

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

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

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 ▲

C C00011114

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

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

- (c) 12-Day ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)  
**PRE-Election** Report for the: ☐ Convention (12C) ☐ Special (12S)

Election on  /  /  in the State of

- (d) 30-Day ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)  
**POST-Election** Report for the:

Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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

Type or Print Name of Treasurer LAURA REYES

Signature of Treasurer LAURA REYES

[Electronically Filed]

Date

08

19

2013

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

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 & MUNICIPAL EMPLOYEES P E O P L E

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 07 / 01 / 2013 To: M M / D D / Y Y Y Y Y Y 07 / 31 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> 2013		1474046.12
(b) Cash on Hand at Beginning of Reporting Period.....	3451417.03	
(c) Total Receipts (from Line 19) .....	526515.10	4938017.29
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	3977932.13	6412063.41
7. Total Disbursements (from Line 31) .....	636985.83	3071117.11
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	3340946.30	3340946.30
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) .....	1889788.39	



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 &amp; MUNICIPAL EMPLOYEES P E O P L E

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 07 / 01 / 2013

To:

 M M / D D / Y Y Y Y Y  
 07 / 31 / 2013
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

66197.78

307898.38

(ii) Unitemized .....

459872.25

4280427.05

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

526070.03

4588325.43

(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) .....

526070.03

4588325.43

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

336888.56

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

10347.05

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

445.07

2456.25

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

526515.10

4938017.29

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

526515.10

4938017.29

**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) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	16729.14	83458.09
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	16729.14	83458.09
22. Transfers to Affiliated/Other Party Committees.....	119000.00	582048.21
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	37250.00	795250.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	464006.69	1610211.61
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	149.20
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	149.20
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	636985.83	3071117.11
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	636985.83	3071117.11

**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) .....	526070.03	4588325.43
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	149.20
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	526070.03	4588176.23
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	16729.14	83458.09
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	10347.05
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	16729.14	73111.04

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6 OF 516

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. JEFFREY S. ABBE**

Mailing Address P.O. Box 486

City

Harold

State

KY

Zip Code

41635

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ORGANIZER II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

845.47

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	3

**Transaction ID : SA11AI.24041**

Amount of Each Receipt this Period

66.67

Full Name (Last, First, Middle Initial)

**B. JEFFREY S. ABBE**

Mailing Address P.O. Box 486

City

Harold

State

KY

Zip Code

41635

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ORGANIZER II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

912.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	3

**Transaction ID : SA11AI.24042**

Amount of Each Receipt this Period

66.67

Full Name (Last, First, Middle Initial)

**C. KAREN ABBATICI**

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 ▼

340.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	3

**Transaction ID : SA11AI.25800**

Amount of Each Receipt this Period

48.66

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

182.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 516

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. JULIE K. ABEL**Mailing Address 4109 S. 147 Plaza  
#204

City	State	Zip Code
Omaha	NE	68137

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME NE LOC 61

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2013

Transaction ID : SA11AI.25150

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. RICHARD ABELSON**

Mailing Address 4315 N. Lake Drive

City	State	Zip Code
Shorewood	WI	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 ▼

630.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2013

Transaction ID : SA11AI.26229

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**C. RICHARD ABELSON**

Mailing Address 4315 N. Lake Drive

City	State	Zip Code
Shorewood	WI	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 ▼

708.41

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

Transaction ID : SA11AI.24044

Amount of Each Receipt this Period

78.41

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

160.41

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:  
(check only one)

PAGE 8 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. RICHARD ABELSON</b></p> <p>Mailing Address 4315 N. Lake Drive</p> <p>City Shorewood State WI Zip Code 53211</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WI CN 48 Occupation EXECUTIVE DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ <b>786.82</b></p>			<p>Date of Receipt  <b>07 / 31 / 2013</b>  <b>Transaction ID : SA11AI.24043</b> </p> <p>Amount of Each Receipt this Period  <b>78.41</b> </p>	
<p>Full Name (Last, First, Middle Initial) <b>B. CANDACE M. ACORD</b></p> <p>Mailing Address 9 Appollo Place</p> <p>City Iowa City State IA Zip Code 52240</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME IA CN 61/DOCS Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ <b>385.00</b></p>			<p>Date of Receipt  <b>07 / 03 / 2013</b>  <b>Transaction ID : SA11AI.24640</b> </p> <p>Amount of Each Receipt this Period  <b>27.50</b> </p>	
<p>Full Name (Last, First, Middle Initial) <b>C. CANDACE M. ACORD</b></p> <p>Mailing Address 9 Appollo Place</p> <p>City Iowa City State IA Zip Code 52240</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME IA CN 61/DOCS Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ <b>412.50</b></p>			<p>Date of Receipt  <b>07 / 15 / 2013</b>  <b>Transaction ID : SA11AI.24641</b> </p> <p>Amount of Each Receipt this Period  <b>27.50</b> </p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><b>133.41</b></p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				



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

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

FOR LINE NUMBER: PAGE 9 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. CANDACE M. ACORD**

Mailing Address 9 Appollo Place

City State Zip Code  
Iowa City IA 52240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/DOCS

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2013

Transaction ID : SA11AI.24642

Amount of Each Receipt this Period

27.50

Full Name (Last, First, Middle Initial)

**B. ALAN D ACRI**

Mailing Address 400 HILLTOP ROAD

City State Zip Code  
STRASBURG PA 17579

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 ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25801

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. DAVID ADAM**

Mailing Address 468 Hudson Avenue

City State Zip Code  
Newark OH 43055

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.92

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25596

Amount of Each Receipt this Period

34.96

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

102.46

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. DAVID ADAM**

Mailing Address 468 Hudson Avenue

City State Zip Code  
Newark OH 43055

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.88

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25597

Amount of Each Receipt this Period

34.96

Full Name (Last, First, Middle Initial)

**B. JAMES M. ADKINS**

Mailing Address 21 Herbert Street

City State Zip Code  
Richwood OH 43344

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11

Occupation

PLUMBER II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 12 / 2013

Transaction ID : SA11AI.25308

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. JAMES M. ADKINS**

Mailing Address 21 Herbert Street

City State Zip Code  
Richwood OH 43344

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11

Occupation

PLUMBER II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 26 / 2013

Transaction ID : SA11AI.25309

Amount of Each Receipt this Period

50.00

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

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

134.96

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

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. SUMBUL ALAM**

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 ▼

294.56

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2013

Transaction ID : SA11AI.24797

Amount of Each Receipt this Period

42.08

Full Name (Last, First, Middle Initial)

## **B. THORNTON P. ALBERG**

Mailing Address 615 136th Street E

City State Zip Code  
Tacoma WA 98445

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2013

Transaction ID : SA11AI.25974

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **C. THORNTON P. ALBERG**

Mailing Address 615 136th Street E

City State Zip Code  
Tacoma WA 98445

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 25 / 2013

Transaction ID : SA11AI.25975

Amount of Each Receipt this Period

25.00

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

92.08

**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 12 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. SHIRA Y. ALBERT

Mailing Address 625 N Sycamore Avenue  
#306

City State Zip Code  
Los Angeles CA 90036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME CA LOC 1199/COPE

Occupation

NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2013

Transaction ID : SA11AI.24499

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. SHIRA Y. ALBERT

Mailing Address 625 N Sycamore Avenue  
#306

City State Zip Code  
Los Angeles CA 90036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME CA LOC 1199/COPE

Occupation

NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2013

Transaction ID : SA11AI.24500

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. SHANA ALDERTON

Mailing Address 710 Chippewa Square

City State Zip Code  
Marquette MI 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 ▼

470.73

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.24843

Amount of Each Receipt this Period

36.21

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

76.21

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 13 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. LISA A. ALEXANDER**

Mailing Address 5050 Westbrook Street SE

City

Magnolia

State

OH

Zip Code

44643

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.88

Date of Receipt

 M M / D D / Y Y Y Y Y  
 07 / 01 / 2013

Transaction ID : SA11AI.25239

Amount of Each Receipt this Period

50.94

Full Name (Last, First, Middle Initial)

**B. SHARON J. ALEXANDER**

Mailing Address 12510 Chalford Lane

City

Bowie

State

MD

Zip Code

20715

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.31

Date of Receipt

 M M / D D / Y Y Y Y Y  
 07 / 15 / 2013

Transaction ID : SA11AI.24045

Amount of Each Receipt this Period

37.87

Full Name (Last, First, Middle Initial)

**C. SHARON J. ALEXANDER**

Mailing Address 12510 Chalford Lane

City

Bowie

State

MD

Zip Code

20715

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.18

Date of Receipt

 M M / D D / Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.24046

Amount of Each Receipt this Period

37.87

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

126.68

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. 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 ▼

872.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.25776

Amount of Each Receipt this Period

14.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

1001.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.25777

Amount of Each Receipt this Period

129.00

Full Name (Last, First, Middle Initial)

**C. CONNIE G. ALONZO**

Mailing Address 6082 E CR 700S

City

Plainfield

State

IN

Zip Code

46168

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD OFFICE ASSISTANT I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.99

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24047

Amount of Each Receipt this Period

20.57

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

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

163.57

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

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

FOR LINE NUMBER: PAGE 15 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. CONNIE G. ALONZO**

Mailing Address 6082 E CR 700S

 City  
 Plainfield

 State  
 IN  
 Zip Code  
 46168

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD OFFICE ASSISTANT I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.56

