIDE

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 ▼

1134.64

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109061

Amount of Each Receipt this Period

103.15

**B.**

Full Name (Last, First, Middle Initial)

ELISSA MCBRIDE

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 ▼

1237.79

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109174

Amount of Each Receipt this Period

103.15

**C.**

Full Name (Last, First, Middle Initial)

MARGARET MCCANN

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 ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109062

Amount of Each Receipt this Period

50.00

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

256.30

**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

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(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

MARGARET MCCANN

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 ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	0	8

Transaction ID: SA11AI.109175

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

TARA MCCAULEY

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 ▼

239.43

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: SA11AI.109530

Amount of Each Receipt this Period

53.38

**C.**

Full Name (Last, First, Middle Initial)

GARY MCCAULEY

Mailing Address 84 Mic Nan Drive

City

Londonberry

State

PA

Zip Code

17057

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME PA CN 13

Occupation

ASSISTANT DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

513.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	0	8

Transaction ID: SA11AI.109284

Amount of Each Receipt this Period

85.62

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

189.00

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 168 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

SUZANNE MCCORMICK

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 ▼

211.56

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109285

Amount of Each Receipt this Period

35.26

**B.**

Full Name (Last, First, Middle Initial)

TONY MCCUBBIN

Mailing Address 7740 Cordova Road

City

Erie

State

IL

Zip Code

61250

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 ▼

481.63

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109531

Amount of Each Receipt this Period

61.27

**C.**

Full Name (Last, First, Middle Initial)

JENNIFER A. MCCULLEY

Mailing Address 509 Ashton Drive

City

Fitchburg

State

WI

Zip Code

53593

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

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  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110092

Amount of Each Receipt this Period

40.00

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

136.53

**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: PAGE 169 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JENNIFER A. MCCULLEY

Mailing Address 509 Ashton Drive

City

Fitchburg

State

WI

Zip Code

53593

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.110126

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

JANE MCDONALD

Mailing Address 2201 Broadway  
Suite 715

City

Oakland

State

CA

Zip Code

94612

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CA LOC 3299

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110441

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

JANE MCDONALD

Mailing Address 2201 Broadway  
Suite 715

City

Oakland

State

CA

Zip Code

94612

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CA LOC 3299

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.110446

Amount of Each Receipt this Period

50.00

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

140.00

**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  
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FOR LINE NUMBER: PAGE 170 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

BRIAN P. MCDONNELL

Mailing Address 1322 Myron Street

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 ▼

462.90

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109063

Amount of Each Receipt this Period

42.08

**B.**

Full Name (Last, First, Middle Initial)

BRIAN P. MCDONNELL

Mailing Address 1322 Myron Street

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 ▼

505.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109176

Amount of Each Receipt this Period

42.50

**C.**

Full Name (Last, First, Middle Initial)

GERALD MCENTEE

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

Occupation

PRESIDENT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1666.72

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109064

Amount of Each Receipt this Period

151.52

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

236.10

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 171 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

GERALD MCENTEE

Mailing Address 800 25th Street NW  
Apt. #406

City State Zip Code  
Washington DC 20037-2207

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 ▼

1818.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109177

Amount of Each Receipt this Period

151.52

**B.**

Full Name (Last, First, Middle Initial)

JERI MCEWEN

Mailing Address 4031 Executive Park Drive

City State Zip Code  
Harrisburg PA 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 ▼

262.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109286

Amount of Each Receipt this Period

43.68

**C.**

Full Name (Last, First, Middle Initial)

FREDERICK A. MCGRAW

Mailing Address 1258 Summerset Way

City State Zip Code  
Pickerington OH 43147

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME OH LOC 4

Occupation  
EDUCATION & RESEARCH DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109407

Amount of Each Receipt this Period

35.00

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

230.20

**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 172 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

FREDERICK A. MCGRAW

Mailing Address 1258 Summerset Way

City

Pickerington

State

OH

Zip Code

43147

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

Occupation

EDUCATION & RESEARCH DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109466

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

LYNNE E. MCGRAW

Mailing Address 1258 Somerset Way

City

Pickerington

State

OH

Zip Code

43147

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

Occupation

DIRECTOR MEM. ACCTG.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109408

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

LYNNE E. MCGRAW

Mailing Address 1258 Somerset Way

City

Pickerington

State

OH

Zip Code

43147

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

Occupation

DIRECTOR MEM. ACCTG.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109467

Amount of Each Receipt this Period

30.00

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

95.00

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

KRISTEN E. MCKINLEY

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

STAFF ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.12

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109409

Amount of Each Receipt this Period

19.24

**B.**

Full Name (Last, First, Middle Initial)

KRISTEN E. MCKINLEY

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

STAFF ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.36

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109468

Amount of Each Receipt this Period

19.24

**C.**

Full Name (Last, First, Middle Initial)

JEAN MCLAREN

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 ▼

262.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109287

Amount of Each Receipt this Period

43.68

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

82.16

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 174 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

PETER M. MCLINDEN

Mailing Address 935 Pamela Road

City

Cincinnati

State

OH

Zip Code

45255

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 ▼

503.59

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109602

Amount of Each Receipt this Period

84.76

**B.**

Full Name (Last, First, Middle Initial)

ROBERT W. MCLINN

Mailing Address Box 351

City

Waupun

State

WI

Zip Code

53963

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 24/SOWI

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.110574

Amount of Each Receipt this Period

20.17

**C.**

Full Name (Last, First, Middle Initial)

ROBERT W. MCLINN

Mailing Address Box 351

City

Waupun

State

WI

Zip Code

53963

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 24/SOWI

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.21

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.110575

Amount of Each Receipt this Period

20.17

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

125.10

**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 175 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

ORAN MCMICHAEL

Mailing Address 2777 Northtowne Lane  
Apt. #2088S

City State Zip Code  
Reno NV 89512

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 ▼

479.67

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109065

Amount of Each Receipt this Period

43.61

**B.**

Full Name (Last, First, Middle Initial)

ORAN MCMICHAEL

Mailing Address 2777 Northtowne Lane  
Apt. #2088S

City State Zip Code  
Reno NV 89512

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 ▼

523.28

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109178

Amount of Each Receipt this Period

43.61

**C.**

Full Name (Last, First, Middle Initial)

LEILA MCMULLEN

Mailing Address 3014 Laurel Avenue

City State Zip Code  
Cheverly MD 20785

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME INT'L

Occupation  
EXECUTIVE ASST. TO SECRETARY TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

598.62

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109066

Amount of Each Receipt this Period

54.42

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

141.64

**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: PAGE 176 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

LEILA MCMULLEN

Mailing Address 3014 Laurel Avenue

City

Cheverly

State

MD

Zip Code

20785

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

EXECUTIVE ASST. TO SECRETARY TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.109179

Amount of Each Receipt this Period

54.42

**B.**

Full Name (Last, First, Middle Initial)

EDWARD MCNEIL

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 ▼

422.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.109685

Amount of Each Receipt this Period

38.41

**C.**

Full Name (Last, First, Middle Initial)

EDWARD MCNEIL

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 ▼

460.61

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	0	/	2	0	0	8

Transaction ID: SA11AI.109729

Amount of Each Receipt this Period

38.41

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

131.24

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 177 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

MITCH G MENTER

Mailing Address 2377 Walton Blvd.  
Apt.#42

City State Zip Code  
Rochester MI 48309

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 ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.110471

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

LAURIE MERTA

Mailing Address 9829 59th Street, Court W

City State Zip Code  
Tacoma WA 98467-1007

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME WA CN 28

Occupation  
CONVENTION FUNDRAISER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.110185

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

CINDY A. MICHAEL

Mailing Address 331 Central Parkway

City State Zip Code  
Warren OH 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 ▼

321.68

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109603

Amount of Each Receipt this Period

54.70

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

254.70

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JOHN MICHALEC

Mailing Address 1544 N. Hickory

City

Owosso

State

MI

Zip Code

48867

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 Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109686

Amount of Each Receipt this Period

21.00

**B.**

Full Name (Last, First, Middle Initial)

JOHN MICHALEC

Mailing Address 1544 N. Hickory

City

Owosso

State

MI

Zip Code

48867

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

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.109730

Amount of Each Receipt this Period

21.00

**C.**

Full Name (Last, First, Middle Initial)

LANCE D. MICHALSKI

Mailing Address 300 Hardman Avenue S.  
#2

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

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  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110477

Amount of Each Receipt this Period

40.00

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

82.00

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 179 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

GLEN MIDDLETON

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 ▼

976.70

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.109849

Amount of Each Receipt this Period

180.00

**B.**

Full Name (Last, First, Middle Initial)

GLEN MIDDLETON

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 ▼

990.70

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109649

Amount of Each Receipt this Period

14.00

**C.**

Full Name (Last, First, Middle Initial)

DOROTHY MILLER

Mailing Address 2424 Locust Lane

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 ▼

262.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109288

Amount of Each Receipt this Period

43.68

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

237.68

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 180 / 360

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

SCOTT D. MILLER

Mailing Address 2056 W Hutchinson  
2nd Fl.

City State Zip Code  
Chicago IL 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 ▼

547.68

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109532

Amount of Each Receipt this Period

68.96

**B.**

Full Name (Last, First, Middle Initial)

TIMOTHY MILLER

Mailing Address 2724 Pine Avenue

City State Zip Code  
Altoona PA 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 ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109289

Amount of Each Receipt this Period

66.30

**C.**

Full Name (Last, First, Middle Initial)

MICHELE MINOR

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  
AFSCME MD CN 982

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109833

Amount of Each Receipt this Period

41.68

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

176.94

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 181 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

HAROLD F. MITCHELL

Mailing Address 3999 Kensingwood Drive

City

Columbus

State

OH

Zip Code

43230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH CN 8

Occupation

ASSISTANT ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

663.91

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109604

Amount of Each Receipt this Period

111.74

**B.**

Full Name (Last, First, Middle Initial)

YOLANDA M. MITCHELL

Mailing Address 1227 Oberlin Boulevard

City

Cincinnati

State

OH

Zip Code

45237

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 ▼

314.80

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109605

Amount of Each Receipt this Period

52.98

**C.**

Full Name (Last, First, Middle Initial)

DEREK M. MIZUNO

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.109355

Amount of Each Receipt this Period

50.00

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

214.72

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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Detailed Summary Page

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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

HARRY MOBLEY

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 ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109290

Amount of Each Receipt this Period

66.30

**B.**

Full Name (Last, First, Middle Initial)

KELLY MOBLEY

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

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  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109470

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

TRINA MOLNAR

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

STAFF ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.56

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109412

Amount of Each Receipt this Period

23.08

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

109.38

**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: PAGE 183 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

TRINA MOLNAR

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

STAFF ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	6	/	2	0	0	8

Transaction ID: SA11AI.109471

Amount of Each Receipt this Period

23.08

**B.**

Full Name (Last, First, Middle Initial)

KAREN MOMBERGER

Mailing Address 102 Manor Road

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:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.109291

Amount of Each Receipt this Period

66.30

**C.**

Full Name (Last, First, Middle Initial)

RHONDA M. MONTGOMERY

Mailing Address 1602 Temperance

City

Indianapolis

State

IN

Zip Code

46203

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 ▼

374.82

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109067

Amount of Each Receipt this Period

34.08

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

123.46

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

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

Use separate schedule(s)  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

RHONDA M. MONTGOMERY

Mailing Address 1602 Temperance

City

Indianapolis

State

IN

Zip Code

46203

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 ▼

408.90

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109180

Amount of Each Receipt this Period

34.08

**B.**

Full Name (Last, First, Middle Initial)

ERIC D D MOORE

Mailing Address 810 Wildwood Drive  
Apt 22

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 ▼

216.36

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109787

Amount of Each Receipt this Period

18.03

**C.**

Full Name (Last, First, Middle Initial)

GLADYS K. MOORE

Mailing Address 15104 Joppa Place

City

Bowie

State

MD

Zip Code

20721

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

LEGAL ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.49

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109068

Amount of Each Receipt this Period

26.06

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

78.17

**TOTAL** This Period (last page this line number only) .....



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

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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

GLADYS K. MOORE

Mailing Address 15104 Joppa Place

City

Bowie

State

MD

Zip Code

20721

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

LEGAL ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.55

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109181

Amount of Each Receipt this Period

26.06

**B.**

Full Name (Last, First, Middle Initial)

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 ▼

471.66

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109069

Amount of Each Receipt this Period

43.61

**C.**

Full Name (Last, First, Middle Initial)

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 ▼

515.27

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109182

Amount of Each Receipt this Period

43.61

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

113.28

**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  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

BRENDA MORRIS

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 ▼

211.56

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109292

Amount of Each Receipt this Period

35.26

**B.**

Full Name (Last, First, Middle Initial)

JEANNE MORRIS

Mailing Address 2315 Reddings Run Road

City

Home

State

PA

Zip Code

15747

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 ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109293

Amount of Each Receipt this Period

66.30

**C.**

Full Name (Last, First, Middle Initial)

SIMONE M MORRISON

Mailing Address 2556 North 15th Street

City

Milwaukee

State

WI

Zip Code

53206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DEPT OF WORKPLACE DVLPMNT

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.110585

Amount of Each Receipt this Period

17.00

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

118.56

**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  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

SIMONE M MORRISON

Mailing Address 2556 North 15th Street

City

Milwaukee

State

WI

Zip Code

53206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DEPT OF WORKPLACE DVLPMNT

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.110577

Amount of Each Receipt this Period

17.00

**B.**

Full Name (Last, First, Middle Initial)

RACHEL C. MORROW

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109413

Amount of Each Receipt this Period

19.24

**C.**

Full Name (Last, First, Middle Initial)

RACHEL C. MORROW

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.36

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109472

Amount of Each Receipt this Period

19.24

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

55.48

**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

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(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

MICHELLE MULHERIN

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 ▼

394.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.109295

Amount of Each Receipt this Period

66.30

**B.**

Full Name (Last, First, Middle Initial)

STEVEN C. MULLEN

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 ▼

333.88

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.109296

Amount of Each Receipt this Period

57.40

**C.**

Full Name (Last, First, Middle Initial)

MICHAEL D. MURPHY

Mailing Address 4221 Wanetah Trail

City

Madison

State

WI

Zip Code

53711

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

Occupation

FIELD ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.110094

Amount of Each Receipt this Period

20.00

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

143.70

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL D. MURPHY

Mailing Address 4221 Wanetah Trail

City

Madison

State

WI

Zip Code

53711

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

Occupation

FIELD ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.110144

Amount of Each Receipt this Period

5.00

**B.**

Full Name (Last, First, Middle Initial)

MICHAEL D. MURPHY

Mailing Address 4221 Wanetah Trail

City

Madison

State

WI

Zip Code

53711

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

Occupation

FIELD ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.110145

Amount of Each Receipt this Period

5.00

**C.**

Full Name (Last, First, Middle Initial)

MICHAEL D. MURPHY

Mailing Address 4221 Wanetah Trail

City

Madison

State

WI

Zip Code

53711

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

Occupation

FIELD ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

633.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109650

Amount of Each Receipt this Period

28.00

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

38.00

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL D. MURPHY

Mailing Address 4221 Wanetah Trail

City

Madison

State

WI

Zip Code

53711

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

Occupation

FIELD ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.110128

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

STEVEN L. MYERS

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.110560

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

STEVEN L. MYERS

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109414

Amount of Each Receipt this Period

40.00

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

100.00

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

STEVEN L. MYERS

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

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 Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109473

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

PHYLLIS NAIAD

Mailing Address 13304 58th Drive NE

City

Marysville

State

WA

Zip Code

98271

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 ▼

313.56

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.110187

Amount of Each Receipt this Period

52.26

**C.**

Full Name (Last, First, Middle Initial)

REBECCA NASSARRE

Mailing Address 1701 S Norfolk Street

City

San Mateo

State

CA

Zip Code

94403

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SAN MATEO COUNTY

Occupation

SOCIAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.110452

Amount of Each Receipt this Period

50.00

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

142.26

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 192 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JAMES NEBLETT

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 ▼

384.05

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109687

Amount of Each Receipt this Period

35.05

**B.**

Full Name (Last, First, Middle Initial)

JAMES NEBLETT

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 ▼

419.10

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.109731

Amount of Each Receipt this Period

35.05

**C.**

Full Name (Last, First, Middle Initial)