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.24048

Amount of Each Receipt this Period

20.57

Full Name (Last, First, Middle Initial)

**B. LAQUITA ALSUM**

Mailing Address 1424 N. Pennsylvania Street

 City  
 Indianapolis

 State  
 IN  
 Zip Code  
 46202

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

AFSCME IN CN 62

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2013

Transaction ID : SA11AI.24769

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**C. BARBARA ANDERSON**

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 ▼

403.06

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 22 / 2013

Transaction ID : SA11AI.25802

Amount of Each Receipt this Period

57.58

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

120.15

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

120.15

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

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

FOR LINE NUMBER: PAGE 16 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<b>A. CAROL A ANDERSON</b> Full Name (Last, First, Middle Initial) Mailing Address 303 Dias Drive City Fort Washington State MD Zip Code 20744 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation ASSOCIATE DIRECTOR, EDUCATION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 687.83			Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24049</b> Amount of Each Receipt this Period 52.91		
<b>B. CAROL A ANDERSON</b> Full Name (Last, First, Middle Initial) Mailing Address 303 Dias Drive City Fort Washington State MD Zip Code 20744 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation ASSOCIATE DIRECTOR, EDUCATION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 740.74			Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24050</b> Amount of Each Receipt this Period 52.91		
<b>C. EARLENE ANDERSON</b> Full Name (Last, First, Middle Initial) Mailing Address 2396 Highway 22 W City Muscatine State IA Zip Code 52761 FEC ID number of contributing federal political committee. C Name of Employer AFSCME IA CN 61 Occupation CLERK Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2013 <b>Transaction ID : SA11AI.24644</b> Amount of Each Receipt this Period 50.00		
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			155.82		
<b>TOTAL</b> This Period (last page this line number only)..... ▶					



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

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

FOR LINE NUMBER: PAGE 17 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. EARLENE ANDERSON</b></p> <p>Mailing Address 2396 Highway 22 W</p> <p>City Muscatine State IA Zip Code 52761</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME IA CN 61 Occupation CLERK</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  350.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 08 / 2013</p> <p><b>Transaction ID : SA11AI.24643</b></p> <p>Amount of Each Receipt this Period  50.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. TIMOTHY T ANDERSON</b></p> <p>Mailing Address 2725 Eldred Court</p> <p>City Apopka State FL Zip Code 32712</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  341.96</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013</p> <p><b>Transaction ID : SA11AI.24051</b></p> <p>Amount of Each Receipt this Period  26.41</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. TIMOTHY T ANDERSON</b></p> <p>Mailing Address 2725 Eldred Court</p> <p>City Apopka State FL Zip Code 32712</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  368.37</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013</p> <p><b>Transaction ID : SA11AI.24052</b></p> <p>Amount of Each Receipt this Period  26.41</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		102.82
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

X	11a		11b		11c		12		
	13		14		15		16		17

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

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

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

 FOR LINE NUMBER: PAGE 19 OF 516  
 (check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. DAVID 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 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

867.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2013

Transaction ID : SA11AI.25804

Amount of Each Receipt this Period

173.52

Full Name (Last, First, Middle Initial)

**B. JOHN P. APPELDORN**

Mailing Address 16889 Mahoning Avenue

City	State	Zip Code
Lake Milton	OH	44429

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

MAINTENANCE REPAIR TECH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2013

Transaction ID : SA11AI.25315

Amount of Each Receipt this Period

16.00

Full Name (Last, First, Middle Initial)

**C. JOHN P. APPELDORN**

Mailing Address 16889 Mahoning Avenue

City	State	Zip Code
Lake Milton	OH	44429

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

MAINTENANCE REPAIR TECH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2013

Transaction ID : SA11AI.25314

Amount of Each Receipt this Period

16.00

**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 20 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. JOHN R. R ARCHER**

Mailing Address 5330 East Charleston Blvd.,  
#82

City State Zip Code  
Las Vegas NV 89104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME NV 4041

Occupation

Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24053

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. JOHN R. R ARCHER**

Mailing Address 5330 East Charleston Blvd.,  
#82

City State Zip Code  
Las Vegas NV 89104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME NV 4041

Occupation

Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24054

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. STEPHEN L. ARMSTRONG**

Mailing Address 315 South Locust Avenue

City State Zip Code  
New Hampton IA 50659

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

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  
07 / 22 / 2013

Transaction ID : SA11AI.24645

Amount of Each Receipt this Period

33.00

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

83.00

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

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

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

FOR LINE NUMBER: PAGE 21 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. DARYL AROLA

Mailing Address 33828 Indiana Drive

City

Grand Rapids

State

MN

Zip Code

55744-5254

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24933

Amount of Each Receipt this Period

28.00

Full Name (Last, First, Middle Initial)

B. VANESSA ARPIN

Mailing Address 3910 237th Place SW

City

Brier

State

WA

Zip Code

98036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

JOURNEY ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 24 / 2013

Transaction ID : SA11AI.25976

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. HORTENCIA F. ARRIAGA

Mailing Address 8385 Ira Court

City

Riverside

State

CA

Zip Code

92508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME CA LOC 1199/COPE

Occupation

NURSE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2013

Transaction ID : SA11AI.24502

Amount of Each Receipt this Period

20.00

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 22 OF 516  
 (check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial) <b>A. HORTENCIA F. ARRIAGA</b>			Date of Receipt <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>7</td><td></td> <td>3</td><td>0</td><td></td> <td>2</td><td>0</td><td>1</td><td>3</td> </tr> </table> <b>Transaction ID : SA11AI.24501</b>			M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	0		2	0	1	3
M	M	/	D	D	/	Y	Y	Y	Y																
0	7		3	0		2	0	1	3																
Mailing Address 8385 Ira Court			Amount of Each Receipt this Period <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>20.00</td> </tr> </table>																						20.00
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FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>			C																						
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Name of Employer AFSCME CA LOC 1199/COPE		Occupation NURSE																							
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>410.00</td> </tr> </table>																							410.00
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Full Name (Last, First, Middle Initial) <b>B. MICHAEL L. ARTZ</b>			Date of Receipt <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>7</td><td></td> <td>1</td><td>5</td><td></td> <td>2</td><td>0</td><td>1</td><td>3</td> </tr> </table> <b>Transaction ID : SA11AI.24055</b>			M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	5		2	0	1	3
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Mailing Address 745 Irving Street NW			Amount of Each Receipt this Period <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>47.77</td> </tr> </table>																						47.77
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Full Name (Last, First, Middle Initial) <b>C. MICHAEL L. ARTZ</b>			Date of Receipt <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>7</td><td></td> <td>3</td><td>1</td><td></td> <td>2</td><td>0</td><td>1</td><td>3</td> </tr> </table> <b>Transaction ID : SA11AI.24056</b>			M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	1	3
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Mailing Address 745 Irving Street NW			Amount of Each Receipt this Period <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>47.77</td> </tr> </table>																						47.77
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<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>115.54</td> </tr> </table>												115.54										
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<b>TOTAL</b> This Period (last page this line number only)..... ▶			<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																						

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

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

FOR LINE NUMBER: PAGE 23 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. LAURA M. ASKELIN**

Mailing Address 1031 4th Avenue S.E.

City State Zip Code  
 Rochester MN 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 ▼

387.56

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 08 / 2013

Transaction ID : SA11AI.24935

Amount of Each Receipt this Period

55.52

Full Name (Last, First, Middle Initial)

**B. JALADAH ASLAM**

Mailing Address 3895 Cannon Road

City State Zip Code  
 Austintown OH 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 ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 01 / 2013

Transaction ID : SA11AI.25240

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. LUISA M. AZEVEDO**

Mailing Address 10776 La Roda Drive

City State Zip Code  
 Cupertino CA 95014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME CA CN 57/LOCAL 829

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  
 07 / 24 / 2013

Transaction ID : SA11AI.24474

Amount of Each Receipt this Period

35.00

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

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

130.52

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

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

FOR LINE NUMBER: PAGE 24 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. DEBORAH A. BABB**

Mailing Address 6005 East Oakwood Drive

City

Pleasant Hill

State

IA

Zip Code

50327

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

SAFETY AND HEALTH CON.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

07 / 12 / 2013

Transaction ID : SA11AI.24646

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. DEBORAH A. BABB**

Mailing Address 6005 East Oakwood Drive

City

Pleasant Hill

State

IA

Zip Code

50327

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

SAFETY AND HEALTH CON.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 23 / 2013

Transaction ID : SA11AI.24647

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. W. JEAN BACKMAN**

Mailing Address 1212 Jefferson Street

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 ▼

350.00

Date of Receipt

07 / 24 / 2013

Transaction ID : SA11AI.25977

Amount of Each Receipt this Period

50.00

**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 25 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<b>A. RICHARD C. BADGER II</b> Full Name (Last, First, Middle Initial) 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 595.00			Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.26205</b> Amount of Each Receipt this Period 85.00	
<b>B. RICHARD C. BADGER II</b> Full Name (Last, First, Middle Initial) 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 680.00			Date of Receipt M M / D D / Y Y Y Y Y 07 / 30 / 2013 <b>Transaction ID : SA11AI.26206</b> Amount of Each Receipt this Period 85.00	
<b>C. ALDEAN BAER</b> Full Name (Last, First, Middle Initial) Mailing Address 3505 West Lincolnshire Blvd. City Toledo State OH Zip Code 43606 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4/WASHINGTON LS Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 290.12			Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.25601</b> Amount of Each Receipt this Period 19.24	
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			189.24	
<b>TOTAL</b> This Period (last page this line number only)..... ▶				

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

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

FOR LINE NUMBER: PAGE 26 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. ALDEAN BAER**

Mailing Address 3505 West Lincolnshire Blvd.