CYNTHIA NELSON

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 ▼

383.39

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109811

Amount of Each Receipt this Period

64.16

**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)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 193 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

MATTHEW NELSON

Mailing Address 3806 Edmund Boulevard

City

Minneapolis

State

MN

Zip Code

55406

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 ▼

236.18

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109812

Amount of Each Receipt this Period

16.00

**B.**

Full Name (Last, First, Middle Initial)

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 ▼

413.28

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109297

Amount of Each Receipt this Period

68.88

**C.**

Full Name (Last, First, Middle Initial)

MICHAEL NEWMAN

Mailing Address 4031 N. Hermitage Avenue

City

Chicago

State

IL

Zip Code

60613

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IL CN 31

Occupation

ASSOCIATE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

689.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109533

Amount of Each Receipt this Period

86.76

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

171.64

**TOTAL** This Period (last page this line number only) .....

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

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for each category of the  
Detailed Summary Page

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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JAMES B. NILAND

Mailing Address 2728 Pleasant Ave

City

Minneapolis

State

MN

Zip Code

55408

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 ▼

715.19

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109813

Amount of Each Receipt this Period

130.00

**B.**

Full Name (Last, First, Middle Initial)

JOSEPH NILSSON

Mailing Address 3215 Eastland CIR SE

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WA CN 28/SOWA

Occupation

CLERICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.110317

Amount of Each Receipt this Period

21.00

**C.**

Full Name (Last, First, Middle Initial)

JOSEPH NILSSON

Mailing Address 3215 Eastland CIR SE

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WA CN 28/SOWA

Occupation

CLERICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.110395

Amount of Each Receipt this Period

21.00

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

172.00

**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 195 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

GEORGE NOYES

Mailing Address 10368 Lozita Way

City

Lakeside

State

CA

Zip Code

92040-2233

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CA CN 36

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	0	8

Transaction ID: SA11AI.110258

Amount of Each Receipt this Period

120.00

**B.**

Full Name (Last, First, Middle Initial)

HOWARD D. OCOBOCK

Mailing Address P. O. Box 10899

City

Yakima

State

WA

Zip Code

98909

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WA CN 28/SOWA

Occupation

TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	0	8

Transaction ID: SA11AI.110319

Amount of Each Receipt this Period

21.00

**C.**

Full Name (Last, First, Middle Initial)

HOWARD D. OCOBOCK

Mailing Address P. O. Box 10899

City

Yakima

State

WA

Zip Code

98909

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WA CN 28/SOWA

Occupation

TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	0	8

Transaction ID: SA11AI.110397

Amount of Each Receipt this Period

21.00

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

162.00

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 196 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

TRAVIS OHM

Mailing Address 8 Highland Road

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:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.12

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109298

Amount of Each Receipt this Period

74.02

**B.**

Full Name (Last, First, Middle Initial)

RUSSELL K. OKATA

Mailing Address 1015 Wilder Avenue #203

City

Honolulu

State

HI

Zip Code

96822-2655

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 ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.109359

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

HOLLY OLSON

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 ▼

649.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109071

Amount of Each Receipt this Period

59.00

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

233.02

**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: PAGE 197 / 360  
(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

HOLLY OLSON

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 ▼

708.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109184

Amount of Each Receipt this Period

59.00

**B.**

Full Name (Last, First, Middle Initial)

KARMEN ORTLOFF

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 ▼

446.79

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109534

Amount of Each Receipt this Period

58.10

**C.**

Full Name (Last, First, Middle Initial)

SUSAN M. OSTHUS

Mailing Address 5200 Deerwood Lake Drive

City

Springfield

State

IL

Zip Code

62703

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 ▼

547.68

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109535

Amount of Each Receipt this Period

68.96

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

186.06

**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 198 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

VICTOR OSUNA

Mailing Address 615 S. Second Street

City

Springfield

State

IL

Zip Code

62705-2328

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 ▼

492.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109536

Amount of Each Receipt this Period

61.98

**B.**

Full Name (Last, First, Middle Initial)

GERALD OTTEN

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 ▼

436.58

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109072

Amount of Each Receipt this Period

40.08

**C.**

Full Name (Last, First, Middle Initial)

GERALD OTTEN

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 ▼

476.66

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109185

Amount of Each Receipt this Period

40.08

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

142.14

**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: PAGE 199 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

GINA R L PACHECO

Mailing Address P. O. BOX 5488

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 ▼

850.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	0	8

Transaction ID: SA11AI.109361

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

WILLIAM M. PADISAK, Jr.

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	0	8

Transaction ID: SA11AI.109415

Amount of Each Receipt this Period

23.24

**C.**

Full Name (Last, First, Middle Initial)

WILLIAM M. PADISAK, Jr.

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.36

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	0	8

Transaction ID: SA11AI.109474

Amount of Each Receipt this Period

23.24

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

196.48

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 200 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

HAROLD A. PALMER

Mailing Address 7565 Liddesdale Blvd.

City State Zip Code  
 Blacklick OH 43004

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 ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109416

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

HAROLD A. PALMER

Mailing Address 7565 Liddesdale Blvd.

City State Zip Code  
 Blacklick OH 43004

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109475

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

RACHEL S. PANCIERA

Mailing Address 5210 Biddison Lane

City State Zip Code  
 Baltimore MD 21206

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME INT'L

Occupation  
ORGANIZING RECRUITER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.13

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109073

Amount of Each Receipt this Period

31.42

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

111.42

**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 201 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

RACHEL S. PANCIERA

Mailing Address 5210 Biddison Lane

City

Baltimore

State

MD

Zip Code

21206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

ORGANIZING RECRUITER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.55

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109186

Amount of Each Receipt this Period

31.42

**B.**

Full Name (Last, First, Middle Initial)

CHERYL PARISI

Mailing Address 1932 Wallcott Way

City

Los Angeles

State

CA

Zip Code

90039

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CA CN 36

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.110236

Amount of Each Receipt this Period

70.00

**C.**

Full Name (Last, First, Middle Initial)

EDDIE L. PARKS

Mailing Address 5674 Forest Grove Ave

City

Westerville

State

OH

Zip Code

43081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 11/SOOH

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.109975

Amount of Each Receipt this Period

25.00

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

126.42

**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 202 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

EDDIE L. PARKS

Mailing Address 5674 Forest Grove Ave

City

Westerville

State

OH

Zip Code

43081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 11/SOOH

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.110042

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

DEBORAH JO PATTON

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 ▼

533.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109537

Amount of Each Receipt this Period

67.12

**C.**

Full Name (Last, First, Middle Initial)

BARRY PEARCE

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 ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109299

Amount of Each Receipt this Period

66.30

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

158.42

**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 203 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

WILLIE L. PELOTE

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 ▼

544.42

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109074

Amount of Each Receipt this Period

49.49

**B.**

Full Name (Last, First, Middle Initial)

WILLIE L. PELOTE

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 ▼

593.91

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109187

Amount of Each Receipt this Period

49.49

**C.**

Full Name (Last, First, Middle Initial)

JOANNE M. PELS

Mailing Address 6987 County 38 N.W.

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 ▼

473.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109814

Amount of Each Receipt this Period

79.16

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

178.14

**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: PAGE 204 / 360

(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 &amp; MUNICIPAL EMPLOYEES - PEOPLE, QUALIFIED

**A.**

Full Name (Last, First, Middle Initial)

RANDOLPH P. PERREIRA

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	7	/	2	0	0	8

Transaction ID: SA11AI.109362

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

ELIZABETH PERROW

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 ▼

440.84

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109076

Amount of Each Receipt this Period

40.08

**C.**

Full Name (Last, First, Middle Initial)

ELIZABETH PERROW

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 ▼

480.92

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.109189

Amount of Each Receipt this Period

40.08

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

155.16

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 205 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

MICHAEL S. PERRY

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. &amp; TRAINING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: SA11AI.109538

Amount of Each Receipt this Period

67.12

**B.**

Full Name (Last, First, Middle Initial)

JANE ANN PETERSON

Mailing Address 2179 Shoreham Road

City

Columbus

State

OH

Zip Code

43220

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 ▼

540.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	0	8

Transaction ID: SA11AI.109417

Amount of Each Receipt this Period

38.50

**C.**

Full Name (Last, First, Middle Initial)

JANE ANN PETERSON

Mailing Address 2179 Shoreham Road

City

Columbus

State

OH

Zip Code

43220

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 ▼

579.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	0	8

Transaction ID: SA11AI.109476

Amount of Each Receipt this Period

38.50

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

144.12

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 206 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

DANIEL PFEIFER

Mailing Address 18990 Ibsen Road

City

Sparta

State

WI

Zip Code

54656

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

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
0	6	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.110097

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

DANIEL PFEIFER

Mailing Address 18990 Ibsen Road

City

Sparta

State

WI

Zip Code

54656

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.110131

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

STACY PFLUGMACHER

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 ▼

348.28

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.109539

Amount of Each Receipt this Period

44.16

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

124.16

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 207 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

STEVAN P. PICKARD

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  
AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.16

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109609

Amount of Each Receipt this Period

62.30

**B.**

Full Name (Last, First, Middle Initial)

RONALD W PITTS

Mailing Address 2001-A Industrial Drive

City

State

Zip Code

Marion

IL

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 ▼

529.72

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109540

Amount of Each Receipt this Period

66.70

**C.**

Full Name (Last, First, Middle Initial)

JOSEPH PLUGER

Mailing Address 605 South Jackson

City

State

Zip Code

Gardner

IL

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 ▼

481.63

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109541

Amount of Each Receipt this Period

61.27

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

190.27

**TOTAL** This Period (last page this line 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 208 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

KEVAN L. PLUMLEE

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 ▼

492.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109542

Amount of Each Receipt this Period

61.98

**B.**

Full Name (Last, First, Middle Initial)

CLIFFORD T. POEHLER

Mailing Address 565 Glendale Street

City

Minneapolis

State

MN

Zip Code

55104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MN CN 5/HENNEPIN

Occupation

LEGAL ASSISTANT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.95

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110589

Amount of Each Receipt this Period

44.30

**C.**

Full Name (Last, First, Middle Initial)

NICOLE R. POLLARD

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 I

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.90

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109077

Amount of Each Receipt this Period

49.26

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

155.54

**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: PAGE 209 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

NICOLE R. POLLARD

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 I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.16

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109190

Amount of Each Receipt this Period

49.26

**B.**

Full Name (Last, First, Middle Initial)

KENNETH POTOCKI

Mailing Address 17614 Manhattan Road

City

Elwood

State

IL

Zip Code

60421-9419

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 ▼

606.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109543

Amount of Each Receipt this Period

76.56

**C.**

Full Name (Last, First, Middle Initial)

EDWARD POTTS

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 ▼

208.56

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109301

Amount of Each Receipt this Period

34.76

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

160.58

**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 210 / 360

(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, QUALIFI-  
ED**A.**Full Name (Last, First, Middle Initial)  
GREGORY POWELL

Mailing Address 11505 Circle Drive

City	State	Zip Code
Austin	TX	78748

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME TX LOC 1624Occupation  
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.110425

Amount of Each Receipt this Period

20.00

**B.**Full Name (Last, First, Middle Initial)  
GREGORY POWELL

Mailing Address 11505 Circle Drive

City	State	Zip Code
Austin	TX	78748

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME TX LOC 1624Occupation  
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	6	/	2	0	0	8

Transaction ID: SA11AI.110426

Amount of Each Receipt this Period

40.00

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

Mailing Address 11505 Circle Drive

City	State	Zip Code
Austin	TX	78748

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME TX LOC 1624Occupation  
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.109653

Amount of Each Receipt this Period

70.00

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: PAGE 211 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

GREGORY POWELL

Mailing Address 11505 Circle Drive

City

Austin

State

TX

Zip Code

78748

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME TX LOC 1624

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.110427

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

SALLY A. POWLESS

Mailing Address 2410 Westbrook Drive

City

Toledo

State

OH

Zip Code

43613-3921

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 ▼

503.59

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	5	/	2	0	0	8

Transaction ID: SA11AI.109610

Amount of Each Receipt this Period

84.76

**C.**

Full Name (Last, First, Middle Initial)

REBECCA A. PRICE

Mailing Address 79652 Second Lake Rd.

City

Willow River

State

MN

Zip Code

55795

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MN CN 5/SOMN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	6	/	2	0	0	8

Transaction ID: SA11AI.109876

Amount of Each Receipt this Period

33.24

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

138.00

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 212 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

ROBYN PRICE

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109688

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

ROBYN PRICE

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.109732

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

MARCIA PROVOST

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/SOMN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109877

Amount of Each Receipt this Period

48.00

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

98.00

**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 213 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JANET PULLEN

Mailing Address 8003 Alcoa 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

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.13

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109078

Amount of Each Receipt this Period

32.29

**B.**

Full Name (Last, First, Middle Initial)

JANET PULLEN

Mailing Address 8003 Alcoa 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

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.42

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109191

Amount of Each Receipt this Period

32.29

**C.**

Full Name (Last, First, Middle Initial)

LLOYD L. RAINS

Mailing Address 15829 Narraganset Oval

City

Cleveland

State

OH

Zip Code

44130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.110562

Amount of Each Receipt this Period

50.00

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

114.58

**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 214 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

LLOYD L. RAINS

Mailing Address 15829 Narraganset Oval

City

Cleveland

State

OH

Zip Code

44130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109418

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

LLOYD L. RAINS

Mailing Address 15829 Narraganset Oval

City

Cleveland

State

OH

Zip Code

44130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109477

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

ZOLLIE RAYNER

Mailing Address P.O. Box 51

City

Albion

State

PA

Zip Code

16401

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 ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109302

Amount of Each Receipt this Period

66.30

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

146.30

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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☒ 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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

STEVEN E. REAMS

Mailing Address 3642 Shortridge Circle

City

Cincinnati

State

OH

Zip Code

45247

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 ▼

304.92

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109611

Amount of Each Receipt this Period

51.32

**B.**

Full Name (Last, First, Middle Initial)

TERRY M. REED

Mailing Address 2737 Yellowrock Place

City

Hilliard

State

OH

Zip Code

43026

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 ▼

479.67

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109079

Amount of Each Receipt this Period

43.61

**C.**

Full Name (Last, First, Middle Initial)

TERRY M. REED

Mailing Address 2737 Yellowrock Place

City

Hilliard

State

OH

Zip Code

43026

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 ▼

523.28

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109192

Amount of Each Receipt this Period

43.61

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

138.54

**TOTAL** This Period (last page this line number only) .....

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

STEPHEN REGENSTREIF

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 ▼

649.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109080

Amount of Each Receipt this Period

59.00

**B.**

Full Name (Last, First, Middle Initial)

STEPHEN REGENSTREIF

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 ▼

708.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109193

Amount of Each Receipt this Period

59.00

**C.**

Full Name (Last, First, Middle Initial)

DEAN REYNOLDS, III

Mailing Address 1025 Delaware Avenue

City

Crawford

State

PA

Zip Code

17740

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 ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109303

Amount of Each Receipt this Period

66.30

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

184.30

**TOTAL** This Period (last page this line number only) .....



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

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

LISA E. RICE

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 ▼

406.45

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109081

Amount of Each Receipt this Period

36.95

**B.**

Full Name (Last, First, Middle Initial)

LISA E. RICE

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 ▼

443.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109194

Amount of Each Receipt this Period

36.95

**C.**

Full Name (Last, First, Middle Initial)

SHAWN E. RICHARDSON

Mailing Address 6688 Markwood St.

City

Worthington

State

OH

Zip Code

43085

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 11/SOOH

Occupation

TRANSPORTATION

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.109982

Amount of Each Receipt this Period

40.00

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

113.90

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

SHAWN E. RICHARDSON

Mailing Address 6688 Markwood St.