City State Zip Code  
 Toledo OH 43606

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 4/WASHINGTON LS

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 19 2013

Transaction ID : SA11AI.25600

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

**B. JOE BAESSLER**

Mailing Address 2512 NE 50th

City State Zip Code  
 Portland OR 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 ▼

560.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2013

Transaction ID : SA11AI.25778

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**C. DAWN M. BAILEY**

Mailing Address 4060 LaPlante Road

City State Zip Code  
 Monclova OH 43542

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 01 2013

Transaction ID : SA11AI.25241

Amount of Each Receipt this Period

52.00

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

151.24

**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 27 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. KAREN S. BAILEY

Mailing Address 1277 Circle 182

City

Kitts Hill

State

OH

Zip Code

45645

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25603

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

B. KAREN S. BAILEY

Mailing Address 1277 Circle 182

City

Kitts Hill

State

OH

Zip Code

45645

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.36

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25602

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

C. 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 ▼

467.67

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2013

Transaction ID : SA11AI.24584

Amount of Each Receipt this Period

65.34

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

103.82

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 28 OF 516

(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 P E O P L E

Full Name (Last, First, Middle Initial)

**A. KAREN BAKER**

Mailing Address 8335 Banbury Street

City	State	Zip Code
Cincinnati	OH	45216

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

ODJFS EXTERNAL AUDITOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2013

Transaction ID : SA11AI.25318

Amount of Each Receipt this Period

17.00

Full Name (Last, First, Middle Initial)

**B. KAREN BAKER**

Mailing Address 8335 Banbury Street

City	State	Zip Code
Cincinnati	OH	45216

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

ODJFS EXTERNAL AUDITOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2013

Transaction ID : SA11AI.25317

Amount of Each Receipt this Period

17.00

Full Name (Last, First, Middle Initial)

**C. MARK T. BAKER**

Mailing Address 300 Hardman Avenue South

City	State	Zip Code
South St. Paul	MN	55075

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	08	/	2013

Transaction ID : SA11AI.24936

Amount of Each Receipt this Period

52.72

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

86.72

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 29 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. ANTHONY L. BAKKEN</b></p> <p>Mailing Address 500 E Parish Street</p> <p>City State Zip Code Prair Du Chien WI 53821</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WI CN 24/STATE OF WI STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 350.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 12 / 2013 <b>Transaction ID : SA11AI.26173</b></p> <p>Amount of Each Receipt this Period 25.00</p>		
<p>Full Name (Last, First, Middle Initial) <b>B. ANTHONY L. BAKKEN</b></p> <p>Mailing Address 500 E Parish Street</p> <p>City State Zip Code Prair Du Chien WI 53821</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WI CN 24/STATE OF WI STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 375.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2013 <b>Transaction ID : SA11AI.26174</b></p> <p>Amount of Each Receipt this Period 25.00</p>		
<p>Full Name (Last, First, Middle Initial) <b>C. MATTHEW BALAS</b></p> <p>Mailing Address 307 Adams Street</p> <p>City State Zip Code Freeland PA 18224</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 332.22</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013 <b>Transaction ID : SA11AI.25805</b></p> <p>Amount of Each Receipt this Period 47.46</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>97.46</p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					

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

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. GRACE A. BALTICH**

Mailing Address 11711 DOUGLAS DRIVE N

City  
CHAMPLIN

State Zip Code  
MN 55316

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 65

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.30

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2013

Transaction ID : SA11AI.25113

Amount of Each Receipt this Period

48.86

Full Name (Last, First, Middle Initial)

**B. MATTHEW M. BANAL**

Mailing Address 5424 Olde Vintage Drive

City  
Hilliard

State Zip Code  
OH 43026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

417.04

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25605

Amount of Each Receipt this Period

38.47

Full Name (Last, First, Middle Initial)

**C. MATTHEW M. BANAL**

Mailing Address 5424 Olde Vintage Drive

City  
Hilliard

State Zip Code  
OH 43026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.51

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25604

Amount of Each Receipt this Period

38.47

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

125.80

**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 31 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. GINA M. BANKS**

Mailing Address 1911 Overlook Ridge Drive

City State Zip Code  
 Columbus OH 43219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

CUSTOMER SERVICE REP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

07 / 12 / 2013

Transaction ID : SA11AI.25320

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. GINA M. BANKS**

Mailing Address 1911 Overlook Ridge Drive

City State Zip Code  
 Columbus OH 43219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

CUSTOMER SERVICE REP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

07 / 26 / 2013

Transaction ID : SA11AI.25319

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. ELAINE BARBER**

Mailing Address 1826 Forster Street

City State Zip Code  
 Harrisburg PA 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 ▼

323.61

Date of Receipt

07 / 22 / 2013

Transaction ID : SA11AI.25806

Amount of Each Receipt this Period

47.46

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

77.46

**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 32 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. RONALDE BARILLAS</b></p> <p>Mailing Address 190 W. Ostend Street  Suite 101</p> <p>City State Zip Code  Baltimore MD 21230</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME MD CN 982 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  665.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 01 / 2013</p> <p><b>Transaction ID : SA11AI.24798</b></p> <p>Amount of Each Receipt this Period  95.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. TERRI L. BARNARD</b></p> <p>Mailing Address 1212 Jefferson St., SE  Suite 300</p> <p>City State Zip Code  Olympia WA 98501</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  273.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 10 / 2013</p> <p><b>Transaction ID : SA11AI.25978</b></p> <p>Amount of Each Receipt this Period  21.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. TERRI L. BARNARD</b></p> <p>Mailing Address 1212 Jefferson St., SE  Suite 300</p> <p>City State Zip Code  Olympia WA 98501</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  294.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 25 / 2013</p> <p><b>Transaction ID : SA11AI.25979</b></p> <p>Amount of Each Receipt this Period  21.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>137.00</p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		



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

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

FOR LINE NUMBER: PAGE 33 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. KAREN BARNES

Mailing Address 122 Forest Ridge Place

City State Zip Code  
 Columbus OH 43235

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ACCOUNT CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 02 / 2013

Transaction ID : SA11AI.25607

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

B. KAREN BARNES

Mailing Address 122 Forest Ridge Place

City State Zip Code  
 Columbus OH 43235

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ACCOUNT CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 19 / 2013

Transaction ID : SA11AI.25606

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. MICHAEL BARRIOS

Mailing Address 514 Shatto Place

City State Zip Code  
 Los Angeles CA 90020

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME CA CN 36/LOCAL 685

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  
 07 / 16 / 2013

Transaction ID : SA11AI.24461

Amount of Each Receipt this Period

40.00

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

60.00

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 34 OF 516

<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**

<b>A. RANDY D BARTON</b> Full Name (Last, First, Middle Initial) Mailing Address 825 SE Cortina Drive City Ankeny State IA Zip Code 50021 FEC ID number of contributing federal political committee. C Name of Employer AFSCME IA CN 61/STATE OF IA Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.74			Date of Receipt M M / D D / Y Y Y Y Y 07 / 12 / 2013 <b>Transaction ID : SA11AI.24651</b> Amount of Each Receipt this Period 10.41
<b>B. RANDY D BARTON</b> Full Name (Last, First, Middle Initial) Mailing Address 825 SE Cortina Drive City Ankeny State IA Zip Code 50021 FEC ID number of contributing federal political committee. C Name of Employer AFSCME IA CN 61/STATE OF IA Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 285.74			Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013 <b>Transaction ID : SA11AI.24650</b> Amount of Each Receipt this Period 20.00
<b>C. RANDY D BARTON</b> Full Name (Last, First, Middle Initial) Mailing Address 825 SE Cortina Drive City Ankeny State IA Zip Code 50021 FEC ID number of contributing federal political committee. C Name of Employer AFSCME IA CN 61/STATE OF IA Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 296.15			Date of Receipt M M / D D / Y Y Y Y Y 07 / 23 / 2013 <b>Transaction ID : SA11AI.24652</b> Amount of Each Receipt this Period 10.41
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			40.82
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 35 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. NANCY E. BARTTER</b></p> <p>Mailing Address 888 Mililani Street  Suite 601</p> <p>City Honolulu State HI Zip Code 96813-2991</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  242.34</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 10 / 2013</p> <p><b>Transaction ID : SA11AI.24596</b></p> <p>Amount of Each Receipt this Period  34.62</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. FATIMA A BASTIANELLI</b></p> <p>Mailing Address 5604 Vernon Place</p> <p>City Bethesda State MD Zip Code 20817</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation POLITICAL ACTION POLLING ASSISTANT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  521.17</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013</p> <p><b>Transaction ID : SA11AI.24057</b></p> <p>Amount of Each Receipt this Period  40.09</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. FATIMA A BASTIANELLI</b></p> <p>Mailing Address 5604 Vernon Place</p> <p>City Bethesda State MD Zip Code 20817</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation POLITICAL ACTION POLLING ASSISTANT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  561.26</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013</p> <p><b>Transaction ID : SA11AI.24058</b></p> <p>Amount of Each Receipt this Period  40.09</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		114.80
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

X	11a		11b		11c		12		
	13		14		15		16		17

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

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

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

FOR LINE NUMBER: PAGE 37 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. **PATRICIA BAUER**

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 ▼

687.26

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25807

Amount of Each Receipt this Period

98.18

Full Name (Last, First, Middle Initial)

B. **HENRY BAYER**

Mailing Address 1507 W. Chase Street

City State Zip Code  
Chicago IL 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 ▼

921.04

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24764

Amount of Each Receipt this Period

28.00

Full Name (Last, First, Middle Initial)

C. **MARY KATHLEE BECKMAN**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/STATE OF WA

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  
07 / 10 / 2013

Transaction ID : SA11AI.25981

Amount of Each Receipt this Period

25.00

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

151.18

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

FOR LINE NUMBER: PAGE 38 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<b>A. MARY KATHLEE BECKMAN</b> Full Name (Last, First, Middle Initial) Mailing Address 1212 Jefferson St., SE Suite 300 City Olympia State WA Zip Code 98501 FEC ID number of contributing federal political committee. C Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2013 <b>Transaction ID : SA11AI.25980</b> Amount of Each Receipt this Period 25.00
<b>B. NEIL G. BEDNARCZYK</b> Full Name (Last, First, Middle Initial) 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.25781</b> Amount of Each Receipt this Period 30.00
<b>C. MICHAEL BEGATTO</b> Full Name (Last, First, Middle Initial) Mailing Address 301 Hedgerow Lane City Wilmington State DE Zip Code 19807 FEC ID number of contributing federal political committee. C Name of Employer AFSCME DE CN 81 Occupation EXECUTIVE DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 678.06		Date of Receipt M M / D D / Y Y Y Y Y 07 / 10 / 2013 <b>Transaction ID : SA11AI.24585</b> Amount of Each Receipt this Period 91.48
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		146.48
<b>TOTAL</b> 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

FOR LINE NUMBER: PAGE 39 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. MARTIN BEIL**

Mailing Address 10363 Hudson Road

City

Mazomanie

State

WI

Zip Code

53560-9773

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WI CN 24

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

501.72

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 09 / 2013

Transaction ID : SA11AI.26175

Amount of Each Receipt this Period

83.62

Full Name (Last, First, Middle Initial)

**B. NANCY L. BELCHER**

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25323

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. NANCY L. BELCHER**

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 ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2013

Transaction ID : SA11AI.25322

Amount of Each Receipt this Period

40.00

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

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

163.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 40 OF 516  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. 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  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

736.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	22	/	2013

Transaction ID : SA11AI.25808

Amount of Each Receipt this Period

147.27

Full Name (Last, First, Middle Initial)

**B. 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  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

303.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	08	/	2013

Transaction ID : SA11AI.24061

Amount of Each Receipt this Period

43.30

Full Name (Last, First, Middle Initial)

**C. SYLVIA L BENNETT**

Mailing Address 182 AUTUMN WAY

City

ELIZABETHTOWN

State

KY

Zip Code

42701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME KY CN 62

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2013

Transaction ID : SA11AI.24778

Amount of Each Receipt this Period

16.00

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

206.57

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 41 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. SYLVIA L BENNETT</b></p> <p>Mailing Address 182 AUTUMN WAY</p> <p>City State Zip Code  ELIZABETHTOWN KY 42701</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME KY CN 62 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  224.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 17 / 2013</p> <p><b>Transaction ID : SA11AI.24779</b></p> <p>Amount of Each Receipt this Period  16.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. SYLVIA L BENNETT</b></p> <p>Mailing Address 182 AUTUMN WAY</p> <p>City State Zip Code  ELIZABETHTOWN KY 42701</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME KY CN 62 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  240.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013</p> <p><b>Transaction ID : SA11AI.24777</b></p> <p>Amount of Each Receipt this Period  16.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. STACEY D. BENSON-TAYLOR</b></p> <p>Mailing Address 241 Brooklyn Avenue</p> <p>City State Zip Code  Dayton OH 45417</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME OH CN 8 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  439.60</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 01 / 2013</p> <p><b>Transaction ID : SA11AI.25247</b></p> <p>Amount of Each Receipt this Period  63.02</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>95.02</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER: PAGE 42 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial) <b>A. BRENDA L BENTON</b> Mailing Address 4406 E. Mound Street City State Zip Code Columbus OH 43227 FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span> Name of Employer Occupation AFSCME INT'L FIELD OFFICE ASSISTANT II Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">336.83</span>			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>07 / 15 / 2013</span> </div> <b>Transaction ID : SA11AI.24062</b> Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>25.91</span> </div>	
Full Name (Last, First, Middle Initial) <b>B. BRENDA L BENTON</b> Mailing Address 4406 E. Mound Street City State Zip Code Columbus OH 43227 FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span> Name of Employer Occupation AFSCME INT'L FIELD OFFICE ASSISTANT II Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">362.74</span>			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>07 / 31 / 2013</span> </div> <b>Transaction ID : SA11AI.24063</b> Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>25.91</span> </div>	
Full Name (Last, First, Middle Initial) <b>C. STEVEN BERGER</b> Mailing Address 190 W. Ostend Street Suite 101 City State Zip Code Baltimore MD 21230 FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span> Name of Employer Occupation AFSCME MD CN 982 STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">373.38</span>			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>07 / 01 / 2013</span> </div> <b>Transaction ID : SA11AI.24799</b> Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>53.34</span> </div>	
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>105.16</span> </div>	
<b>TOTAL</b> This Period (last page this line number only)..... ▶			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span></span> </div>	

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	13		14		15		16		17

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

[illegible]

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 44 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. CHRISTINE C. BISCHOFF</b></p> <p>Mailing Address 1825 Maple Avenue</p> <p>City Peekskill State NY Zip Code 10566</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME NY LOC 1000/NYS INST. Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  288.60</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 11 / 2013  <b>Transaction ID : SA11AI.25203</b></p> <p>Amount of Each Receipt this Period  19.24</p>		
<p>Full Name (Last, First, Middle Initial)  <b>B. CHRISTINE C. BISCHOFF</b></p> <p>Mailing Address 1825 Maple Avenue</p> <p>City Peekskill State NY Zip Code 10566</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME NY LOC 1000/NYS INST. Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  307.84</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 25 / 2013  <b>Transaction ID : SA11AI.25204</b></p> <p>Amount of Each Receipt this Period  19.24</p>		
<p>Full Name (Last, First, Middle Initial)  <b>C. PAUL BISSEN</b></p> <p>Mailing Address 1906 Bear Court SE</p> <p>City Rochester State MN Zip Code 55904</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  340.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 05 / 2013  <b>Transaction ID : SA11AI.24939</b></p> <p>Amount of Each Receipt this Period  60.00</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			98.48		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					

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

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

FOR LINE NUMBER: PAGE 45 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. PAUL BISSEN</b></p> <p>Mailing Address 1906 Bear Court SE</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Rochester</td> <td style="width: 33%;">State MN</td> <td style="width: 33%;">Zip Code 55904</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME MN CN 5/STATE OF MN</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">400.00</span></p>			City Rochester	State MN	Zip Code 55904	Name of Employer AFSCME MN CN 5/STATE OF MN	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 31 / 2013</span>  <b>Transaction ID : SA11AI.24938</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">60.00</span></p>	
City Rochester	State MN	Zip Code 55904							
Name of Employer AFSCME MN CN 5/STATE OF MN	Occupation STAFF REPRESENTATIVE								
<p>Full Name (Last, First, Middle Initial)  <b>B. JOSEPH BLAIR</b></p> <p>Mailing Address 2199 11TH AVE</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City EDGAR</td> <td style="width: 33%;">State WI</td> <td style="width: 33%;">Zip Code 54426</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME WI CN 40</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">252.00</span></p>			City EDGAR	State WI	Zip Code 54426	Name of Employer AFSCME WI CN 40	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 29 / 2013</span>  <b>Transaction ID : SA11AI.26207</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">105.00</span></p>	
City EDGAR	State WI	Zip Code 54426							
Name of Employer AFSCME WI CN 40	Occupation STAFF REPRESENTATIVE								
<p>Full Name (Last, First, Middle Initial)  <b>C. KENNETH J. BLAIR</b></p> <p>Mailing Address 15715 62nd Avenue E.</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Puyallup</td> <td style="width: 33%;">State WA</td> <td style="width: 33%;">Zip Code 98375</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME WA CN 28/STATE OF WA</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">203.00</span></p>			City Puyallup	State WA	Zip Code 98375	Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 25 / 2013</span>  <b>Transaction ID : SA11AI.25985</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">14.50</span></p>	
City Puyallup	State WA	Zip Code 98375							
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE								
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">179.50</span>						
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;"></span>						

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

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

FOR LINE NUMBER: PAGE 46 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. MICHAEL BLAIR**

Mailing Address 8 Beacon Street

City State Zip Code  
Boston MA 02108-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MA CN 93

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.54

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.24780

Amount of Each Receipt this Period

39.22

Full Name (Last, First, Middle Initial)

## **B. WALTER BLAIR**

Mailing Address 2223 Wintergreen Avenue

City State Zip Code  
District Heights MD 20747

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, ACCOUNTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.86

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24064

Amount of Each Receipt this Period

46.22

Full Name (Last, First, Middle Initial)