City

Worthington

State

OH

Zip Code

43085

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 11/SOCH

Occupation

TRANSPORTATION

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.110049

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

ALAN RICHTER

Mailing Address 6807 Greenspring Avenue

City

Baltimore

State

MD

Zip Code

21209

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 ▼

261.36

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109082

Amount of Each Receipt this Period

26.54

**C.**

Full Name (Last, First, Middle Initial)

ALAN RICHTER

Mailing Address 6807 Greenspring Avenue

City

Baltimore

State

MD

Zip Code

21209

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 ▼

287.90

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109195

Amount of Each Receipt this Period

26.54

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

93.08

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

MICHELLE RIDER

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 ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109305

Amount of Each Receipt this Period

62.50

**B.**

Full Name (Last, First, Middle Initial)

THOMAS J. RITCHIE

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 ▼

575.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109613

Amount of Each Receipt this Period

96.87

**C.**

Full Name (Last, First, Middle Initial)

GLADYS RIVERA

Mailing Address P.O. Box 1414

City

Lancaster

State

PA

Zip Code

17608-1414

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME PA CN 13/SOPA

Occupation

INSPECTION SAFETY PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.110490

Amount of Each Receipt this Period

50.00

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

209.37

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 220 / 360

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)  
CLAUDIA ROBERSON

Mailing Address 7340 S. Yates  
2nd Fl.

City State Zip Code  
Chicago IL 60649

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME IL CN 31

Occupation  
ASSOCIATE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

689.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109544

Amount of Each Receipt this Period

86.76

**B.**

Full Name (Last, First, Middle Initial)  
STEPHEN M. ROBERTS

Mailing Address 5661 Windsor Woods Drive

City State Zip Code  
Columbus OH 43230

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 ▼

377.66

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109614

Amount of Each Receipt this Period

63.55

**C.**

Full Name (Last, First, Middle Initial)  
JESSICA R. ROBINSON

Mailing Address 7901 Chicago Avenue

City State Zip Code  
SilverSpring MD 20910

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME INT'L

Occupation  
ASSOCIATE GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

506.05

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109083

Amount of Each Receipt this Period

46.92

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

197.23

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

JESSICA R. ROBINSON

Mailing Address 7901 Chicago Avenue

City

SilverSpring

State

MD

Zip Code

20910

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

ASSOCIATE GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.97

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109196

Amount of Each Receipt this Period

46.92

**B.**

Full Name (Last, First, Middle Initial)

YVONNE ROBINSON

Mailing Address 112444 S Carpenter Street

City

Calumet Park

State

IL

Zip Code

60827

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 ▼

492.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109546

Amount of Each Receipt this Period

61.98

**C.**

Full Name (Last, First, Middle Initial)

LYNN ANN RODENHUIS

Mailing Address 9135 Cowenton Avenue

City

Perry Hall

State

MD

Zip Code

21128

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 ▼

488.64

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109084

Amount of Each Receipt this Period

44.42

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

153.32

**TOTAL** This Period (last page this line number only) .....

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

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☒ 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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

LYNN ANN RODENHUIS

Mailing Address 9135 Cowenton Avenue

City

Perry Hall

State

MD

Zip Code

21128

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 ▼

533.06

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109197

Amount of Each Receipt this Period

44.42

**B.**

Full Name (Last, First, Middle Initial)

LAWRENCE ROEHRIG

Mailing Address 13084 Lia Court

City

Lindon

State

MI

Zip Code

48451

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MI CN 25

Occupation

SECRETARY-TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1049.58

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109690

Amount of Each Receipt this Period

99.96

**C.**

Full Name (Last, First, Middle Initial)

LAWRENCE ROEHRIG

Mailing Address 13084 Lia Court

City

Lindon

State

MI

Zip Code

48451

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MI CN 25

Occupation

SECRETARY-TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1149.54

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.109734

Amount of Each Receipt this Period

99.96

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

244.34

**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 PageFOR LINE NUMBER: PAGE 223 / 360  
(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

CHARLES ROGINSKI

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

REGIONAL DIRECTOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.109419

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

CHARLES ROGINSKI

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

REGIONAL DIRECTOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	6	/	2	0	0	8

Transaction ID: SA11AI.109478

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

ETHAN ROME

Mailing Address 1414 17th Street, NW  
Apt. #603

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

DIRECTOR, PUBLIC AFFAIRS

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

756.43

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109085

Amount of Each Receipt this Period

68.77

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

148.77

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: PAGE 224 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

ETHAN ROME

Mailing Address 1414 17th Street, NW  
Apt. #603

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME INT'L

Occupation  
DIRECTOR, PUBLIC AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109198

Amount of Each Receipt this Period

68.77

**B.**

Full Name (Last, First, Middle Initial)

JOYCE L. ROONEY

Mailing Address 13080 Dronfield Avenue  
#73

City State Zip Code  
Sylmar CA 91342

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME CA CN 36/Local 3339

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110252

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

JOYCE L. ROONEY

Mailing Address 13080 Dronfield Avenue  
#73

City State Zip Code  
Sylmar CA 91342

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME CA CN 36/Local 3339

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.110253

Amount of Each Receipt this Period

25.00

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

118.77

**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: PAGE 225 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL C. ROSS

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 ▼

492.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109547

Amount of Each Receipt this Period

61.98

**B.**

Full Name (Last, First, Middle Initial)

STEVE ROTH

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 ▼

205.37

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.109782

Amount of Each Receipt this Period

18.67

**C.**

Full Name (Last, First, Middle Initial)

STEVE ROTH

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 ▼

224.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109788

Amount of Each Receipt this Period

18.67

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

99.32

**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 226 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JOSEPH K. ROWE

Mailing Address 34 Lakeside Drive

City

Honesdale

State

PA

Zip Code

18431

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 ▼

500.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109306

Amount of Each Receipt this Period

83.34

**B.**

Full Name (Last, First, Middle Initial)

GARY F. ROWELL

Mailing Address 18205 NW Bronson Road  
Unit S4

City

Portland

State

OR

Zip Code

97229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OR CN 75/SOOR

Occupation

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.110548

Amount of Each Receipt this Period

47.50

**C.**

Full Name (Last, First, Middle Initial)

JOSEPH P. RUGOLA

Mailing Address 4771 Powderhorn Lane

City

Westerville

State

OH

Zip Code

43081

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 ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109421

Amount of Each Receipt this Period

85.00

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

215.84

**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  
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FOR LINE NUMBER: PAGE 227 / 360

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

JOSEPH P. RUGOLA

Mailing Address 4771 Powderhorn Lane

City

Westerville

State

OH

Zip Code

43081

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 ▼

1139.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109655

Amount of Each Receipt this Period

14.00

**B.**

Full Name (Last, First, Middle Initial)

JOSEPH P. RUGOLA

Mailing Address 4771 Powderhorn Lane

City

Westerville

State

OH

Zip Code

43081

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 ▼

1224.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109480

Amount of Each Receipt this Period

85.00

**C.**

Full Name (Last, First, Middle Initial)

VEDA RUGOLA

Mailing Address 4771 Powderhorn Lane

City

Westerville

State

OH

Zip Code

43081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109422

Amount of Each Receipt this Period

38.50

**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: PAGE 228 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

VEDA RUGOLA

Mailing Address 4771 Powderhorn Lane

City

Westerville

State

OH

Zip Code

43081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

619.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	6	/	2	0	0	8

Transaction ID: SA11AI.109481

Amount of Each Receipt this Period

38.50

**B.**

Full Name (Last, First, Middle Initial)

VERA SAADE

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 ▼

252.09

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.109691

Amount of Each Receipt this Period

23.19

**C.**

Full Name (Last, First, Middle Initial)

VERA SAADE

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 ▼

275.28

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	0	/	2	0	0	8

Transaction ID: SA11AI.109735

Amount of Each Receipt this Period

23.19

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

84.88

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  
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FOR LINE NUMBER: PAGE 229 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JEFFREY C. SABIN

Mailing Address 624 Celevland Street

City

Eveleth

State

MN

Zip Code

55734

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 ▼

299.64

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109817

Amount of Each Receipt this Period

49.94

**B.**

Full Name (Last, First, Middle Initial)

GEORGE SACHARIAN

Mailing Address 126 S. Lynn Blvd.

City

Upper Darby

State

PA

Zip Code

19082

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 ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109307

Amount of Each Receipt this Period

66.30

**C.**

Full Name (Last, First, Middle Initial)

WILLIAM SAMS

Mailing Address 34 Main Street  
#A

City

The Plains

State

OH

Zip Code

45780

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 ▼

496.11

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109615

Amount of Each Receipt this Period

84.76

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

201.00

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

BETHANY E. SANDERS

Mailing Address 836 Harrison Avenue  
Apt. #3

City State Zip Code  
Columbus OH 43215

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 ▼

305.81

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109616

Amount of Each Receipt this Period

49.78

**B.**

Full Name (Last, First, Middle Initial)

WILLIAM SARVER

Mailing Address 1804 S. Country Club Road

City State Zip Code  
Decatur IL 62521-4462

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME IL CN 31

Occupation  
BUSINESS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

619.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109548

Amount of Each Receipt this Period

78.22

**C.**

Full Name (Last, First, Middle Initial)

EDWARD SASSO

Mailing Address 50 Knollwood Road

City State Zip Code  
New Britain CT 06052

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME CT CN 4

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.98

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.110455

Amount of Each Receipt this Period

37.55

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

165.55

**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  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

LEE ALAN SAUNDERS

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

EXECUTIVE ASSISTANT TO PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

988.56

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109086

Amount of Each Receipt this Period

89.87

**B.**

Full Name (Last, First, Middle Initial)

LEE ALAN SAUNDERS

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

EXECUTIVE ASSISTANT TO PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1078.43

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109199

Amount of Each Receipt this Period

89.87

**C.**

Full Name (Last, First, Middle Initial)

MARIANNE SAUNDERS

Mailing Address 48 Mullen Street

City

Uniontown

State

PA

Zip Code

15401-4060

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 ▼

352.80

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109308

Amount of Each Receipt this Period

58.80

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

238.54

**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: PAGE 232 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

BELINDA C. SAVERINO

Mailing Address 11007 Pompey Drive

City

Upper Malboro

State

MD

Zip Code

20772

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

EXECUTIVE OFFICE ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

598.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109087

Amount of Each Receipt this Period

54.42

**B.**

Full Name (Last, First, Middle Initial)

BELINDA C. SAVERINO

Mailing Address 11007 Pompey Drive

City

Upper Malboro

State

MD

Zip Code

20772

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

EXECUTIVE OFFICE ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.109200

Amount of Each Receipt this Period

54.42

**C.**

Full Name (Last, First, Middle Initial)

MARY ANN SAYTAR

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 ▼

262.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.109309

Amount of Each Receipt this Period

43.68

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

152.52

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 233 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

LORELEI SCAFARO

Mailing Address 945 N Lombard Avenue

City

Oak Park

State

IL

Zip Code

60302-1432

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 ▼

403.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.109549

Amount of Each Receipt this Period

51.00

**B.**

Full Name (Last, First, Middle Initial)

LAWRENCE SCANLON

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

Occupation

DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

806.74

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109088

Amount of Each Receipt this Period

73.34

**C.**

Full Name (Last, First, Middle Initial)

LAWRENCE SCANLON

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

Occupation

DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.109201

Amount of Each Receipt this Period

73.34

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

197.68

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 234 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

WILLIAM SCHLITZ

Mailing Address 2201 Broadway Street  
Suite #715

City State Zip Code  
Oakland CA 94612

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME CA LOC 3299

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110443

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

WILLIAM SCHLITZ

Mailing Address 2201 Broadway Street  
Suite #715

City State Zip Code  
Oakland CA 94612

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME CA LOC 3299

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.110447

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

PETER SCHMALZ

Mailing Address 1227 N. Ridgeland Avenue

City State Zip Code  
Oak Park IL 60302

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 ▼

606.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109550

Amount of Each Receipt this Period

76.56

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

176.56

**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 235 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JAMES SCHMITZ

Mailing Address 15237 Dufief Drive

City

North Potomac

State

MD

Zip Code

20878

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

DIRECTOR, ORGANIZING & FIELD SVCS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

806.74

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109089

Amount of Each Receipt this Period

73.34

**B.**

Full Name (Last, First, Middle Initial)

JAMES SCHMITZ

Mailing Address 15237 Dufief Drive

City

North Potomac

State

MD

Zip Code

20878

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

DIRECTOR, ORGANIZING & FIELD SVCS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109202

Amount of Each Receipt this Period

73.34

**C.**

Full Name (Last, First, Middle Initial)

ALBERT SCHNAUFER

Mailing Address 400 South Flower  
#65

City

Orange

State

CA

Zip Code

92868

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CA CN 36

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

526.80

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.110237

Amount of Each Receipt this Period

62.40

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

209.08

**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 236 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JON SCHOEB

Mailing Address 212 N 4th Street

City

Mankato

State

MN

Zip Code

56001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MN CN 5/SOMN

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 Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109878

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

ERIC SCHUBERT

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 ▼

220.81

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109310

Amount of Each Receipt this Period

38.26

**C.**

Full Name (Last, First, Middle Initial)

MARY SCHWANGER

Mailing Address 419 Valley Street

City

Marysville

State

PA

Zip Code

17053

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 ▼

622.80

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109311

Amount of Each Receipt this Period

103.80

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

182.06

**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 237 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

CATHERINE SCOTT

Mailing Address 1606 Walnut Street  
2nd Floor

City State Zip Code  
Philadelphia PA 19103

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME PA CN 47

Occupation  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.110074

Amount of Each Receipt this Period

45.00

**B.**

Full Name (Last, First, Middle Initial)

GAIL M. SCOTT

Mailing Address 751 Bulen Avenue

City State Zip Code  
Columbus OH 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 ▼

226.68

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109617

Amount of Each Receipt this Period

38.74

**C.**

Full Name (Last, First, Middle Initial)

SHELLEY K. SEEBERG

Mailing Address 13096 Charlston Way

City State Zip Code  
Rosemount MN 55068

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME INT'L

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.31

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109090

Amount of Each Receipt this Period

40.21

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

123.95

**TOTAL** This Period (last page this line 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 238 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

SHELLEY K. SEEBERG

Mailing Address 13096 Charlston Way

City

Rosemount

State

MN

Zip Code

55068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.52

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109203

Amount of Each Receipt this Period

40.21

**B.**

Full Name (Last, First, Middle Initial)

JOHN SEFERIAN

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 ▼

944.71

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109091

Amount of Each Receipt this Period

85.88

**C.**

Full Name (Last, First, Middle Initial)

JOHN SEFERIAN

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 ▼

1030.59

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109204

Amount of Each Receipt this Period

85.88

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

211.97

**TOTAL** This Period (last page this line 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 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

ELIOT A. SEIDE

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 ▼

1007.22

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109818

Amount of Each Receipt this Period

89.90

**B.**

Full Name (Last, First, Middle Initial)

ELIOT A. SEIDE

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 ▼

1021.22

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109657

Amount of Each Receipt this Period

14.00

**C.**

Full Name (Last, First, Middle Initial)

JERRY SERFLING

Mailing Address 2388 Hidden Valley Lane

City

Stillwater

State

MN

Zip Code

55082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MN CN 5/CN14

Occupation

ASSISTANT DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.86

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109819

Amount of Each Receipt this Period

74.28

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

178.18

**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 240 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

MICHELLE A. SFORZA

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

ASST. DIRECTOR, STRATEGIC AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.12

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109092

Amount of Each Receipt this Period

44.42

**B.**

Full Name (Last, First, Middle Initial)

MICHELLE A. SFORZA

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

ASST. DIRECTOR, STRATEGIC AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.54

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109205

Amount of Each Receipt this Period

44.42

**C.**

Full Name (Last, First, Middle Initial)

DOMINIC SGRO

Mailing Address 144 Stormer Road

City

Indiana

State

PA

Zip Code

15701-0144

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 ▼

622.80

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109312

Amount of Each Receipt this Period

103.80

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

192.64

**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: PAGE 241 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)  
TIMOTHY P. SHAFER

Mailing Address P. O. Box 322

City State Zip Code  
Waverly OH 45690

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 ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109906

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)  
TIMOTHY P. SHAFER

Mailing Address P. O. Box 322

City State Zip Code  
Waverly OH 45690

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 ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.109929

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)  
DONALD G. SHAFFER

Mailing Address R. D. #5, Box 82

City State Zip Code  
Brookeville PA 15825-9501

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 ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109313

Amount of Each Receipt this Period

66.30

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

166.30

**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 242 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

WANDA SHELTON-MARTIN

Mailing Address 1410 Bush Street  
Suite A

City State Zip Code  
Baltimore MD 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 ▼