## **C. WALTER BLAIR**

Mailing Address 2223 Wintergreen Avenue

City State Zip Code  
District Heights MD 20747

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, ACCOUNTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

647.08

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24065

Amount of Each Receipt this Period

46.22

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

131.66

**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 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. KORY BLAKE

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 ▼

391.65

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 09 / 2013

Transaction ID : SA11AI.24833

Amount of Each Receipt this Period

52.22

Full Name (Last, First, Middle Initial)

B. JANE ANN BLAKESLEY

Mailing Address 2179 Shoreham Road

City State Zip Code  
Upper Arlington OH 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 ▼

549.50

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25609

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. JANE ANN BLAKESLEY

Mailing Address 2179 Shoreham Road

City State Zip Code  
Upper Arlington OH 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 ▼

589.50

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25610

Amount of Each Receipt this Period

40.00

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

132.22

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 48 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. RONALD F. BLATT</b></p> <p>Mailing Address 2202 S. Racoon Road Apt. 4</p> <p>City Austintown State OH Zip Code 44515</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 307.81</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013</p> <p>Transaction ID : SA11AI.25612</p> <p>Amount of Each Receipt this Period 38.47</p>
<p>Full Name (Last, First, Middle Initial) <b>B. RONALD F. BLATT</b></p> <p>Mailing Address 2202 S. Racoon Road Apt. 4</p> <p>City Austintown State OH Zip Code 44515</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 346.28</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 19 / 2013</p> <p>Transaction ID : SA11AI.25611</p> <p>Amount of Each Receipt this Period 38.47</p>
<p>Full Name (Last, First, Middle Initial) <b>C. LANETTE R. BLOEM</b></p> <p>Mailing Address 164 Hilltop Drive</p> <p>City West Branch State IA Zip Code 52538</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME IA CN 61/DOCS Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 269.36</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 03 / 2013</p> <p>Transaction ID : SA11AI.24656</p> <p>Amount of Each Receipt this Period 19.24</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>96.18</p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 49 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. KAREN BLOOMINGDALE**

Mailing Address 4301 Executive Park Drive

City  
Harrisburg

State Zip Code  
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 ▼

500.78

Date of Receipt

MM / DD / YYYY  
07 / 22 / 2013

Transaction ID : SA11AI.25810

Amount of Each Receipt this Period

71.54

Full Name (Last, First, Middle Initial)

**B. DAVID L. BLYTH**

Mailing Address 1656 Gilbert Road

City  
Toledo

State Zip Code  
OH 43614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.36

Date of Receipt

MM / DD / YYYY  
07 / 01 / 2013

Transaction ID : SA11AI.25249

Amount of Each Receipt this Period

57.60

Full Name (Last, First, Middle Initial)

**C. THOMAS J. BOIK**

Mailing Address 300 Hardman Avenue South

City  
South St. Paul

State Zip Code  
MN 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 ▼

302.40

Date of Receipt

MM / DD / YYYY  
07 / 08 / 2013

Transaction ID : SA11AI.24940

Amount of Each Receipt this Period

43.32

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

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

172.46

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

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

FOR LINE NUMBER: PAGE 50 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. KAHIM BOLES**

Mailing Address 1003 S Frazier Street

City State Zip Code  
Philadelphia PA 19143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME PA CN 47/LOCAL 2187

Occupation  
EXECUTIVE BOARD MEMBER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.25951

Amount of Each Receipt this Period

14.00

Full Name (Last, First, Middle Initial)

## **B. LYNDAL BOLIN**

Mailing Address 8 Circle Drive

City State Zip Code  
The Plains OH 45780

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

Occupation  
FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.12

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25616

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

## **C. LYNDAL BOLIN**

Mailing Address 8 Circle Drive

City State Zip Code  
The Plains OH 45780

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

Occupation  
FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.36

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25615

Amount of Each Receipt this Period

19.24

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

52.48

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 51 OF 516

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. CATHERINE J. BOND**

Mailing Address 48048 Sarahsville Road

City

Caldwell

State

OH

Zip Code

43724

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

LIBRARY ASSISTANT II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7					2	0	1	3		

**Transaction ID : SA11AI.25334**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. CATHERINE J. BOND**

Mailing Address 48048 Sarahsville Road

City

Caldwell

State

OH

Zip Code

43724

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

LIBRARY ASSISTANT II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7					2	0	1	3		

**Transaction ID : SA11AI.25333**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. SHAKEEM V. BOONE**

Mailing Address 5204 4th Street NW

City

Washington

State

DC

Zip Code

20011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

STAFF SPECIALIST I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7					2	0	1	3		

**Transaction ID : SA11AI.24067**

Amount of Each Receipt this Period

15.00

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

45.00

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

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

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

FOR LINE NUMBER: PAGE 52 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. 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  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2498.08

Date of Receipt

07 / 15 / 2013

Transaction ID : SA11AI.24068

Amount of Each Receipt this Period

192.16

Full Name (Last, First, Middle Initial)

**B. 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  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2523.08

Date of Receipt

07 / 15 / 2013

Transaction ID : SA11AI.24070

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. 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  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2715.24

Date of Receipt

07 / 31 / 2013

Transaction ID : SA11AI.24069

Amount of Each Receipt this Period

192.16

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

409.32

**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 53 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. BENJAMIN BORGES-HERNANDEZ**
 Mailing Address Paseo De Palma Real  
 Buzon 185

City Juncos State PR Zip Code 00777-0000

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 ▼

520.26

Date of Receipt

 M M / D D / Y Y Y Y Y  
 07 / 15 / 2013

Transaction ID : SA11AI.24071

Amount of Each Receipt this Period

40.02

Full Name (Last, First, Middle Initial)

**B. BENJAMIN BORGES-HERNANDEZ**
 Mailing Address Paseo De Palma Real  
 Buzon 185

City Juncos State PR Zip Code 00777-0000

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 ▼

560.28

Date of Receipt

 M M / D D / Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.24072

Amount of Each Receipt this Period

40.02

Full Name (Last, First, Middle Initial)

**C. SHARON K BORTON**

Mailing Address 5359 29th Street NW

City Washington State DC Zip Code 20015

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSIST. DIRECTOR, HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

669.50

Date of Receipt

 M M / D D / Y Y Y Y Y  
 07 / 15 / 2013

Transaction ID : SA11AI.24073

Amount of Each Receipt this Period

51.50

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

131.54

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 PageFOR LINE NUMBER: PAGE 54 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. SHARON K BORTON**

Mailing Address 5359 29th Street NW

City  
WashingtonState  
DCZip Code  
20015FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSIST. DIRECTOR, HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

721.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	3

Transaction ID : SA11AI.24074

Amount of Each Receipt this Period

51.50

Full Name (Last, First, Middle Initial)

**B. CAROL BOTTIGLIER**

Mailing Address 4301 Executive Park Drive

City  
HarrisburgState  
PAZip Code  
17111FEC 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 ▼

340.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	3

Transaction ID : SA11AI.25811

Amount of Each Receipt this Period

48.66

Full Name (Last, First, Middle Initial)

**C. CAROL BOWSHIER**

Mailing Address 159 East Main Street

City  
Mt. SterlingState  
OHZip Code  
43143FEC 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 ▼

583.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	3

Transaction ID : SA11AI.25335

Amount of Each Receipt this Period

77.82

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

177.98

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 PageFOR LINE NUMBER: PAGE 55 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. CAROL BOWSHIER**

Mailing Address 159 East Main Street

City	State	Zip Code
Mt. Sterling	OH	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 ▼

661.47

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	30	/	2013

Transaction ID : SA11AI.25337

Amount of Each Receipt this Period

77.82

Full Name (Last, First, Middle Initial)

**B. ERIC R. BOYD**

Mailing Address 118 East Walnut Street

City	State	Zip Code
Westerville	OH	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 ▼

427.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2013

Transaction ID : SA11AI.25250

Amount of Each Receipt this Period

61.52

Full Name (Last, First, Middle Initial)

**C. MELVIN BRABSON**

Mailing Address 5510 Chalmers

City	State	Zip Code
Detroit	MI	48213

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.97

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2013

Transaction ID : SA11AI.24846

Amount of Each Receipt this Period

24.01

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

163.35

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

X	11a		11b		11c		12		
	13		14		15		16		17

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

FEC Schedule A (Form 3X) Rev. 02/2003



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

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

FOR LINE NUMBER: PAGE 57 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<b>A. CHRISTINE L. BRANAM</b> Full Name (Last, First, Middle Initial) Mailing Address 4031 EXECUTIVE PARK DR 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.62			Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013 <b>Transaction ID : SA11AI.25813</b> Amount of Each Receipt this Period 48.66
<b>B. TALISHIA R. BRANDAO</b> Full Name (Last, First, Middle Initial) Mailing Address 155 Market Street City Highspire State PA Zip Code 17034 FEC ID number of contributing federal political committee. C Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00			Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.25814</b> Amount of Each Receipt this Period 50.00
<b>C. NIKKI BRAYMAN</b> Full Name (Last, First, Middle Initial) Mailing Address 1212 Jefferson St., SE Suite 300 City Olympia State WA Zip Code 98501 FEC ID number of contributing federal political committee. C Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2013 <b>Transaction ID : SA11AI.25988</b> Amount of Each Receipt this Period 15.00
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			113.66
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 516

<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**

Full Name (Last, First, Middle Initial)