229.97

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.109850

Amount of Each Receipt this Period

35.38

**B.**

Full Name (Last, First, Middle Initial)

CYNTHIA R. SILVA

Mailing Address 3770 Upper Drive

City State Zip Code  
Lake Oswego OR 97035

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME OR CN 75/SOOR

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.110549

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

ISSA J. SIMPSON

Mailing Address 1139 S.E. 16th Avenue

City State Zip Code  
Portland OR 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 ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.110532

Amount of Each Receipt this Period

60.00

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

155.38

**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: PAGE 243 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

ANTHONY L. SIMS

Mailing Address 6284 Shackelford Terrace

City

Alexandria

State

VA

Zip Code

22312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.17

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109093

Amount of Each Receipt this Period

40.96

**B.**

Full Name (Last, First, Middle Initial)

ANTHONY L. SIMS

Mailing Address 6284 Shackelford Terrace

City

Alexandria

State

VA

Zip Code

22312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

487.13

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109206

Amount of Each Receipt this Period

40.96

**C.**

Full Name (Last, First, Middle Initial)

CAROL ANN SIMS

Mailing Address 7337 S. Shore Drive  
#724

City

Chicago

State

IL

Zip Code

60649

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 ▼

507.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109551

Amount of Each Receipt this Period

63.84

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

145.76

**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 244 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

TODD L. SINGER

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/SOPA

Occupation

ADMINISTRATIVE/CLERICAL

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.110491

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

ROBERTA J. SKOK

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 ▼

503.59

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109619

Amount of Each Receipt this Period

84.76

**C.**

Full Name (Last, First, Middle Initial)

TERRY SKULTETY

Mailing Address 222 Meade Street

City

Homer City

State

PA

Zip Code

15748

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 ▼

224.31

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109315

Amount of Each Receipt this Period

38.26

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

163.02

**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: PAGE 245 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

SUSAN SLABAUGH

Mailing Address 2135 Michelle Drive

City

Grove City

State

OH

Zip Code

43123

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

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
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.109423

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

SUSAN SLABAUGH

Mailing Address 2135 Michelle Drive

City

Grove City

State

OH

Zip Code

43123

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	6	/	2	0	0	8

Transaction ID: SA11AI.109482

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

BETTY SMITH

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 ▼

342.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.109694

Amount of Each Receipt this Period

31.15

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

51.15

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 246 / 360

(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, QUALIFI-  
ED**A.**Full Name (Last, First, Middle Initial)  
BETTY SMITH

Mailing Address 19292 Archer

City	State	Zip Code
Detroit	MI	48219

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MI CN 25Occupation  
ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.57

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	0	8

Transaction ID: SA11AI.109738

Amount of Each Receipt this Period

31.15

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

Mailing Address 621 Cypress

City	State	Zip Code
Chatham	IL	62629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IL CN 31Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: SA11AI.109552

Amount of Each Receipt this Period

63.84

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

Mailing Address 2013 S. 16th Avenue

City	State	Zip Code
Broadview	IL	60155

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IL CN 31Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: SA11AI.109553

Amount of Each Receipt this Period

61.98

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

156.97

TOTAL This Period (last page this line 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 247 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

CHRISTOPHER SMUDDE

Mailing Address 1821 Clearview Drive

City

Springfield

State

IL

Zip Code

62704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IL CN 31

Occupation

MIS SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

533.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109554

Amount of Each Receipt this Period

67.12

**B.**

Full Name (Last, First, Middle Initial)

NORMAN L. SNYDER

Mailing Address 139 Sycamore Street East  
#4

City

St. Paul

State

MN

Zip Code

55117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MN CN 5/RAMSEY

Occupation

COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110475

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

SHARON SOBER

Mailing Address 212 5th Street

City

Catawissa

State

PA

Zip Code

17820

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 ▼

622.80

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109316

Amount of Each Receipt this Period

103.80

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

210.92

**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 248 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

DARRIN SPANN

Mailing Address 6130 Springford Drive  
#C6

City	State	Zip Code
Harrisburg	PA	17111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME PA CN 13Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.109317

Amount of Each Receipt this Period

80.84

**B.**

Full Name (Last, First, Middle Initial)

DOLORES SPEARS

Mailing Address 2023 West 31st Street

City	State	Zip Code
Los Angeles	CA	90018

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CA CN 36Occupation  
BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	9	/	2	0	0	8

Transaction ID: SA11AI.110240

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

EDITHIA M. SPEARS

Mailing Address 4690 Ascot Drive

City	State	Zip Code
Columbus	OH	43229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH CN 8Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	5	/	2	0	0	8

Transaction ID: SA11AI.109621

Amount of Each Receipt this Period

58.36

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

169.20

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 249 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

BEVERLY J. SPETZ

Mailing Address 112 Elmwood Street

City

Delta

State

OH

Zip Code

43515-1126

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.109425

Amount of Each Receipt this Period

19.24

**B.**

Full Name (Last, First, Middle Initial)

BEVERLY J. SPETZ

Mailing Address 112 Elmwood Street

City

Delta

State

OH

Zip Code

43515-1126

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.36

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	6	/	2	0	0	8

Transaction ID: SA11AI.109484

Amount of Each Receipt this Period

19.24

**C.**

Full Name (Last, First, Middle Initial)

LARRY SPIVACK

Mailing Address 733 S. Lombard Avenue

City

Oak Park

State

IL

Zip Code

60304-1607

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IL CN 31

Occupation

COLLECTIVE BARGAINING SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.109555

Amount of Each Receipt this Period

76.56

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

115.04

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 250 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

KAMALA B. SRIKAR

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

MANAGER, CONFERENCE &amp; TRAVEL SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.87

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109094

Amount of Each Receipt this Period

42.08

**B.**

Full Name (Last, First, Middle Initial)

KAMALA B. SRIKAR

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

MANAGER, CONFERENCE &amp; TRAVEL SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

996.95

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.109207

Amount of Each Receipt this Period

542.08

**C.**

Full Name (Last, First, Middle Initial)

CAROL E. STAHLKE

Mailing Address 19378 Silverfox Parkway

City

Oregon City

State

OR

Zip Code

97045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OR CN 75/SOOR

Occupation

CUST ACCTS SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	5	/	2	0	0	8

Transaction ID: SA11AI.110551

Amount of Each Receipt this Period

15.00

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

599.16

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 251 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

MARIANNE STEGER

Mailing Address 2930 Woodson Drive

City

Hilliard

State

OH

Zip Code

43026-1925

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH CN 8

Occupation

DIRECTOR OF ADMINISTRATIVE SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

514.80

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109622

Amount of Each Receipt this Period

86.64

**B.**

Full Name (Last, First, Middle Initial)

KATHY A. STEICHEN

Mailing Address 830 W. 18th Street  
3rd Fl.

City

Chicago

State

IL

Zip Code

60608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IL CN 31

Occupation

PROJECT STAFF ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.12

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109556

Amount of Each Receipt this Period

50.38

**C.**

Full Name (Last, First, Middle Initial)

BRADLEY STEVENS

Mailing Address 514 Shatto Place  
3rd Floor

City

Los Angeles

State

CA

Zip Code

90020

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CA CN 36/Local 2712

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.110604

Amount of Each Receipt this Period

270.00

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

407.02

**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: PAGE 252 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

STEVEN STOKES

Mailing Address 1249 W. Chase

City

Chicago

State

IL

Zip Code

60626

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 ▼

400.12

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109557

Amount of Each Receipt this Period

50.38

**B.**

Full Name (Last, First, Middle Initial)

WILLIAM STOUFFER

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 ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109318

Amount of Each Receipt this Period

66.30

**C.**

Full Name (Last, First, Middle Initial)

TIMOTHY J. STRECKER

Mailing Address 1603 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

PROJECT MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.96

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109095

Amount of Each Receipt this Period

45.63

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

162.31

**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 253 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

TIMOTHY J. STRECKER

Mailing Address 1603 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

PROJECT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

547.59

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109208

Amount of Each Receipt this Period

45.63

**B.**

Full Name (Last, First, Middle Initial)

MICHELE S. STREET

Mailing Address 16808 Westbourne Terrace

City

Gaithersburg

State

MD

Zip Code

20878

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 ▼

333.84

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109096

Amount of Each Receipt this Period

30.75

**C.**

Full Name (Last, First, Middle Initial)

MICHELE S. STREET

Mailing Address 16808 Westbourne Terrace

City

Gaithersburg

State

MD

Zip Code

20878

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 ▼

364.59

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109209

Amount of Each Receipt this Period

30.75

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

107.13

**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: PAGE 254 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

WANDA M. SUBER

Mailing Address 805 Broderick Dr.

City

Oxon Hill

State

MD

Zip Code

20745

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

STAFF SPECIALIST, HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109097

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

WANDA M. SUBER

Mailing Address 805 Broderick Dr.

City

Oxon Hill

State

MD

Zip Code

20745

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

STAFF SPECIALIST, HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109210

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

MICHAEL E. SUKAL

Mailing Address 852 Darlington Drive

City

Avon

State

IN

Zip Code

46123

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 ▼

566.96

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109098

Amount of Each Receipt this Period

51.54

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

91.54

**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: PAGE 255 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL E. SUKAL

Mailing Address 852 Darlington Drive

City

Avon

State

IN

Zip Code

46123

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 ▼

618.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109211

Amount of Each Receipt this Period

51.54

**B.**

Full Name (Last, First, Middle Initial)

MARY SULLIVAN

Mailing Address 61 Woodside Drive

City

Albany

State

NY

Zip Code

12208-1157

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME NY LOC 1000

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.110435

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

MARY SULLIVAN

Mailing Address 61 Woodside Drive

City

Albany

State

NY

Zip Code

12208-1157

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME NY LOC 1000

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

795.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.110436

Amount of Each Receipt this Period

15.00

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

81.54

**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: PAGE 256 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

MARY SULLIVAN

Mailing Address 61 Woodside Drive

City

Albany

State

NY

Zip Code

12208-1157

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME NY LOC 1000

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

895.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.109658

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MICHAEL SVEDA

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 ▼

214.73

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	1	/	2	0	0	8

Transaction ID: SA11AI.110598

Amount of Each Receipt this Period

31.26

**C.**

Full Name (Last, First, Middle Initial)

JEFFREY M. TAGGART

Mailing Address 12001 Market Street  
Unit 450

City

Reston

State

VA

Zip Code

20190

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, ACCOUNTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1149.23

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109099

Amount of Each Receipt this Period

104.48

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

235.74

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 257 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JEFFREY M. TAGGART

Mailing Address 12001 Market Street  
Unit 450

City State Zip Code  
Reston VA 20190

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME INT'L

Occupation  
ASSOCIATE DIRECTOR, ACCOUNTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1253.71

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109212

Amount of Each Receipt this Period

104.48

**B.**

Full Name (Last, First, Middle Initial)

JAMES TAIT

Mailing Address 119 Hells Kitchen Court

City State Zip Code  
Drums PA 18222

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 ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109320

Amount of Each Receipt this Period

66.30

**C.**

Full Name (Last, First, Middle Initial)

MIGUEL TAMAYO

Mailing Address 2201 Broadway  
Suite 715

City State Zip Code  
Oakland CA 94612

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME LOC 3299, HED

Occupation  
REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110444

Amount of Each Receipt this Period

65.00

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

235.78

**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 258 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)  
MIGUEL TAMAYO

Mailing Address 2201 Broadway  
Suite 715

City State Zip Code  
Oakland CA 94612

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME LOC 3299, HED

Occupation  
REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.110445

Amount of Each Receipt this Period

65.00

**B.**

Full Name (Last, First, Middle Initial)  
CHERILYN M. TATE

Mailing Address 12103 SE 164th Street

City State Zip Code  
Renton WA 98058

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 ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.110408

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)  
CHERILYN M. TATE

Mailing Address 12103 SE 164th Street

City State Zip Code  
Renton WA 98058

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 ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.110593

Amount of Each Receipt this Period

15.00

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

95.00

**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 259 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

NANCY P. TAYLOR

Mailing Address 55 Northwest Drive

City

Huntingtown

State

MD

Zip Code

20639

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

AFFILIATE RELATIONS, MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.17

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109100

Amount of Each Receipt this Period

40.08

**B.**

Full Name (Last, First, Middle Initial)

NANCY P. TAYLOR

Mailing Address 55 Northwest Drive

City

Huntingtown

State

MD

Zip Code

20639

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

AFFILIATE RELATIONS, MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.25

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109213

Amount of Each Receipt this Period

40.08

**C.**

Full Name (Last, First, Middle Initial)

DAVID TESTER

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 EQUIPMENT OPERATOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.56

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109321

Amount of Each Receipt this Period

34.76

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

114.92

**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 260 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

BETTY A. THOMAS

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 ▼

261.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	5	/	2	0	0	8

Transaction ID: SA11AI.109623

Amount of Each Receipt this Period

43.94

**B.**

Full Name (Last, First, Middle Initial)

JOHN THOMAS

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 ▼

221.61

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.109696

Amount of Each Receipt this Period

21.37

**C.**

Full Name (Last, First, Middle Initial)

JOHN THOMAS

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 ▼

242.98

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	0	/	2	0	0	8

Transaction ID: SA11AI.109740

Amount of Each Receipt this Period

21.37

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

86.68

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 261 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

PATRICK S. THOMASSON

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 ▼

370.16

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109624

Amount of Each Receipt this Period

62.30

**B.**

Full Name (Last, First, Middle Initial)

ROBERT L. THOMPSON

Mailing Address 927 Gibbs Avenue, NE

City

Canton

State

OH

Zip Code

44705-1074

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 ▼

503.59

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109625

Amount of Each Receipt this Period

84.76

**C.**

Full Name (Last, First, Middle Initial)

PETER THOR

Mailing Address 4 Betts Place

City

East Norwalk

State

CT

Zip Code

06855

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CT CN 4

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.18

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.110456

Amount of Each Receipt this Period

41.38

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

188.44

**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 262 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

HELEN THORNTON

Mailing Address 500 N. Elmwood

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 ▼

547.68

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: SA11AI.109558

Amount of Each Receipt this Period

68.96

**B.**

Full Name (Last, First, Middle Initial)

JOHN THORSON

Mailing Address 555 Selby Avenue

City

Saint Paul

State

MN

Zip Code

55102

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 ▼

383.39

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	0	8

Transaction ID: SA11AI.109821

Amount of Each Receipt this Period

64.16

**C.**

Full Name (Last, First, Middle Initial)

AUDREY TISDALE

Mailing Address 5900 Bridge Road 502

City

Ypsilanti

State

MI

Zip Code

48197

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MI CN 25/Washtenaw

Occupation

OFFICE COORDINATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	0	8

Transaction ID: SA11AI.110602

Amount of Each Receipt this Period

60.00

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

193.12

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 263 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

TAMARA L. TOCHER

Mailing Address 321 E. 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 ▼

430.49

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109102

Amount of Each Receipt this Period

39.14

**B.**

Full Name (Last, First, Middle Initial)

TAMARA L. TOCHER

Mailing Address 321 E. 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 ▼

469.63

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.109215

Amount of Each Receipt this Period

39.14

**C.**

Full Name (Last, First, Middle Initial)

VANESSA TOLLIVER

Mailing Address 1121 Wellington Blvd.

City

Columbus

State

OH

Zip Code

43219

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 11/SOOH

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
0	6	/	0	6	/	2	0	0	8

Transaction ID: SA11AI.109992

Amount of Each Receipt this Period

20.00

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

98.28

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 264 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

VANESSA TOLLIVER

Mailing Address 1121 Wellington Blvd.