**A. ERIC B. BREAU**

Mailing Address 90 Glen Road

City

Cheshire

State

CT

Zip Code

06410-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME CT CN 4/STATE OF CT

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

235.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	3		2	0	1	3

Transaction ID : SA11AI.24549

Amount of Each Receipt this Period

16.80

Full Name (Last, First, Middle Initial)

**B. ERIC B. BREAU**

Mailing Address 90 Glen Road

City

Cheshire

State

CT

Zip Code

06410-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME CT CN 4/STATE OF CT

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7			1	5	2	0	1	3

Transaction ID : SA11AI.24550

Amount of Each Receipt this Period

16.80

Full Name (Last, First, Middle Initial)

**C. ERIC B. BREAU**

Mailing Address 90 Glen Road

City

Cheshire

State

CT

Zip Code

06410-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME CT CN 4/STATE OF CT

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

268.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7			3	0	2	0	1	3

Transaction ID : SA11AI.24551

Amount of Each Receipt this Period

16.80

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

50.40

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

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 516

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. JERRY M. BRENIZER**

Mailing Address N3267 Opal Road

City

Lake Geneva

State

WI

Zip Code

53147

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WI CN 24/STATE OF WI

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	1	3

Transaction ID : SA11AI.26176

Amount of Each Receipt this Period

18.00

Full Name (Last, First, Middle Initial)

**B. JERRY M. BRENIZER**

Mailing Address N3267 Opal Road

City

Lake Geneva

State

WI

Zip Code

53147

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WI CN 24/STATE OF WI

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	1	3

Transaction ID : SA11AI.26177

Amount of Each Receipt this Period

18.00

Full Name (Last, First, Middle Initial)

**C. WILLIAM BRENNER**

Mailing Address 3300 Old Trail Road

City

York Haven

State

PA

Zip Code

17370

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	3

Transaction ID : SA11AI.25815

Amount of Each Receipt this Period

114.68

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

150.68

**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 60 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. TERRY L. BRENTLINGER</b></p> <p>Mailing Address 145 N. Main Street</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Lakeview</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43331</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH LOC 11/STATE OF OH</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">260.00</span></p>			City Lakeview	State OH	Zip Code 43331	Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 12 / 2013</span>  <b>Transaction ID : SA11AI.25339</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">20.00</span></p>	
City Lakeview	State OH	Zip Code 43331							
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE								
<p>Full Name (Last, First, Middle Initial)  <b>B. TERRY L. BRENTLINGER</b></p> <p>Mailing Address 145 N. Main Street</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Lakeview</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43331</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH LOC 11/STATE OF OH</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">280.00</span></p>			City Lakeview	State OH	Zip Code 43331	Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 26 / 2013</span>  <b>Transaction ID : SA11AI.25338</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">20.00</span></p>	
City Lakeview	State OH	Zip Code 43331							
Name of Employer AFSCME OH LOC 11/STATE OF OH	Occupation STAFF REPRESENTATIVE								
<p>Full Name (Last, First, Middle Initial)  <b>C. BILL BROCKMILLER</b></p> <p>Mailing Address 1418 10th Street #204</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Lacrosse</td> <td style="width: 33%;">State WI</td> <td style="width: 33%;">Zip Code 54601</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME WI CN 24/STATE OF WI</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">420.00</span></p>			City Lacrosse	State WI	Zip Code 54601	Name of Employer AFSCME WI CN 24/STATE OF WI	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 12 / 2013</span>  <b>Transaction ID : SA11AI.26179</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">30.00</span></p>	
City Lacrosse	State WI	Zip Code 54601							
Name of Employer AFSCME WI CN 24/STATE OF WI	Occupation STAFF REPRESENTATIVE								
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p> <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p><span style="border: 1px solid black; padding: 2px;">70.00</span></p> <p><span style="border: 1px solid black; padding: 2px;"></span></p>						

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 61 OF 516

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. 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

AFSCME WI CN 24/STATE OF WI

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2013

Transaction ID : SA11AI.26178

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. MATTHEW BROKMAN**Mailing Address 120 Dwight Street  
#606

City	State	Zip Code
New Haven	CT	06511-0000

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 ▼

410.43

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	11	/	2013

Transaction ID : SA11AI.24552

Amount of Each Receipt this Period

56.10

Full Name (Last, First, Middle Initial)

**C. DEBORAH L. BROOKMAN**

Mailing Address 1517 5th Avenue SE

City	State	Zip Code
Olympia	WA	98501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

LABOR ADVOCATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	24	/	2013

Transaction ID : SA11AI.25991

Amount of Each Receipt this Period

30.00

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

116.10

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 62 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. VALERIE A. BROWN**

Mailing Address 2967 Fleet Road

City	State	Zip Code
Columbus	OH	43232

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2013

Transaction ID : SA11AI.25340

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. WANDA BROWN**

Mailing Address 17311 NW 46th Avenue

City	State	Zip Code
Carol City	FL	33055

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

LEAD ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.39

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

Transaction ID : SA11AI.24076

Amount of Each Receipt this Period

34.03

Full Name (Last, First, Middle Initial)

**C. WANDA BROWN**

Mailing Address 17311 NW 46th Avenue

City	State	Zip Code
Carol City	FL	33055

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

LEAD ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

Transaction ID : SA11AI.24077

Amount of Each Receipt this Period

34.03

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

83.06

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 63 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. WILLIAM H. BROWN</b></p> <p>Mailing Address 17431 SE Forest Hill Drive</p> <p>City State Zip Code          Damascus OR 97089</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME OR CN 75/STATE OF OR ENVIRONMENTAL SPECIALIST</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          210.00</p>		<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 31 / 2013  <b>Transaction ID : SA11AI.25784</b></p> <p>Amount of Each Receipt this Period          30.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. ALAN BRUBACHER</b></p> <p>Mailing Address 2502 S. 4th Street</p> <p>City State Zip Code          Steelton PA 17113</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME PA CN 13 MAINTENANCE SUPERVISOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          364.95</p>		<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 22 / 2013  <b>Transaction ID : SA11AI.25816</b></p> <p>Amount of Each Receipt this Period          72.99</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. EDITH E. BUCKLE</b></p> <p>Mailing Address 1184 Trentwood Road</p> <p>City State Zip Code          Columbus OH 43221</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME OH CN 8 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          388.90</p>		<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 01 / 2013  <b>Transaction ID : SA11AI.25251</b></p> <p>Amount of Each Receipt this Period          55.30</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		158.29
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 64 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. CARTER A BUNDY**

Mailing Address 1968 Otowi Drive

City

Santa Fe

State

NM

Zip Code

87505

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION REP. III

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

555.54

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24078

Amount of Each Receipt this Period

43.31

Full Name (Last, First, Middle Initial)

## **B. CARTER A BUNDY**

Mailing Address 1968 Otowi Drive

City

Santa Fe

State

NM

Zip Code

87505

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION REP. III

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

565.54

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 17 / 2013

Transaction ID : SA11AI.24079

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

## **C. CARTER A BUNDY**

Mailing Address 1968 Otowi Drive

City

Santa Fe

State

NM

Zip Code

87505

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION REP. III

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

608.85

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24080

Amount of Each Receipt this Period

43.31

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

96.62

**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 65 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. JUSTIN H. BURCHARD</b></p> <p>Mailing Address 1650 Harvard Street NW  Apt #714</p> <p>City Washington State DC Zip Code 20009</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation DATA &amp; TARGETING PROGRAM MANAGER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  496.09</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013</p> <p><b>Transaction ID : SA11AI.24081</b></p> <p>Amount of Each Receipt this Period  38.46</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. JUSTIN H. BURCHARD</b></p> <p>Mailing Address 1650 Harvard Street NW  Apt #714</p> <p>City Washington State DC Zip Code 20009</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation DATA &amp; TARGETING PROGRAM MANAGER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  534.55</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013</p> <p><b>Transaction ID : SA11AI.24082</b></p> <p>Amount of Each Receipt this Period  38.46</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. CAROL L. BURNETT</b></p> <p>Mailing Address 1921 N. Westmoreland Street</p> <p>City Arlington State VA Zip Code 22213</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation MANAGER, ART &amp; GRAPHIC DESIGN</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  635.92</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013</p> <p><b>Transaction ID : SA11AI.24083</b></p> <p>Amount of Each Receipt this Period  52.91</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>129.83</p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER: PAGE 66 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. CAROL L. BURNETT**

Mailing Address 1921 N. Westmoreland Street

City State Zip Code  
Arlington VA 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 ▼

688.83

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24084

Amount of Each Receipt this Period

52.91

Full Name (Last, First, Middle Initial)

**B. DOUGLAS R. BURNETT**

Mailing Address 2051 McKenna Blvd.

City State Zip Code  
Madison WI 53711

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION COORDINATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

687.83

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24085

Amount of Each Receipt this Period

52.91

Full Name (Last, First, Middle Initial)

**C. DOUGLAS R. BURNETT**

Mailing Address 2051 McKenna Blvd.