City

Columbus

State

OH

Zip Code

43219

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 11/SOOH

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.110059

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

LEIGH TOMLINSON

Mailing Address 930 Stag Thicket Lane

City

Mason

State

MI

Zip Code

48854-1400

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MI CN 25

Occupation

ACCTG. /HUMAN RESOURCE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.13

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109698

Amount of Each Receipt this Period

35.83

**C.**

Full Name (Last, First, Middle Initial)

LEIGH TOMLINSON

Mailing Address 930 Stag Thicket Lane

City

Mason

State

MI

Zip Code

48854-1400

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MI CN 25

Occupation

ACCTG. /HUMAN RESOURCE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.96

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.109742

Amount of Each Receipt this Period

35.83

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

91.66

**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 265 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

TOM TOSTI

Mailing Address 327 Lincoln Avenue

City

Bristol

State

PA

Zip Code

19007

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 ▼

233.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	0	8

Transaction ID: SA11AI.109322

Amount of Each Receipt this Period

41.76

**B.**

Full Name (Last, First, Middle Initial)

DOROTHY TOWNSEND

Mailing Address 6837 SW 39th Drive

City

Miramar

State

FL

Zip Code

33023

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 ▼

669.58

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	0	8

Transaction ID: SA11AI.109103

Amount of Each Receipt this Period

39.86

**C.**

Full Name (Last, First, Middle Initial)

DOROTHY TOWNSEND

Mailing Address 6837 SW 39th Drive

City

Miramar

State

FL

Zip Code

33023

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 ▼

709.44

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	0	8

Transaction ID: SA11AI.109216

Amount of Each Receipt this Period

39.86

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

121.48

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 266 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

DAMIAN TRYON

Mailing Address 700 North 2nd Street

City

Montebello

State

CA

Zip Code

90640

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME CA CN 36

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	0	8

Transaction ID: SA11AI.110241

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

ELIZABETH TURNBOW

Mailing Address 4443 Libby N.E.

City

Olympia

State

WA

Zip Code

98506

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 ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	0	8

Transaction ID: SA11AI.110194

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

NSEABASI E. UFOT

Mailing Address 4201 Victory Parkway  
Apt. 911

City

Cincinnati

State

OH

Zip Code

45229

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 ▼

314.92

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	0	8

Transaction ID: SA11AI.109626

Amount of Each Receipt this Period

51.32

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

121.32

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 267 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

KAREN VALENTINE

Mailing Address 154 Stoney Drive

City

Dover

State

DE

Zip Code

19904

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 ▼

370.62

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.109764

Amount of Each Receipt this Period

61.58

**B.**

Full Name (Last, First, Middle Initial)

OSVALDO VALENZUELA

Mailing Address 6962 N. Hamilton Avenue  
#E

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 ▼

480.92

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109559

Amount of Each Receipt this Period

60.56

**C.**

Full Name (Last, First, Middle Initial)

TARA VANFLEET

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 ▼

232.86

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109325

Amount of Each Receipt this Period

40.94

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

163.08

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

ANTHONY VERNELL

Mailing Address 478 Estates Drive

City

Athens

State

OH

Zip Code

45701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109429

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

ANTHONY VERNELL

Mailing Address 478 Estates Drive

City

Athens

State

OH

Zip Code

45701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109488

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

LORI E VISSERS

Mailing Address 14 Maple Wood Lane  
Unit 15

City

Madison

State

WI

Zip Code

53704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 24

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.110578

Amount of Each Receipt this Period

20.00

**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: PAGE 269 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

LORI E VISSERS

Mailing Address 14 Maple Wood Lane  
Unit 15

City State Zip Code  
Madison WI 53704

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME WI CN 24

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.110579

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

ARTHUR WAKE

Mailing Address 1203 NE 135th Street  
#403

City State Zip Code  
Seattle WA 98125

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME WA CN 28/WA UNIV

Occupation  
PAINTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.110161

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

ARTHUR WAKE

Mailing Address 1203 NE 135th Street  
#403

City State Zip Code  
Seattle WA 98125

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME WA CN 28/WA UNIV

Occupation  
PAINTER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.110162

Amount of Each Receipt this Period

50.00

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

120.00

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER: PAGE 270 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

FLORA M. WALKER

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 ▼

649.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109104

Amount of Each Receipt this Period

59.00

**B.**

Full Name (Last, First, Middle Initial)

FLORA M. WALKER

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 ▼

708.04

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109217

Amount of Each Receipt this Period

59.00

**C.**

Full Name (Last, First, Middle Initial)

CRYSTAL M. WALLACE

Mailing Address 38426 Village Lane

City

Mechanicsville

State

MD

Zip Code

20659

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 ▼

301.28

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109105

Amount of Each Receipt this Period

28.20

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

146.20

**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 271 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

CRYSTAL M. WALLACE

Mailing Address 38426 Village Lane

City

Mechanicsville

State

MD

Zip Code

20659

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 ▼

329.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.109218

Amount of Each Receipt this Period

28.20

**B.**

Full Name (Last, First, Middle Initial)

CARL WARNER

Mailing Address 6243 Hilliard

City

Lansing

State

MI

Zip Code

48911

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 ▼

247.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.109699

Amount of Each Receipt this Period

23.08

**C.**

Full Name (Last, First, Middle Initial)

CARL WARNER

Mailing Address 6243 Hilliard

City

Lansing

State

MI

Zip Code

48911

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 ▼

270.43

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	0	/	2	0	0	8

Transaction ID: SA11AI.109743

Amount of Each Receipt this Period

23.08

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

74.36

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

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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

DAVID WARRICK

Mailing Address 2638 Jay Court

City

Indianapolis

State

IN

Zip Code

46229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IN CN 62

Occupation

UNION DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109659

Amount of Each Receipt this Period

70.00

**B.**

Full Name (Last, First, Middle Initial)

ANDRE' WASHINGTON

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109430

Amount of Each Receipt this Period

19.24

**C.**

Full Name (Last, First, Middle Initial)

ANDRE' WASHINGTON

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.36

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109489

Amount of Each Receipt this Period

19.24

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

108.48

**TOTAL** This Period (last page this line number only) .....



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 273 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

FRANK W. WASHINGTON

Mailing Address 1713 Crimson Place

City

Mitchellville

State

MD

Zip Code

20721

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

SPECIAL AIDE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.17

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109106

Amount of Each Receipt this Period

35.06

**B.**

Full Name (Last, First, Middle Initial)

FRANK W. WASHINGTON

Mailing Address 1713 Crimson Place

City

Mitchellville

State

MD

Zip Code

20721

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

SPECIAL AIDE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.73

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109219

Amount of Each Receipt this Period

35.56

**C.**

Full Name (Last, First, Middle Initial)

JO ANN WAUGH

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 ▼

208.56

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109326

Amount of Each Receipt this Period

34.76

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

105.38

**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: PAGE 274 / 360  
(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

LONITAM. WAYBRIGHT

Mailing Address 3008 Athens Circle

City

Bowie

State

MD

Zip Code

20716

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, BENEFITS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

816.54

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109107

Amount of Each Receipt this Period

74.23

**B.**

Full Name (Last, First, Middle Initial)

LONITAM. WAYBRIGHT

Mailing Address 3008 Athens Circle

City

Bowie

State

MD

Zip Code

20716

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, BENEFITS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

890.77

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109220

Amount of Each Receipt this Period

74.23

**C.**

Full Name (Last, First, Middle Initial)

KENNETH WEAVER

Mailing Address 2140 DELAFIELD STREET

City

WAUKESHA

State

WI

Zip Code

53589-2123

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DEPT OF TRANSPORTATION

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.92

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.110580

Amount of Each Receipt this Period

25.91

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

174.37

**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 275 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

KENNETH WEAVER

Mailing Address 2140 DELAFIELD STREET

City

WAUKESHA

State

WI

Zip Code

53589-2123

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DEPT OF TRANSPORTATION

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.83

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.110581

Amount of Each Receipt this Period

25.91

**B.**

Full Name (Last, First, Middle Initial)

JOANNA L. WEBB-GAUVIN

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 ▼

411.10

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109560

Amount of Each Receipt this Period

49.05

**C.**

Full Name (Last, First, Middle Initial)

BRIAN V. WEEKS

Mailing Address 8033 Exceisior Drive  
Apt. A

City

Madison

State

WI

Zip Code

53717

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 ▼

402.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109108

Amount of Each Receipt this Period

43.23

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

118.19

**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 276 / 360

(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, QUALIFI-  
ED**A.**

Full Name (Last, First, Middle Initial)

BRIAN V. WEEKS

Mailing Address 8033 Exceisior Drive  
Apt. ACity State Zip Code  
Madison WI 53717FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'LOccupation  
POLITICAL ACTION COORDINATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.43

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.109221

Amount of Each Receipt this Period

43.23

**B.**

Full Name (Last, First, Middle Initial)

JOSEPH W. WEIDNER

Mailing Address 255 Binns Boulevard

City State Zip Code  
Columbus OH 43204-2515FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH CN 8Occupation  
EDITOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.39

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	5	/	2	0	0	8

Transaction ID: SA11AI.109627

Amount of Each Receipt this Period

63.52

**C.**

Full Name (Last, First, Middle Initial)

LARRY P. WEINBERG

Mailing Address 1730 Chesterford Way

City State Zip Code  
McLean VA 22101FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'LOccupation  
GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

988.56

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.109109

Amount of Each Receipt this Period

89.87

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

196.62

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 277 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

LARRY P. WEINBERG

Mailing Address 1730 Chesterford Way

City

McLean

State

VA

Zip Code

22101

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 ▼

1078.43

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109222

Amount of Each Receipt this Period

89.87

**B.**

Full Name (Last, First, Middle Initial)

SUSAN WELDON

Mailing Address 16 Fairfield Street

City

Harrisburg

State

PA

Zip Code

17109-4405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME PA CN 13/NSP

Occupation

CONTROL ROOM OPERATOR II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.110497

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

JOHN P. WESTMORELAND

Mailing Address 4678 West Road

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

BUSINESS AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.14

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109823

Amount of Each Receipt this Period

67.80

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

197.67

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JAMES R. WESTON

Mailing Address 6805 Oak Creek Dr.

City

Columbus

State

OH

Zip Code

43229

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 ▼

690.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109432

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

JAMES R. WESTON

Mailing Address 6805 Oak Creek Dr.

City

Columbus

State

OH

Zip Code

43229

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 ▼

740.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109490

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MYRA WESTRY

Mailing Address 1226S Independence

City

Chicago

State

IL

Zip Code

60623

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IL CN 31/SOIL

Occupation

P A FAMILY SUPPORT SPEC I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109569

Amount of Each Receipt this Period

28.40

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

128.40

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

TAMARA V. WHITE

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

HUMAN RESOURCES ASSISTANT III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.32

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109110

Amount of Each Receipt this Period

27.07

**B.**

Full Name (Last, First, Middle Initial)

TAMARA V. WHITE

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

HUMAN RESOURCES ASSISTANT III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.39

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109223

Amount of Each Receipt this Period

27.07

**C.**

Full Name (Last, First, Middle Initial)

DIANE WHITE-HARRIS

Mailing Address 1142 Wolf Run Drive

City

Lansing

State

MI

Zip Code

48917

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MI CN 25

Occupation

EXECUTIVE SECRETARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109701

Amount of Each Receipt this Period

27.60

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

81.74

**TOTAL** This Period (last page this line number only) .....

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

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☒ 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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

DIANE WHITE-HARRIS

Mailing Address 1142 Wolf Run Drive

City

Lansing

State

MI

Zip Code

48917

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MI CN 25

Occupation

EXECUTIVE SECRETARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.109745

Amount of Each Receipt this Period

27.60

**B.**

Full Name (Last, First, Middle Initial)

HAROLD WICK

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109433

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

HAROLD WICK

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109491

Amount of Each Receipt this Period

30.00

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

87.60

**TOTAL** This Period (last page this line number only) .....



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

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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

BRYCE WICKSTROM

Mailing Address 1267 Matilda Street

City

St. Paul

State

MN

Zip Code

55117-4473

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MN CN 5/SOMN

Occupation

RECORDING SECRETARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

626.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109885

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

GUY WIEDERHOLD

Mailing Address 906 Laurel Boulevard

City

Pottsville

State

PA

Zip Code

17901-2324

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 ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109327

Amount of Each Receipt this Period

66.30

**C.**

Full Name (Last, First, Middle Initial)

WILLIAM WILKINSON

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 ▼

501.96

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109111

Amount of Each Receipt this Period

45.63

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

211.93

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

WILLIAM WILKINSON

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 ▼

547.59

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109224

Amount of Each Receipt this Period

45.63

**B.**

Full Name (Last, First, Middle Initial)

CHARLES WILLIAMS

Mailing Address 600 W Lafayette

City

Detroit

State

MI

Zip Code

48226

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 ▼

281.25

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109702

Amount of Each Receipt this Period

31.25

**C.**

Full Name (Last, First, Middle Initial)

CHARLES WILLIAMS

Mailing Address 600 W Lafayette

City

Detroit

State

MI

Zip Code

48226

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 ▼

312.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.109746

Amount of Each Receipt this Period

31.25

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

108.13

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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Detailed Summary Page

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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL B. WILLIAMS

Mailing Address 6800 Fleetwood Rd.  
Apt. #1118

City State Zip Code  
McLean VA 22101

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME INT'L

Occupation  
SPECIAL ASST. TO SECY-TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

473.94

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.109112

Amount of Each Receipt this Period

43.08

**B.**

Full Name (Last, First, Middle Initial)

MICHAEL B. WILLIAMS

Mailing Address 6800 Fleetwood Rd.  
Apt. #1118

City State Zip Code  
McLean VA 22101

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AFSCME INT'L

Occupation  
SPECIAL ASST. TO SECY-TREASURER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

517.02

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109225

Amount of Each Receipt this Period

43.08

**C.**

Full Name (Last, First, Middle Initial)

PHILLIP WILLIAMS

Mailing Address 296 Churchmans Road

City State Zip Code  
New Castle DE 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 ▼

370.62

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.109765

Amount of Each Receipt this Period

61.58

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

147.74

**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 284 / 360

(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, QUALIFI-  
ED**A.**Full Name (Last, First, Middle Initial)  
SAUNDRA WILLIAMS

Mailing Address 16218 Braile

City	State	Zip Code
Detroit	MI	48219-4727

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MI CN 25Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.109703

Amount of Each Receipt this Period

41.25

**B.**Full Name (Last, First, Middle Initial)  
SAUNDRA WILLIAMS

Mailing Address 16218 Braile

City	State	Zip Code
Detroit	MI	48219-4727

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MI CN 25Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.87

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	0	/	2	0	0	8

Transaction ID: SA11AI.109747

Amount of Each Receipt this Period

41.25

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

Mailing Address 1635 Log Run Rd.