City State Zip Code  
Madison WI 53711

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION COORDINATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.83

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2013

Transaction ID : SA11AI.24087

Amount of Each Receipt this Period

25.00

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

130.82

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

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

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

FOR LINE NUMBER: PAGE 67 OF 516  
(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**

<p>Full Name (Last, First, Middle Initial)  <b>A. DOUGLAS R. BURNETT</b></p> <p>Mailing Address 2051 McKenna Blvd.</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Madison</td> <td style="width: 33%;">State WI</td> <td style="width: 33%;">Zip Code 53711</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME INT'L</td> <td style="width: 66%;">Occupation POLITICAL ACTION COORDINATOR</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">765.74</span></p>			City Madison	State WI	Zip Code 53711	Name of Employer AFSCME INT'L	Occupation POLITICAL ACTION COORDINATOR	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 31 / 2013</span>  <b>Transaction ID : SA11AI.24086</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">52.91</span></p>
City Madison	State WI	Zip Code 53711						
Name of Employer AFSCME INT'L	Occupation POLITICAL ACTION COORDINATOR							
<p>Full Name (Last, First, Middle Initial)  <b>B. MARY T. BURPEE</b></p> <p>Mailing Address 609 W. Walworth Street</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Elkhorn</td> <td style="width: 33%;">State WI</td> <td style="width: 33%;">Zip Code 53121</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME WI CN 40</td> <td style="width: 66%;">Occupation ORGANIZER</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">210.00</span></p>			City Elkhorn	State WI	Zip Code 53121	Name of Employer AFSCME WI CN 40	Occupation ORGANIZER	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 02 / 2013</span>  <b>Transaction ID : SA11AI.26211</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">30.00</span></p>
City Elkhorn	State WI	Zip Code 53121						
Name of Employer AFSCME WI CN 40	Occupation ORGANIZER							
<p>Full Name (Last, First, Middle Initial)  <b>C. MARY T. BURPEE</b></p> <p>Mailing Address 609 W. Walworth Street</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Elkhorn</td> <td style="width: 33%;">State WI</td> <td style="width: 33%;">Zip Code 53121</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME WI CN 40</td> <td style="width: 66%;">Occupation ORGANIZER</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">240.00</span></p>			City Elkhorn	State WI	Zip Code 53121	Name of Employer AFSCME WI CN 40	Occupation ORGANIZER	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 30 / 2013</span>  <b>Transaction ID : SA11AI.26212</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">30.00</span></p>
City Elkhorn	State WI	Zip Code 53121						
Name of Employer AFSCME WI CN 40	Occupation ORGANIZER							
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><span style="border: 1px solid black; padding: 2px;">112.91</span></p>					
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p><span style="border: 1px solid black; padding: 2px;"></span></p>					

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 68 OF 516

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. KATHY A. BUTLER**Mailing Address 308 W 5th  
Box 78

City	State	Zip Code
Woodward	IA	50276

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2013

Transaction ID : SA11AI.24662

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. KATHY A. BUTLER**Mailing Address 308 W 5th  
Box 78

City	State	Zip Code
Woodward	IA	50276

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	23	/	2013

Transaction ID : SA11AI.24661

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. MATT BUTLER**

Mailing Address 4320 NW Second Avenue

City	State	Zip Code
Des Moines	IA	50313

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	08	/	2013

Transaction ID : SA11AI.24663

Amount of Each Receipt this Period

30.00

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

70.00

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

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

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

FOR LINE NUMBER: PAGE 69 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. NICOLE BUTLER**

Mailing Address 3011 29th Avenue NW

City Olympia State WA Zip Code 98502

FEC ID number of contributing federal political committee.

C

Name of Employer  
AFSCME WA CN 28/STATE OF WA

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

07 / 10 / 2013

Transaction ID : SA11AI.25993

Amount of Each Receipt this Period

22.00

Full Name (Last, First, Middle Initial)

## **B. NICOLE BUTLER**

Mailing Address 3011 29th Avenue NW

City Olympia State WA Zip Code 98502

FEC ID number of contributing federal political committee.

C

Name of Employer  
AFSCME WA CN 28/STATE OF WA

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

07 / 25 / 2013

Transaction ID : SA11AI.25994

Amount of Each Receipt this Period

22.00

Full Name (Last, First, Middle Initial)

## **C. JOY CAGE**

Mailing Address 9022 East E Street

City Parkland State WA Zip Code 98445-2259

FEC ID number of contributing federal political committee.

C

Name of Employer  
AFSCME WA CN 28/STATE OF WA

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.50

Date of Receipt

07 / 10 / 2013

Transaction ID : SA11AI.25996

Amount of Each Receipt this Period

19.50

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

63.50

**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 70 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. JOY CAGE**

Mailing Address 9022 East E Street

City State Zip Code  
Parkland WA 98445-2259

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WA CN 28/STATE OF WA

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 25 / 2013

Transaction ID : SA11AI.25995

Amount of Each Receipt this Period

19.50

Full Name (Last, First, Middle Initial)

## **B. PAULA J. CAIRA**

Mailing Address 17 Fourteenth Street SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation  
ASSOCIATE GENERAL COUNSEL II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

792.61

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24088

Amount of Each Receipt this Period

60.97

Full Name (Last, First, Middle Initial)

## **C. PAULA J. CAIRA**

Mailing Address 17 Fourteenth Street SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation  
ASSOCIATE GENERAL COUNSEL II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

853.58

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24089

Amount of Each Receipt this Period

60.97

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

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

141.44

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

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

FOR LINE NUMBER: PAGE 71 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. NINA M. CALABRIA</b></p> <p>Mailing Address 6124 Crystal Valley Drive</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Galena</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43021</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH LOC 4</td> <td style="width: 66%;">Occupation ADMINISTRATIVE ASSISTANT</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">365.00</span> </p>			City Galena	State OH	Zip Code 43021	Name of Employer AFSCME OH LOC 4	Occupation ADMINISTRATIVE ASSISTANT	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">2013</span> </p> <p><b>Transaction ID : SA11AI.25618</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">25.00</span> </p>	
City Galena	State OH	Zip Code 43021							
Name of Employer AFSCME OH LOC 4	Occupation ADMINISTRATIVE ASSISTANT								
<p>Full Name (Last, First, Middle Initial) <b>B. NINA M. CALABRIA</b></p> <p>Mailing Address 6124 Crystal Valley Drive</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Galena</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43021</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH LOC 4</td> <td style="width: 66%;">Occupation ADMINISTRATIVE ASSISTANT</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">390.00</span> </p>			City Galena	State OH	Zip Code 43021	Name of Employer AFSCME OH LOC 4	Occupation ADMINISTRATIVE ASSISTANT	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">19</span> / <span style="border: 1px solid black; padding: 2px;">2013</span> </p> <p><b>Transaction ID : SA11AI.25617</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">25.00</span> </p>	
City Galena	State OH	Zip Code 43021							
Name of Employer AFSCME OH LOC 4	Occupation ADMINISTRATIVE ASSISTANT								
<p>Full Name (Last, First, Middle Initial) <b>C. ROBIN CALABRIA</b></p> <p>Mailing Address 2507 Winslow Hill Road</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Benezette</td> <td style="width: 33%;">State PA</td> <td style="width: 33%;">Zip Code 15821</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME PA CN 13</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">239.40</span> </p>			City Benezette	State PA	Zip Code 15821	Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">22</span> / <span style="border: 1px solid black; padding: 2px;">2013</span> </p> <p><b>Transaction ID : SA11AI.25817</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">34.20</span> </p>	
City Benezette	State PA	Zip Code 15821							
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE								
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">84.20</span>						
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;"></span>						

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 72 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. CHAD D. CALDWELL**

Mailing Address 1468 Galway Bend Drive S.

City	State	Zip Code
Pataskala	OH	43062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	02	/	2013

Transaction ID : SA11AI.25620

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**B. CHAD D. CALDWELL**

Mailing Address 1468 Galway Bend Drive S.

City	State	Zip Code
Pataskala	OH	43062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	19	/	2013

Transaction ID : SA11AI.25619

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**C. PAMELA D. CALDWELL**

Mailing Address 1861 Bairsford Drive

City	State	Zip Code
Columbus	OH	43232

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

CUSTOMER SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	12	/	2013

Transaction ID : SA11AI.25349

Amount of Each Receipt this Period

16.00

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

86.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 73 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. PAMELA D. CALDWELL</b></p> <p>Mailing Address 1861 Bairsford Drive</p> <p>City State Zip Code Columbus OH 43232</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH CUSTOMER SERVICES</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 235.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2013 <b>Transaction ID : SA11AI.25348</b></p> <p>Amount of Each Receipt this Period 16.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. ROBERT CALVIN</b></p> <p>Mailing Address 45 Church Road</p> <p>City State Zip Code Mercer PA 16137-5911</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 548.70</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013 <b>Transaction ID : SA11AI.25818</b></p> <p>Amount of Each Receipt this Period 109.74</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. SUSAN CAMERON</b></p> <p>Mailing Address P.O. Box 32</p> <p>City State Zip Code Manistique MI 49854</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME MI CN 25 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 273.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.24852</b></p> <p>Amount of Each Receipt this Period 21.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>146.74</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p></p>	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 74 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. SUSAN CAMERON**