City	State	Zip Code
Williamsport	PA	17701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME PA CN 13/SOPAOccupation  
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
0	6	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.110494

Amount of Each Receipt this Period

40.00

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

122.50

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

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

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(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

ALLAN WINEY

Mailing Address 765 Mount Airy Road

City

Lewisburg

State

PA

Zip Code

17339

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME PA CN 13

Occupation

ASSISTANT BUSINESS MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.96

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109328

Amount of Each Receipt this Period

91.66

**B.**

Full Name (Last, First, Middle Initial)

MARY BETH WISHON

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109434

Amount of Each Receipt this Period

38.50

**C.**

Full Name (Last, First, Middle Initial)

MARY BETH WISHON

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

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

539.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.109492

Amount of Each Receipt this Period

38.50

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

168.66

**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 286 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

BRUCE H. WITHAM

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/SOWA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.110334

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

BRUCE H. WITHAM

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/SOWA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.110412

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

KRISTIE WOLF

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 ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.109329

Amount of Each Receipt this Period

66.30

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

116.30

**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 287 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

ARTHUR WOOD

Mailing Address 31062 Birchwood

City

Westland

State

MI

Zip Code

48185

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 ▼

298.58

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109704

Amount of Each Receipt this Period

27.28

**B.**

Full Name (Last, First, Middle Initial)

ARTHUR WOOD

Mailing Address 31062 Birchwood

City

Westland

State

MI

Zip Code

48185

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 ▼

325.86

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.109748

Amount of Each Receipt this Period

27.28

**C.**

Full Name (Last, First, Middle Initial)

SHELBY L. WOODALL

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 ▼

295.51

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.109630

Amount of Each Receipt this Period

49.74

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

104.30

**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 288 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

DOUGLAS N. WOODSON

Mailing Address 108 Elgin  
Apt. 1

City State Zip Code  
Forest Park IL 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 ▼

549.12

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109561

Amount of Each Receipt this Period

68.64

**B.**

Full Name (Last, First, Middle Initial)

JERRY WRIGHT

Mailing Address 20235 E. 1280 N Road

City State Zip Code  
Danville IL 61832

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 ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.109562

Amount of Each Receipt this Period

64.84

**C.**

Full Name (Last, First, Middle Initial)

BRUCE WYNGAARD

Mailing Address 1310 Hunter Avenue

City State Zip Code  
Columbus OH 43201

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 ▼

430.30

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.109908

Amount of Each Receipt this Period

66.20

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

199.68

**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 289 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

BRUCE WYNGAARD

Mailing Address 1310 Hunter Avenue

City

Columbus

State

OH

Zip Code

43201

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 ▼

496.50

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.109931

Amount of Each Receipt this Period

66.20

**B.**

Full Name (Last, First, Middle Initial)

JEANETTE WYNN

Mailing Address 1642 W. MLK Blvd

City

Quicny

State

FL

Zip Code

32351

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME FL CN 79

Occupation

DELEGATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.12

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.110429

Amount of Each Receipt this Period

155.12

**C.**

Full Name (Last, First, Middle Initial)

JEANETTE WYNN

Mailing Address 1642 W. MLK Blvd

City

Quicny

State

FL

Zip Code

32351

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME FL CN 79

Occupation

DELEGATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.12

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.109660

Amount of Each Receipt this Period

14.00

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

235.32

**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 290 / 360

(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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

WAYNE J. YAMASAKI

Mailing Address 1185 KAELEKU STREET

City

HONOLULU

State

HI

Zip Code

96825-3007

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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.109374

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

GERALD S. ZASTROW

Mailing Address 21 N. Park St.  
Suite 5301

City

Madison

State

WI

Zip Code

53715-1218

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 24/SOWI

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.110586

Amount of Each Receipt this Period

18.02

**C.**

Full Name (Last, First, Middle Initial)

GERALD S. ZASTROW

Mailing Address 21 N. Park St.  
Suite 5301

City

Madison

State

WI

Zip Code

53715-1218

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 24/SOWI

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.26

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.110583

Amount of Each Receipt this Period

18.02

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

86.04

**TOTAL** This Period (last page this line number only) .....

44860.47

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 291 / 360

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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, QUALIFI-  
ED

A.

Full Name (Last, First, Middle Initial)

DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL &amp; LEG EQUALITY

Mailing Address P. O. BOX 2882  
Church Street Station

City	State	Zip Code
New York	NY	10008

FEC ID number of contributing  
federal political committee.

C C00149211

Name of Employer

Occupation

Receipt For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237665.46

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	0	8

Transaction ID: SA12.106710

Amount of Each Receipt this Period

72510.26

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

72510.26

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

72510.26

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 292 / 360

(check only one)

<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

AMALGAMATED BANK

Mailing Address 275 7th Avenue

City

New York

State

NY

Zip Code

10001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1008469.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Transaction ID: SA17.109767

Amount of Each Receipt this Period

409.77

Interest Income 6/30/08

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

409.77

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

409.77

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 293 / 360

<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, QUALIFI-  
ED

<b>A.</b> Full Name (Last, First, Middle Initial) 80/20 CONSULTING, LLC	<b>Transaction ID:</b> SB21B.108757 <b>Date of Disbursement</b>																				
Mailing Address 139 East 94th Street, Apt. 11C/D	<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>0</td><td>6</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	8		2	0	0	8												
City New York State NY Zip Code 10129	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Media Ad-no federal candidate referenced Candidate Name	<table border="1"> <tr> <td colspan="10">7500.00</td> </tr> </table>	7500.00																			
7500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	<b>Transaction ID:</b> SB21B.110151 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 53852	<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>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	4		2	0	0	8												
City Phoenix State AZ Zip Code 85072-3852	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Service Charges 6/24/08 Candidate Name	<table border="1"> <tr> <td colspan="10">6.70</td> </tr> </table>	6.70																			
6.70																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) BART GROUP	<b>Transaction ID:</b> SB21B.107428 <b>Date of Disbursement</b>																				
Mailing Address 171 Main 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>0</td><td>6</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	6		2	0	0	8												
City Port Washington State NY Zip Code 11050	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Service Charges 6/6/08 Candidate Name	<table border="1"> <tr> <td colspan="10">146.78</td> </tr> </table>	146.78																			
146.78																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

7653.48

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 294 / 360

<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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

DISCOVER NETWORK

Mailing Address P. O. BOX 3016

City State Zip Code  
New Albany OH 43054

Purpose of Disbursement  
Service Charges 6/26/08

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.108954

Date of Disbursement

06 / 26 / 2008

Amount of Each Disbursement this Period

2.43

**B.**

Full Name (Last, First, Middle Initial)

BELINDA DIXON

Mailing Address 150 Brabant Street  
#1A

City State Zip Code  
Staten Island NY 10302

Purpose of Disbursement  
Travel Expense

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.108860

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

347.00

**C.**

Full Name (Last, First, Middle Initial)

GARBER TRAVEL

Mailing Address 21785 Filigree Court, Suite 212

City State Zip Code  
Ashburn VA 20147

Purpose of Disbursement  
Travel Expense

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.108859

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

15000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

15349.43

**TOTAL** This Period (last page this line number only) .....

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

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

State:  District:

06 / 24 / 2008

Category/  
Type

State:  District:

Category/  
Type

State:  District:

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 296 / 360

<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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

RICHARD P. LOEPER

Mailing Address 3423 Richard Street

City Madison State WI Zip Code 53714

Purpose of Disbursement  
Travel Expense

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.108761

Date of Disbursement

06 / 06 / 2008

Amount of Each Disbursement this Period

641.19

**B.**

Full Name (Last, First, Middle Initial)

KATHRYN S. MALONE

Mailing Address 988 Circle On The Green

City Columbus State OH Zip Code 43235

Purpose of Disbursement  
Travel Expense

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.108921

Date of Disbursement

06 / 27 / 2008

Amount of Each Disbursement this Period

450.66

**C.**

Full Name (Last, First, Middle Initial)

RONALD L. MALONE

Mailing Address 988 Circle On The Green

City Columbus State OH Zip Code 43235

Purpose of Disbursement  
Travel Expense

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.108924

Date of Disbursement

06 / 27 / 2008

Amount of Each Disbursement this Period

450.66

**SUBTOTAL** of Disbursements This Page (optional) .....

1542.51

**TOTAL** This Period (last page this line number only) .....



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 297 / 360

<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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

LILLIAN ROBERTS

Mailing Address 2375 Broadway  
#921

City State Zip Code  
New York NY 10024

Purpose of Disbursement

Travel Expense

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.108763

Date of Disbursement

06 / 18 / 2008

Amount of Each Disbursement this Period

347.00

**B.**

Full Name (Last, First, Middle Initial)

JACKIE ROWE-ADAMS

Mailing Address 870 Riverside Drive  
#5A

City State Zip Code  
New York NY 10032

Purpose of Disbursement

Travel Expense

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.108861

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

347.00

**C.**

Full Name (Last, First, Middle Initial)

LINDSLEY SMITH

Mailing Address 340 N. Rollston Avenue

City State Zip Code  
Fayetteville AR 72701

Purpose of Disbursement

Travel Expense

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.108922

Date of Disbursement

06 / 27 / 2008

Amount of Each Disbursement this Period

629.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1323.00

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 298 / 360

<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, QUALIFI-  
ED

A.

Full Name (Last, First, Middle Initial)

THE CAMPAIGN GROUP

Mailing Address 1600 Locust Street

City  
Philadelphia

State  
PA

Zip Code  
19103

Purpose of Disbursement

Media Ad-no federal candidate referenced

Candidate Name

004  
Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.108764

Date of Disbursement

06 / 13 / 2008

Amount of Each Disbursement this Period

250000.00

B.

Full Name (Last, First, Middle Initial)

THE CURTIS HOTEL

Mailing Address 1405 Curtis Street

City  
Denver

State  
CO

Zip Code  
80202

Purpose of Disbursement

Travel Expense

Candidate Name

002  
Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.108765

Date of Disbursement

06 / 16 / 2008

Amount of Each Disbursement this Period

8000.00

C.

Full Name (Last, First, Middle Initial)

TONY VANDERBLOEMEN

Mailing Address 2121 Newberry Ave.

City  
Green Bay

State  
WI

Zip Code  
54302

Purpose of Disbursement

Travel Expense

Candidate Name

002  
Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.108925

Date of Disbursement

06 / 27 / 2008

Amount of Each Disbursement this Period

468.99

SUBTOTAL of Disbursements This Page (optional) .....

258468.99

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 299 / 360

<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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

JAMES R. WESTON

Mailing Address 6805 Oak Creek Dr.

City Columbus State OH Zip Code 43229

Purpose of Disbursement

Travel Expense

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.108920

Date of Disbursement

06 / 27 / 2008

Amount of Each Disbursement this Period

450.66

**B.**

Full Name (Last, First, Middle Initial)

WANDA WILLIAMS

Mailing Address P. O. BOX 368

City Highland State NY Zip Code 12528

Purpose of Disbursement

Travel Expense

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.108767

Date of Disbursement

06 / 18 / 2008

Amount of Each Disbursement this Period

347.00

**SUBTOTAL** of Disbursements This Page (optional) .....

797.66

**TOTAL** This Period (last page this line number only) .....

287436.38

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 300 / 360

<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, QUALIFI-  
ED

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

Candidate Name

008  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB22.108756

Date of Disbursement

06 / 18 / 2008

Amount of Each Disbursement this Period

26000.00

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

Candidate Name

008  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB22.108824

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

40000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

66000.00

**TOTAL** This Period (last page this line number only) .....

66000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 301 / 360

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

ADLER FOR CONGRESS

Mailing Address 14 Knightswood Drive

City Marlton State NJ Zip Code 08053

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 03

Transaction ID: SB23.108800

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

AMERIPAC: THE FUND FOR A GREATER AMERICA

Mailing Address 499 S. Capitol Street SE  
#414

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution-PAC

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Transaction ID: SB23.108845

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

ANDRE CARSON FOR CONGRESS

Mailing Address 2527 N. Alabama Street

City Indianapolis State IN Zip Code 46205

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 07

Transaction ID: SB23.108901

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

8500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 302 / 360

<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, QUALIFI-  
ED

**A.** Full Name (Last, First, Middle Initial)  
ANNA ESHOO FOR CONGRESS

Mailing Address 555 BRYANT STREET  
PMB 335

City PALO ALTO State CA Zip Code 94301

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 14

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108902

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
ANNE BARTH FOR CONGRESS

Mailing Address P. O. BOX 2151

City Charleston State WV Zip Code 25328

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: WV District: 02

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108816

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

2500.00

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

Mailing Address P. O. BOX 8508

City Utica State NY Zip Code 13505

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NY District: 24

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108864

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 303 / 360

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
A Whole Lot of People for Grijalva Cgsnl Cmte

Mailing Address P.O. Box 1242

City Tucson State AZ Zip Code 85702-0000

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: AZ District: 07

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108903

Date of Disbursement

06 / 25 / 2008

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
BARNEY FRANK FOR CONGRESS COMMITTEE

Mailing Address P. O. BOX 260

City Newton State MA Zip Code 02460

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MA District: 04

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108904

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1500.00

**C.** Full Name (Last, First, Middle Initial)  
BARON HILL FOR CONGRESS

Mailing Address 329 W. Tipton St.

City Seymour State IN Zip Code 47274

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: IN District: 09

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108905

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3500.00

**TOTAL** This Period (last page this line number only) .....

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

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

06 / 24 / 2008

1000.00

06 / 19 / 2008

5000.00

1000.00

FEC Schedule B ( Form 3X) (Revised 02/2003)



	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

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

FEC Schedule B ( Form 3X) (Revised 02/2003)

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 306 / 360

<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, QUALIFI-  
ED

<b>A.</b> Full Name (Last, First, Middle Initial) BOB LORD FOR CONGRESS	<b>Transaction ID:</b> SB23.108785 <b>Date of Disbursement</b>																				
Mailing Address 4340 E Indian School Road Suite 21-502	<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>0</td><td>6</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	9		2	0	0	8												
City Phoenix State AZ Zip Code 85018	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Candidate Name	<table border="1"> <tr> <td colspan="10">3000.00</td> </tr> </table>	3000.00																			
3000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 03	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 011																					
<b>B.</b> Full Name (Last, First, Middle Initial) BOSWELL FOR CONGRESS	<b>Transaction ID:</b> SB23.108907 <b>Date of Disbursement</b>																				
Mailing Address P. O. BOX 6220	<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>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	4		2	0	0	8												
City Des Moines State IA Zip Code 50309	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Candidate Name	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 011																					
<b>C.</b> Full Name (Last, First, Middle Initial) BOYD FOR CONGRESS	<b>Transaction ID:</b> SB23.108867 <b>Date of Disbursement</b>																				
Mailing Address P. O. Box 15703	<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>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	4		2	0	0	8												
City Tallahassee State FL Zip Code 32317-5703	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Candidate Name	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 011																					

**SUBTOTAL** of Disbursements This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

BRALEY FOR CONGRESS

Mailing Address P. O. BOX 390

City  
Waterloo

State  
IA

Zip Code  
50704

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 01

Transaction ID: SB23.108908

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

BRIAN BAIRD FOR CONGRESS

Mailing Address 10411 NE Fourth Plain Blvd.

City  
VANCOUVER

State  
WA

Zip Code  
98668

Purpose of Disbursement  
Contribution- Check voided

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WA District: 03

Transaction ID: SB23.108994

Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

-1000.00

**C.**

Full Name (Last, First, Middle Initial)

BRIAN BAIRD FOR CONGRESS

Mailing Address 10411 NE Fourth Plain Blvd.

City  
VANCOUVER

State  
WA

Zip Code  
98668

Purpose of Disbursement  
Contribution- Check voided

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WA District: 03

Transaction ID: SB23.108995

Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

-2000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

-2000.00

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<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, QUALIFI-  
ED

<b>A.</b> Full Name (Last, First, Middle Initial) BRIDGE PAC	<b>Transaction ID:</b> SB23.108841 <b>Date of Disbursement</b>																				
Mailing Address 499 S Capitol St., SW Suite 412	<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>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	4		2	0	0	8												
City Washington State DC Zip Code 20003	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution-PAC Candidate Name	<table border="1"> <tr> <td colspan="10">2500.00</td> </tr> </table>	2500.00																			
2500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) CARNEY FOR CONGRESS	<b>Transaction ID:</b> SB23.108868 <b>Date of Disbursement</b>																				
Mailing Address 729 15th St., NW Suite 300	<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>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	4		2	0	0	8												
City Washington State DC Zip Code 20005	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Candidate Name	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) CASTOR FOR CONGRESS	<b>Transaction ID:</b> SB23.108869 <b>Date of Disbursement</b>																				
Mailing Address P. O. BOX 5419	<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>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	4		2	0	0	8												
City Tampa State FL Zip Code 33675	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Contribution Candidate Name	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 11	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

8500.00

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
CAZAYOUX FOR CONGRESS

Mailing Address P. O. BOX 156

City State Zip Code  
New Roads LA 70760

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: LA District: 06

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108909

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
CHANDLER FOR CONGRESS

Mailing Address P. O. BOX 12678

City State Zip Code  
Lexington KY 40583-2678

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: KY District: 06

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108910

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
CHARLIE BROWN FOR CONGRESS

Mailing Address P. O. BOX 368

City State Zip Code  
Roseville CA 95661

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 04

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108786

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

8500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 310 / 360

<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, QUALIFI-  
ED**A. CHARLIE MELANCON CAMPAIGN COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 549

City Napoleonville State LA Zip Code 70390

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: LA District: 03

Transaction ID: SB23.108912

Date of Disbursement

M M / D D / Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Amount of Each Disbursement this Period

1000.00

**B. CHET EDWARDS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 23273

City WACO State TX Zip Code 76702-3273

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 17

Transaction ID: SB23.108911

Date of Disbursement

M M / D D / Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Amount of Each Disbursement this Period

1000.00

**C. CHILDERS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 177

City Booneville State MS Zip Code 38829

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MS District: 01

Transaction ID: SB23.108913

Date of Disbursement

M M / D D / Y Y Y Y  
0 6 / 2 4 / 2 0 0 8

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ..... ►

4500.00

TOTAL This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input 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, QUALIFI-  
ED

**A.** Full Name (Last, First, Middle Initial)  
CIRO D. RODRIGUEZ FOR CONGRESS

Mailing Address 246 W. Harding Blvd.

City San Antonio State TX Zip Code 78214

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: TX District: 23

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108914

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
CITIZENS FOR ALTMIRE

Mailing Address P. O. BOX 1776

City Freedom State PA Zip Code 15042

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: PA District: 04

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108870

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
CITIZENS FOR ELEANOR HOLMES NORTON

Mailing Address 1001 G Street NW  
Suite 500E

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: DC District: 00

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108871

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 312 / 360

<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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

CITIZENS FOR WATERS

Mailing Address 555 So. Flower Street  
Suite 4210

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 35

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108915

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

COMMITTEE FOR A DEMOCRATIC MAJORITY

Mailing Address 301 4TH Street, NE  
Suite 202

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution-PAC

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☐ Primary ☐ General  
☒ Other (specify) ▼

Transaction ID: SB23.108839

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

COMMITTEE FOR A LIVABLE FUTURE

Mailing Address 921 S. W. WASHINGTON  
SUITE 810

City PORTLAND State OR Zip Code 97205

Purpose of Disbursement  
Contribution-PAC

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☐ Primary ☐ General  
☒ Other (specify) ▼

Transaction ID: SB23.108849

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

8500.00

**TOTAL** This Period (last page this line number only) .....



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 313 / 360

<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, QUALIFI-  
ED

A.

Full Name (Last, First, Middle Initial)

COMMITTEE FOR A LIVABLE FUTURE

Mailing Address 921 S. W. WASHINGTON  
SUITE 810

City PORTLAND State OR Zip Code 97205

Purpose of Disbursement  
Contribution-PAC Check voided

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2007 ☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Transaction ID: SB23.108996

Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

-2500.00

B.

Full Name (Last, First, Middle Initial)

COMMITTEE TO ELECT GARY L. ACKERMAN

Mailing Address 100 Jericho Quadrangle  
#233

City Jericho State NY Zip Code 11753

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 05

Transaction ID: SB23.108827

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

COMMITTEE TO ELECT HARRY MITCHELL

Mailing Address P. O. BOX 23748

City Tempe State AZ Zip Code 85285

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 05

Transaction ID: SB23.108916

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) .....

500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 314 / 360

<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, QUALIFI-  
ED

**A.** Full Name (Last, First, Middle Initial)  
COMMITTEE TO ELECT LINCOLN DAVIS

Mailing Address P.O. Box 87

City State Zip Code  
Mc Minnville TN 37111

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: TN District: 04

Transaction ID: SB23.108872

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
COMMITTEE TO ELECT MCHUGH

Mailing Address P. O. BOX 6161

City State Zip Code  
Watertown NY 13601

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 23

Transaction ID: SB23.108832

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
COMMITTEE TO RE-ELECT LINDA SANCHEZ

Mailing Address P. O. BOX 6162

City State Zip Code  
Lakewood CA 90714

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 39

Transaction ID: SB23.108917

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

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

State: TN District: 06

06 / 30 / 2008

State:  District:

State: TN District: 05

FEC Schedule B ( Form 3X) (Revised 02/2003)

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
DARCY BURNER FOR CONGRESS

Mailing Address P. O. BOX 1090

City State Zip Code  
Carnation WA 98014

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: WA District: 08

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108815

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

2500.00

**B.** Full Name (Last, First, Middle Initial)  
DAVE WU FOR CONGRESS

Mailing Address 818 SW 3rd Ave.  
#1182

City State Zip Code  
Portland OR 97204

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: OR District: 01

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108875

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
DAVID PRICE FOR CONGRESS COMMITTEE

Mailing Address P. O. BOX 1986

City State Zip Code  
Raleigh NC 27602

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NC District: 04

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108918

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
DEBBIE WASSERMAN SCHULTZ FOR CONGRESS

Mailing Address P.O. BOX 71147

City Washington State DC Zip Code 20024

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼  
 State: FL District: 20

Transaction ID: SB23.108876

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address 430 SOUTH CAPITOL STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
Contribution-PAC

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District:

Transaction ID: SB23.108851

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

10000.00

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

Mailing Address 236 Massachuetts Ave. NE,  
#508

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution-PAC

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☐ General  
☒ Other (specify) ▼  
 State: District:

Transaction ID: SB23.108852

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

12000.00

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE</b>	<b>Transaction ID:</b> SB23.108877 <b>Date of Disbursement</b>
Mailing Address 120 Maryland Avenue, NE	<div> <div>06</div> <div>24</div> <div>2008</div> </div>
City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution-PAC	<div>10000.00</div>
Candidate Name	<div>011</div> Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) <b>DENNIS CARDOZA FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.108919 <b>Date of Disbursement</b>
Mailing Address P. O. BOX 2749	<div> <div>06</div> <div>24</div> <div>2008</div> </div>
City Merced State CA Zip Code 95344	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	<div>1500.00</div>
Candidate Name	<div>011</div> Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 18	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) <b>DINGELL FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.108927 <b>Date of Disbursement</b>
Mailing Address 19855 W. Outer Dr. Suite 103A-E	<div> <div>06</div> <div>24</div> <div>2008</div> </div>
City Dearborn State MI Zip Code 48124-0000	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	<div>5000.00</div>
Candidate Name	<div>011</div> Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 15	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**16500.00**

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
DONNELLY FOR CONGRESS COMMITTEE

Mailing Address P. O. BOX 1961

City South Bend State IN Zip Code 46634

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 02

Transaction ID: SB23.108928

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
DRIEHAUS FOR CONGRESS

Mailing Address 3741 Glenmore Ave.

City Cincinnati State OH Zip Code 45211

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 01

Transaction ID: SB23.108810

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

2500.00

**C.** Full Name (Last, First, Middle Initial)  
DUTCH RUPPERSBERGER FOR CONGRESS COMMITTEE

Mailing Address 22 West Padonia Road,  
Suite C-141

City Timonium State MD Zip Code 21093

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District: 02

Transaction ID: SB23.108929

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

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

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

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
EARL POMEROY FOR CONGRESS

Mailing Address P. O. BOX 9336

City Fargo State ND Zip Code 58106

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: ND District: 01

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108878

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

2500.00

**B.** Full Name (Last, First, Middle Initial)  
EDDIE BERNICE JOHNSON FOR CONGRESS

Mailing Address 3102 Maple Ave.  
Suite 605

City Dallas State TX Zip Code 75201-1223

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: TX District: 30

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108930

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
ELLEN TAUSCHER FOR CONGRESS

Mailing Address P. O. BOX 1285

City Alamo State CA Zip Code 94507

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 10

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108931

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....



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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input 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, QUALIFI-  
ED

**A.** Full Name (Last, First, Middle Initial)  
ELLSWORTH FOR CONGRESS

Mailing Address P.O. Box 62

City Evansville State IN Zip Code 47708

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President  
Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 08

Transaction ID: SB23.110149

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

2500.00

**B.** Full Name (Last, First, Middle Initial)  
EMILY'S LIST

Mailing Address 1120 Connecticut Avenue NW  
Ste 1100

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Contribution-PAC

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President  
Disbursement For: 2008  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Transaction ID: SB23.107427

Date of Disbursement

06 / 10 / 2008

Amount of Each Disbursement this Period

5000.00

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

Mailing Address P.O. Box 30743

City PHILADELPHIA State PA Zip Code 19104

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President  
Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 02

Transaction ID: SB23.108879

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

8500.00

**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER:  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF BARBARA BOXER

Mailing Address 426 C St., NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

State: CA District: 02

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108932

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF BARBARA BOXER

Mailing Address 426 C St., NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution-Check voided

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

State: CA District: 02

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.110152

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

-5000.00

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF CAROLYN MCCARTHY

Mailing Address P. O. BOX 190

City Mineola State NY Zip Code 11501

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NY District: 04

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108826

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input 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, QUALIFI-  
ED

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF CORRINE BROWN

Mailing Address 3109 River Bend Court  
D-102

City State Zip Code  
Laurel MD 20724-0000

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: FL District: 03

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108880

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF CORRINE BROWN

Mailing Address 3109 River Bend Court  
D-102

City State Zip Code  
Laurel MD 20724-0000

Purpose of Disbursement  
Contribution- Check voided

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: FL District: 03

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108999

Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

-1000.00

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF DAN MAFFEI

Mailing Address 628 S. Main Street

City State Zip Code  
Syracuse NY 13212

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NY District: 25

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108805

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

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

5000.00

1000.00

2500.00

FEC Schedule B ( Form 3X) (Revised 02/2003)

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input 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, QUALIFI-  
ED

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF JOHN BARROW

Mailing Address P. O. BOX 8166

City Savannah State GA Zip Code 31412

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
State: GA District: 12  
Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108935

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

2500.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF JOHN CONYERS

Mailing Address P. O. BOX 17204

City Alexandria State VA Zip Code 22302

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
State: MI District: 14  
Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108936

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF MARK WARNER

Mailing Address 10 G Street, NE  
Suite 470

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☒ Senate ☐ President  
State: VA District: 00  
Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108769

Date of Disbursement

06 / 06 / 2008

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

8500.00

**TOTAL** This Period (last page this line number only) .....

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

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

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF MAURICE HINCHEY

Mailing Address P.O. Box 4497

City Kingston State NY Zip Code 12402

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NY District: 22

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108831

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF MAZIE HIRONO

Mailing Address P. O. BOX 677

City Honolulu State HI Zip Code 96809

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: HI District: 02

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108937

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF ROSA DELAURO

Mailing Address 49 HUNTINGTON STREET

City New Haven State CT Zip Code 06511

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CT District: 03

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108938

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF SENATOR CARL LEVIN

Mailing Address 10 G St., NE,  
Suite 470

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President  
State: MI District: 00

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108939

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

2500.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF TIM JOHNSON

Mailing Address PO Box 17097

City Urbana State IL Zip Code 61820

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President  
State: IL District: 15

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108940

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

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

Mailing Address 1 Ascan Ave.,  
#31

City Forest Hills State NY Zip Code 11375

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President  
State: NY District: 09

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108828

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

GIFFORDS FOR CONGRESS

Mailing Address P. O. BOX 27565

City  
Tucson

State  
AZ

Zip Code  
85726

Purpose of Disbursement  
Contribution

Candidate Name

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: AZ District: 08

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108941

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

4000.00

B.

Full Name (Last, First, Middle Initial)

GILLIBRAND FOR CONGRESS

Mailing Address P. O. BOX 1279

City  
Hudson

State  
NY

Zip Code  
12534

Purpose of Disbursement  
Contribution

Candidate Name

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NY District: 20

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108830

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

HAGAN SENATE COMMITTEE INC.

Mailing Address 324 W. Wendover Avenue  
#118

City  
Greensboro

State  
NC

Zip Code  
27408

Purpose of Disbursement  
Contribution

Candidate Name

011

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

State: NC District: 00

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108942

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

11500.00

**TOTAL** This Period (last page this line number only) .....



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

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

**A.** Full Name (Last, First, Middle Initial)  
HEATH SHULER FOR CONGRESS

Mailing Address P. O. BOX 8446

City Asheville State NC Zip Code 28814

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NC District: 11

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108882

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
HERSETH FOR CONGRESS

Mailing Address P.O. BOX 2009

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: SD District: 00

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108883

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

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

Mailing Address 1718 M Street, NW, #172  
Franklin Hall

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 32

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108944

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

11000.00

**TOTAL** This Period (last page this line number only) .....

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) HOUSE BACKPAC Mailing Address P. O. BOX 30344	<b>Transaction ID:</b> SB23.108853 <b>Date of Disbursement</b> <div> <div>06</div> <div>24</div> <div>2008</div> </div>
City Bethesda State MD Zip Code 20824 Purpose of Disbursement Contribution-PAC Candidate Name <div>011</div> Category/Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>2000.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) ISRAEL FOR CONGRESS Mailing Address P. O. BOX 777 City Deer Park State NY Zip Code 11729 Purpose of Disbursement Contribution Candidate Name <div>011</div> Category/Type Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 02	<b>Transaction ID:</b> SB23.108884 <b>Date of Disbursement</b> <div> <div>06</div> <div>24</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) JEFF MERKLEY FOR OREGON Mailing Address P. O. BOX 29136 City Portland State OR Zip Code 97286 Purpose of Disbursement Contribution Candidate Name <div>011</div> Category/Type Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 00	<b>Transaction ID:</b> SB23.108813 <b>Date of Disbursement</b> <div> <div>06</div> <div>19</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>5000.00</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**8000.00**

**TOTAL** This Period (last page this line number only) .....

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

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
JILL DERBY FOR CONGRESS

Mailing Address P. O. BOX 1901

City Minden State NV Zip Code 89523

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
 State: NV District: 02

Transaction ID: SB23.108803

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

2500.00

**B.** Full Name (Last, First, Middle Initial)  
JIM COSTA FOR CONGRESS

Mailing Address 2037 West Bullard,  
Suite 355

City Fresno State CA Zip Code 93711-1200

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
 State: CA District: 20

Transaction ID: SB23.108945

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
JIM HUNT FOR CONGRESS

Mailing Address P. O. BOX 449

City Helena State MT Zip Code 59624

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General ☐ Other (specify) ▼  
 State: MT District: 00

Transaction ID: SB23.106684

Date of Disbursement

06 / 02 / 2008

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

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

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

**A.** Full Name (Last, First, Middle Initial)  
JOHN BOCCIERI FOR CONGRESS

Mailing Address P. O. BOX 3016

City State Zip Code  
Alliance OH 44601

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
State: OH District: 16  
Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108812

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

2500.00

**B.** Full Name (Last, First, Middle Initial)  
JOHN HALL FOR CONGRESS

Mailing Address P. O. BOX 274

City State Zip Code  
Hopewell Junction NY 12533

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
State: NY District: 19  
Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108848

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

2000.00

**C.** Full Name (Last, First, Middle Initial)  
JOHN SALAZAR FOR CONGRESS

Mailing Address 307 N. Santa Fe

City State Zip Code  
Pueblo CO 81003

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
State: CO District: 03  
Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108946

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5500.00

**TOTAL** This Period (last page this line number only) .....

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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

## **A.** Full Name (Last, First, Middle Initial) JOHN SARBANES FOR CONGRESS

Mailing Address P. O. BOX 6854

City Baltimore State MD Zip Code 21285

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
 State: MD District: 03

Transaction ID: SB23.108947

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

## **B.** Full Name (Last, First, Middle Initial) JOHN TIERNEY FOR CONGRESS

Mailing Address 9 Main Street,  
Suite #11

City Peabody State MA Zip Code 01960

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General ☐ Other (specify) ▼  
 State: MA District: 06

Transaction ID: SB23.108948

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

## **C.** Full Name (Last, First, Middle Initial) KAPTUR FOR CONGRESS

Mailing Address P.O. Box 899

City Toledo State OH Zip Code 43697

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General ☐ Other (specify) ▼  
 State: OH District: 09

Transaction ID: SB23.108829

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

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

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

KAY FOR CONGRESS

Mailing Address P. O. BOX 14194

City  
Kansas City

State  
MO

Zip Code  
64152

Purpose of Disbursement  
Contribution

Candidate Name

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MO District: 06

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108798

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

KILDEE FOR CONGRESS

Mailing Address P.O BOX 317

City  
Flint

State  
MI

Zip Code  
48501-0000

Purpose of Disbursement  
Contribution

Candidate Name

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MI District: 05

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108949

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

KILROY FOR CONGRESS

Mailing Address 271 East State Street

City  
Columbus

State  
OH

Zip Code  
43215

Purpose of Disbursement  
Contribution

Candidate Name

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: OH District: 15

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108811

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

KIRKPATRICK FOR ARIZONA

Mailing Address 141 S. McCormick St.

City  
Prescott

State  
AZ

Zip Code  
86303

Purpose of Disbursement  
Contribution

Candidate Name

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: AZ District: 01

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108783

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

KISSELL FOR CONGRESS

Mailing Address 106 E. Main Street

City  
Biscoe

State  
NC

Zip Code  
27209

Purpose of Disbursement  
Contribution

Candidate Name

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NC District: 08

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108799

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

KLEIN FOR CONGRESS

Mailing Address 21301 Powerline Rd.,  
Suite 204

City  
Boca Raton

State  
FL

Zip Code  
33433

Purpose of Disbursement  
Contribution

Candidate Name

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: FL District: 22

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108950

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

10000.00

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

KOSMAS FOR CONGRESS

Mailing Address 920 3rd Ave.

City  
New Smyrna Beach

State  
FL

Zip Code  
32170

Purpose of Disbursement  
Contribution

Candidate Name

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 24

**Transaction ID:** SB23.108790

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

KURT SCHRADER FOR CONGRESS

Mailing Address 2525 N. Baker Drive

City  
Canby

State  
OR

Zip Code  
97013

Purpose of Disbursement  
Contribution

Candidate Name

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OR District: 05

**Transaction ID:** SB23.108814

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

LAMPSON FOR CONGRESS

Mailing Address P.O. BOX 58606

City  
Houston

State  
TX

Zip Code  
77258

Purpose of Disbursement  
Contribution

Candidate Name

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 22

**Transaction ID:** SB23.108951

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

9000.00

**TOTAL** This Period (last page this line number only) .....



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 337 / 360

<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, QUALIFI-  
ED

**A.**

Full Name (Last, First, Middle Initial)

LANGEVIN FOR CONGRESS

Mailing Address 181-A Knight Street

City  
Warwick

State  
RI

Zip Code  
02886

Purpose of Disbursement  
Contribution

Candidate Name

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: RI District: 02

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108885

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

LINDA STENDER FOR CONGRESS

Mailing Address P. O. BOX 730

City  
Scotch Plains

State  
NJ

Zip Code  
07076

Purpose of Disbursement  
Contribution

Candidate Name

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NJ District: 07

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108801

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

LOEBSACK FOR CONGRESS

Mailing Address P. O. BOX 1457

City  
Iowa City

State  
IA

Zip Code  
52244

Purpose of Disbursement  
Contribution

Candidate Name

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: IA District: 02

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108952

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 338 / 360

<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, QUALIFI-  
ED

A.

Full Name (Last, First, Middle Initial)

LOFGREN FOR CONGRESS

Mailing Address P. O. BOX 55804

City  
Sherman Oaks

State  
CA

Zip Code  
91413

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 16

Transaction ID: SB23.108953

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

LOUISIANA DEMOCRATIC PARTY - FEDERAL ACCT.

Mailing Address P.O. Box 4385

City  
BATON ROUGE

State  
LA

Zip Code  
70821-4385

Purpose of Disbursement  
Contribution-PAC Check voided

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Transaction ID: SB23.108991

Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

-1000.00

C.

Full Name (Last, First, Middle Initial)

M-PAC

Mailing Address 712 35th Avenue

City  
Seattle

State  
WA

Zip Code  
98122

Purpose of Disbursement  
Contribution-PAC

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Transaction ID: SB23.108856

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) .....

2000.00

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

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

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

06 / 19 / 2008

2500.00

MM / DD / YYYY

5000.00

Three digital displays showing the date 06/19/2008 in MM/DD/YYYY format. The first display shows '06' with 'M' above each digit. The second display shows '19' with 'D' above each digit. The third display shows '2008' with 'Y' above each digit. The displays are separated by slashes.

2500.00

FEC Schedule B ( Form 3X) (Revised 02/2003)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 340 / 360

<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, QUALIFI-  
ED**A.**Full Name (Last, First, Middle Initial)  
MATHESON FOR CONGRESS

Mailing Address P. O. BOX 521048

City State Zip Code  
SALT LAKE CITY UT 84152Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: UT District: 02

Transaction ID: SB23.108955

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	0	8

Amount of Each Disbursement this Period

2500.00

**B.**Full Name (Last, First, Middle Initial)  
MATSUI FOR CONGRESS

Mailing Address P.O. Box 1738

City State Zip Code  
Sacramento CA 95812Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 05

Transaction ID: SB23.108956

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	0	8

Amount of Each Disbursement this Period

1000.00

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

Mailing Address 66 Arnold Street

City State Zip Code  
Staten Island NY 10301Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 13

Transaction ID: SB23.108957

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	0	8

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) .....

8500.00

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

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

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

2500.00

1000.00

1000.00

FEC Schedule B ( Form 3X) (Revised 02/2003)

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MOORE FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.108962 <b>Date of Disbursement</b>
Mailing Address PO BOX 14631	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 4 / 2 0 0 8</div> </div>
City SHAWNEY MISSION State KS Zip Code 66285	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Candidate Name	<div> <div>1000.00</div> <div>011 Category/ Type</div> </div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 03	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) <b>NANCY BOYDA FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.108792 <b>Date of Disbursement</b>
Mailing Address P. O. BOX 1471	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 9 / 2 0 0 8</div> </div>
City Topeka State KS Zip Code 66601	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Candidate Name	<div> <div>2500.00</div> <div>011 Category/ Type</div> </div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 02	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) <b>NANCY PELOSI FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.108963 <b>Date of Disbursement</b>
Mailing Address 235 Montgomery St., Suite 610	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 4 / 2 0 0 8</div> </div>
City San Francisco State CA Zip Code 94104	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Candidate Name	<div> <div>5000.00</div> <div>011 Category/ Type</div> </div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 08	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**8500.00**

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input 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, QUALIFI-  
ED

A.

Full Name (Last, First, Middle Initial)

NAPOLITANO FOR CONGRESS

Mailing Address 555 Capitol Mall  
Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 38

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108964

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

NELSON FOR US SENATE

Mailing Address P.O. Box 540154

City Omaha State NE Zip Code 68154

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

State: NE District: 00

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108887

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

NORM DICKS FOR CONGRESS

Mailing Address PO BOX 1663

City TACOMA State WA Zip Code 98401

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: WA District: 06

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108888

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 344 / 360

<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, QUALIFI-  
ED

**A.** Full Name (Last, First, Middle Initial)  
ORTIZ FOR CONGRESS CAMPAIGN

Mailing Address P. O. BOX 7806

City State Zip Code  
Corpus Christi TX 78467

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
State: TX District: 27

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108965

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
PASCRELL FOR CONGRESS INC.

Mailing Address P. O. Box 640

City State Zip Code  
Totowa NJ 07511

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
State: NJ District: 08

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108889

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
PASTOR FOR ARIZONA COMMITTEE

Mailing Address P. O. BOX 1978

City State Zip Code  
Phoenix AZ 85001-1978

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
State: AZ District: 04

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108900

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 345 / 360

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

## **A.** Full Name (Last, First, Middle Initial) **PATRICK MURPHY FOR CONGRESS**

Mailing Address P. O. BOX 868

City State Zip Code  
 Levittown PA 19058-0868

Purpose of Disbursement  
 Contribution

Candidate Name

011  
 Category/  
 Type

Office Sought: ☒ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼  
 State: PA District: 08

Transaction ID: SB23.108890

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

## **B.** Full Name (Last, First, Middle Initial) **PAUL TONKO FOR CONGRESS**

Mailing Address 911 Central Ave.  
 #221

City State Zip Code  
 Albany NY 12206-1350

Purpose of Disbursement  
 Contribution

Candidate Name

011  
 Category/  
 Type

Office Sought: ☒ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼  
 State: NY District: 21

Transaction ID: SB23.108966

Date of Disbursement

06 / 26 / 2008

Amount of Each Disbursement this Period

5000.00

## **C.** Full Name (Last, First, Middle Initial) **PEOPLE FOR BEN**

Mailing Address 1516 Paseo de Peralta

City State Zip Code  
 Santa Fe NM 87506

Purpose of Disbursement  
 Contribution

Candidate Name

011  
 Category/  
 Type

Office Sought: ☒ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼  
 State: NM District: 03

Transaction ID: SB23.108802

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

11000.00

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 346 / 360

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

PETERS FOR CONGRESS

Mailing Address P. O. BOX 226

City  
Bloomfield Hills

State  
MI

Zip Code  
48303-0226

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 09

Transaction ID: SB23.108797

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

PETE STARK RE-ELECTION COMMITTEE

Mailing Address P. O. BOX 8331

City  
Freemont

State  
CA

Zip Code  
94537

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 13

Transaction ID: SB23.108968

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

POWERS FOR CONGRESS

Mailing Address P. O. BOX 46

City  
Buffalo

State  
NY

Zip Code  
14231

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 26

Transaction ID: SB23.108806

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 347 / 360

<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, QUALIFI-  
ED

**A. Full Name (Last, First, Middle Initial)**  
**PROGRESSIVE VOTERS OF AMERICA PAC**

Mailing Address P. O. BOX 852

City Burlington State VT Zip Code 05402

Purpose of Disbursement  
Contribution-PAC

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

**Transaction ID:** SB23.108857

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

2500.00

**B. Full Name (Last, First, Middle Initial)**  
**RAUL MARTINEZ FOR CONGRESS**

Mailing Address 900 West 49th Street  
Suite 236

City Hialeah State FL Zip Code 33012

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 21

**Transaction ID:** SB23.108788

Date of Disbursement

06 / 19 / 2008

Amount of Each Disbursement this Period

5000.00

**C. Full Name (Last, First, Middle Initial)**  
**RE-ELECT MCGOVERN COMMITTEE**

Mailing Address P. O. BOX 60405

City Worcester State MA Zip Code 01606-0405

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: MA District: 03

**Transaction ID:** SB23.108969

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

8500.00

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

REED COMMITTEE

Mailing Address P. O. BOX 8628

City Cranston State RI Zip Code 02920

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☒ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼  
 State: RI District: 00

Transaction ID: SB23.108891

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

RONNIE MUSGROVE FOR SENATE

Mailing Address 735 N. Congress St.

City Jackson State MS Zip Code 39202

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House ☒ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼  
 State: MS District: 00

Transaction ID: SB23.108971

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

ROYBAL-ALLARD FOR CONGRESS

Mailing Address P. O. BOX 582

City Kensington State MD Zip Code 20895

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
 Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼  
 State: CA District: 34

Transaction ID: SB23.108973

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

11000.00

**TOTAL** This Period (last page this line number only) .....

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

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

1000.00

2500.00

1000.00

FEC Schedule B ( Form 3X) (Revised 02/2003)

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 350 / 360

<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, QUALIFI-  
ED

**A.** Full Name (Last, First, Middle Initial)  
SEARCHLIGHT LEADERSHIP FUND

Mailing Address 426 C St., NE  
Rear Building

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution-PAC

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Transaction ID: SB23.108893

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
SESTAK FOR CONGRESS

Mailing Address P. O. BOX 16

City Media State PA Zip Code 19063

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 07

Transaction ID: SB23.108894

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

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

Mailing Address P. O. BOX 16

City Media State PA Zip Code 19063

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 07

Transaction ID: SB23.108970

Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

3000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

9000.00

**TOTAL** This Period (last page this line number only) .....

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

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

06 / 24 / 2008

1000.00

1000.00

1000.00

FEC Schedule B ( Form 3X) (Revised 02/2003)

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 352 / 360

<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, QUALIFI-  
ED

**A.** Full Name (Last, First, Middle Initial)  
STEPHEN F LYNCH FOR CONGRESS COMMITTEE

Mailing Address 88 Black Falcon Ave.  
Suite 246

City Boston State MA Zip Code 02210

Purpose of Disbursement  
Contribution- Check voided

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MA District: 09

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108993

Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

-1000.00

**B.** Full Name (Last, First, Middle Initial)  
TAMMY BALDWIN FOR CONGRESS

Mailing Address P. O. BOX 696

City Madison State WI Zip Code 53701

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: WI District: 02

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108837

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
THE COMMITTEE TO RE-ELECT ARTUR DAVIS TO CONGRESS

Mailing Address P. O. BOX 1845

City Birmingham State AL Zip Code 35201-1845

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: AL District: 07

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108975

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 353 / 360

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

THE MESABI FUND

Mailing Address P. O. BOX 7853

City  
Washington

State  
DC

Zip Code  
20044-7853

Purpose of Disbursement  
Contribution-PAC Check voided

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2007  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Transaction ID: SB23.108997

Date of Disbursement

06 / 30 / 2008

Amount of Each Disbursement this Period

-2500.00

**B.**

Full Name (Last, First, Middle Initial)

THE NIKI TSONGAS COMMITTEE

Mailing Address 26 Market Street

City  
Lowell

State  
MA

Zip Code  
01852

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MA District: 05

Transaction ID: SB23.108976

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

TIM MAHONEY FOR FLORIDA

Mailing Address 4114 Northlake Blvd.  
Suite 300

City  
West Palm Beach

State  
FL

Zip Code  
33410

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 16

Transaction ID: SB23.108896

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 355 / 360

<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, QUALIFI-  
ED

**A.** Full Name (Last, First, Middle Initial)  
VAN HOLLEN FOR CONGRESS

Mailing Address 10537 St. Paul Street

City Kensington State MD Zip Code 20895

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MD District: 08

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108979

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
VICTORY NOW PAC

Mailing Address 10605 Concord St.  
Suite 202

City Kensington State MD Zip Code 20895

Purpose of Disbursement  
Contribution-PAC

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☐ Primary ☐ General  
☒ Other (specify) ▼

Transaction ID: SB23.108897

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

5000.00

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

Mailing Address P. O. BOX 1086

City Montpelier State VT Zip Code 05601

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: VT District: 00

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.108825

Date of Disbursement

06 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

11000.00

**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 356 / 360

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

WOOLSEY FOR CONGRESS

Mailing Address P.O. BOX 750176

City  
PETALUMA

State  
CA

Zip Code  
94975

Purpose of Disbursement  
Contribution

Candidate Name

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 06

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108981

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

YARMUTH FOR CONGRESS

Mailing Address 1815 Brownsboro Road  
Ste. 100

City  
Louisville

State  
KY

Zip Code  
40206

Purpose of Disbursement  
Contribution

Candidate Name

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: KY District: 03

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108980

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

ZACK SPACE FOR CONGRESS COMMITTEE

Mailing Address 714 N. Wooster Avenue

City  
Dover

State  
OH

Zip Code  
44622

Purpose of Disbursement  
Contribution

Candidate Name

011

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: OH District: 18

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.108898

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

352150.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 357 / 360

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFI-  
ED
**A. Full Name (Last, First, Middle Initial) of Debtor or Creditor**  
 DRIVER MEDIA

 Nature of Debt (Purpose):  
 Media Ad-no federal candi-  
 date referenced

Mailing Address 115 West 27 Street

City	State	ZIP Code
New York	NY	10001

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.110608

Amount Incurred This Period

24335.95

Payment This Period

0.00

Outstanding Balance at Close of This Period

24335.95

1) **SUBTOTALS** This Period This Page (optional)..... ▶

24335.95

2) **TOTALS** This Period (last page this line number only)..... ▶

24335.95

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

24335.95

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 358 / 360

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - PEOPLE, QUALIFIED			<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00011114</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice				
Full Name (Last, First, Middle, Initial) of Payee AFSCME INTERNATIONAL			Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 0 6</div> <div style="border: 1px solid black; padding: 2px;">D D 1 8</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>	
Mailing Address 1625 L STREET NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">564.43</div>	
City State Zip Code WASHINGTON DC 20036			<b>Transaction ID:</b> SE.108773	
Purpose of Expenditure Staff Costs		Office Sought: <input type="checkbox"/> House State: <u>AZ</u> <input type="checkbox"/> Senate District: <u>00</u> <input checked="" type="checkbox"/> Presidential		
Category/Type 001		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
Name of Federal Candidate supported or Opposed by expenditure: JOHN MCCAIN			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
Calendar Year-To-Date Per Election for Office Sought			<input type="checkbox"/> Other (specify) : _____ 2008	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">564.43</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">564.43</div>
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.	
WILLIAM LUCY _____ Signature	Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 0 7</div> <div style="border: 1px solid black; padding: 2px;">D D 1 8</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 0 8</div> </div>

Image# 28991529614

Form/Schedule: **SB21B**  
Transaction ID: **SB21B.108757**

This disbursement did not contain express advocacy.

Form/Schedule: **SB21B**  
Transaction ID: **SB21B.108764**

This disbursement did not contain express advocacy.

**Image# 28991529615**

Form/Schedule: **SD10**

Transaction ID: **SD10.110608**

This obligation was for the costs incurred in the preparation of a media ad and did not contain express advocacy. The payment will be disclosed on Schedule B, Line 21(b).

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