Mailing Address P.O. Box 32

City

Manistique

State

MI

Zip Code

49854

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

07 / 16 / 2013

Transaction ID : SA11AI.24851

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

273.00

Date of Receipt

07 / 02 / 2013

Transaction ID : SA11AI.24854

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

**C. 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 ▼

294.00

Date of Receipt

07 / 16 / 2013

Transaction ID : SA11AI.24853

Amount of Each Receipt this Period

21.00

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

63.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 75 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. ULIQUE A. CAMPBELL</b></p> <p>Mailing Address 1633 Berkeley Road</p> <p>City State Zip Code Columbus OH 43207</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH UNEMPLOYMENT CLAIMS TECH</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 219.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2013 <b>Transaction ID : SA11AI.25350</b></p> <p>Amount of Each Receipt this Period 16.00</p>		
<p>Full Name (Last, First, Middle Initial) <b>B. ULIQUE A. CAMPBELL</b></p> <p>Mailing Address 1633 Berkeley Road</p> <p>City State Zip Code Columbus OH 43207</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH UNEMPLOYMENT CLAIMS TECH</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 235.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2013 <b>Transaction ID : SA11AI.25351</b></p> <p>Amount of Each Receipt this Period 16.00</p>		
<p>Full Name (Last, First, Middle Initial) <b>C. LINDA CANAN-STEPHENS</b></p> <p>Mailing Address 9013 Advantage Court</p> <p>City State Zip Code Burke VA 22003</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L EXEC. ASSISTANT TO SECRETARY TREAS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1801.28</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24090</b></p> <p>Amount of Each Receipt this Period 138.56</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>170.56</p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p></p>		

✗	11a		11b		11c		12		
	13		14		15		16		17

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

[illegible]

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

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

FOR LINE NUMBER: PAGE 77 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. 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 ▼

719.08

Date of Receipt

 M M / D D / Y Y Y Y Y  
 07 / 15 / 2013

Transaction ID : SA11AI.25820

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

892.60

Date of Receipt

 M M / D D / Y Y Y Y Y  
 07 / 22 / 2013

Transaction ID : SA11AI.25819

Amount of Each Receipt this Period

173.52

Full Name (Last, First, Middle Initial)

**C. GINO A. CARBENIA**

Mailing Address 9253 Barcroft Dr.

City

Indianapolis

State

IN

Zip Code

46240

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

International Union Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1669.85

Date of Receipt

 M M / D D / Y Y Y Y Y  
 07 / 15 / 2013

Transaction ID : SA11AI.24095

Amount of Each Receipt this Period

128.45

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

326.97

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 78 OF 516

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. GINO A. CARBENIA**

Mailing Address 9253 Barcroft Dr.

City

Indianapolis

State

IN

Zip Code

46240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

International Union Representative

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1769.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	16	/	2013

Transaction ID : SA11AI.24097

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. GINO A. CARBENIA**

Mailing Address 9253 Barcroft Dr.

City

Indianapolis

State

IN

Zip Code

46240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

International Union Representative

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1898.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

Transaction ID : SA11AI.24096

Amount of Each Receipt this Period

128.45

Full Name (Last, First, Middle Initial)

**C. DENISE L. CAREY**

Mailing Address 4069 Brookrun Drive

City

Columbus

State

OH

Zip Code

43204

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

OFFICE ASSISTANT III

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2013

Transaction ID : SA11AI.25356

Amount of Each Receipt this Period

16.00

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

244.45

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

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

FOR LINE NUMBER: PAGE 79 OF 516

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. DENISE L. CAREY**

Mailing Address 4069 Brookrun Drive

City	State	Zip Code
Columbus	OH	43204

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

OFFICE ASSISTANT III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		26		2013

Transaction ID : SA11AI.25355

Amount of Each Receipt this Period

16.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

529.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2013

Transaction ID : SA11AI.24950

Amount of Each Receipt this Period

76.20

Full Name (Last, First, Middle Initial)

**C. WILLIAM J. CARRIER**

Mailing Address 731 Mohican Drive

City	State	Zip Code
Loveland	OH	45140

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/LOVELAND CS

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2013

Transaction ID : SA11AI.25621

Amount of Each Receipt this Period

20.84

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

113.04

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 80 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. CHARLES B. CARRINGTON</b></p> <p>Mailing Address 4820 Greenway Avenue</p> <p>City Philadelphia State PA Zip Code 19143</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME PA CN 33/CITY OF PA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 340.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 11 / 2013  <b>Transaction ID : SA11AI.25939</b></p> <p>Amount of Each Receipt this Period  20.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. CHARLES B. CARRINGTON</b></p> <p>Mailing Address 4820 Greenway Avenue</p> <p>City Philadelphia State PA Zip Code 19143</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME PA CN 33/CITY OF PA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 360.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 25 / 2013  <b>Transaction ID : SA11AI.25940</b></p> <p>Amount of Each Receipt this Period  20.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. SEAN CARSON</b></p> <p>Mailing Address 238 N LIBERTY STREET</p> <p>City NAZARETH State PA Zip Code 18064</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 320.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 22 / 2013  <b>Transaction ID : SA11AI.25821</b></p> <p>Amount of Each Receipt this Period  40.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>80.00</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				



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

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

FOR LINE NUMBER: PAGE 81 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. LEROY CARTER</b></p> <p>Mailing Address 2648 Towner Road</p> <p>City State Zip Code Ann Arbor MI 48105</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME MI CN 25 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 378.56</p>			<p>Date of Receipt  <b>07 / 02 / 2013</b>  <b>Transaction ID : SA11AI.24857</b> </p> <p>Amount of Each Receipt this Period 29.12</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. LEROY CARTER</b></p> <p>Mailing Address 2648 Towner Road</p> <p>City State Zip Code Ann Arbor MI 48105</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME MI CN 25 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 407.68</p>			<p>Date of Receipt  <b>07 / 16 / 2013</b>  <b>Transaction ID : SA11AI.24858</b> </p> <p>Amount of Each Receipt this Period 29.12</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. ROBERT CASON</b></p> <p>Mailing Address 4301 Executive Park Drive</p> <p>City State Zip Code Harrisburg PA 17111</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 567.53</p>			<p>Date of Receipt  <b>07 / 22 / 2013</b>  <b>Transaction ID : SA11AI.25822</b> </p> <p>Amount of Each Receipt this Period 97.85</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			156.09	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 82 OF 516

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

NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. NORMA CASTRO**

Mailing Address 1212 Jefferson Street SE

City	State	Zip Code
Olympia	WA	98501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2013

Transaction ID : SA11AI.25998

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. NORMA CASTRO**

Mailing Address 1212 Jefferson Street SE

City	State	Zip Code
Olympia	WA	98501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2013

Transaction ID : SA11AI.25997

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. TARA CAUGHEY**

Mailing Address 114 Thompson Street

City	State	Zip Code
Dalton	PA	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 ▼

512.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	22	/	2013

Transaction ID : SA11AI.25823

Amount of Each Receipt this Period

73.16

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

113.16

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 83 OF 516

☒ 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**

Full Name (Last, First, Middle Initial)

**A. EDDIE A. CAUMIANT**

Mailing Address 120 S. Virginia Avenue

City

Belleville

State

IL

Zip Code

62220

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IL CN 31

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

526.96

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24766

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. MARK E CAVANAH**

Mailing Address 243 Iroquois Drive

City

Paducah

State

KY

Zip Code

42001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

LEAD ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

663.52

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24099

Amount of Each Receipt this Period

51.04

Full Name (Last, First, Middle Initial)

**C. MARK E CAVANAH**

Mailing Address 243 Iroquois Drive

City

Paducah

State

KY

Zip Code

42001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

LEAD ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

714.56

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24100

Amount of Each Receipt this Period

51.04

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

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

127.08

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 84 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. ANNE-MARIE CAVANAUGH</b></p> <p>Mailing Address 9227 Densmore Avenue N</p> <p>City State Zip Code          Seattle WA 98103</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME WA CN 28 COUNCIL REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          291.76</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 24 / 2013  <b>Transaction ID : SA11AI.26001</b></p> <p>Amount of Each Receipt this Period          41.68</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. JAMES CENERINI</b></p> <p>Mailing Address 1179 Charles Street</p> <p>City State Zip Code          North Providence RI 02904-3594</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME RI CN 94 POLITICAL COORDINATOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          340.00</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 16 / 2013  <b>Transaction ID : SA11AI.25954</b></p> <p>Amount of Each Receipt this Period          80.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. ERNESTINE CHAPMAN</b></p> <p>Mailing Address 146 Penn Avenue</p> <p>City State Zip Code          Mansfield OH 44903</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME OH LOC 11/STATE OF OH STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          210.00</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 26 / 2013  <b>Transaction ID : SA11AI.25358</b></p> <p>Amount of Each Receipt this Period          15.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			136.68	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER: PAGE 85 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. JEANETTE CHAVEZ</b></p> <p>Mailing Address 70 I Street SE  Apt. 617</p> <p>City Washington State DC Zip Code 20003</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer AFSCME INT'L Occupation EXECUTIVE OFFICE ASSISTANT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">767.39</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 15 / 2013</span>  <b>Transaction ID : SA11AI.24101</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">59.03</span></p>		
<p>Full Name (Last, First, Middle Initial)  <b>B. JEANETTE CHAVEZ</b></p> <p>Mailing Address 70 I Street SE  Apt. 617</p> <p>City Washington State DC Zip Code 20003</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer AFSCME INT'L Occupation EXECUTIVE OFFICE ASSISTANT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">792.39</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 23 / 2013</span>  <b>Transaction ID : SA11AI.24103</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">25.00</span></p>		
<p>Full Name (Last, First, Middle Initial)  <b>C. JEANETTE CHAVEZ</b></p> <p>Mailing Address 70 I Street SE  Apt. 617</p> <p>City Washington State DC Zip Code 20003</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer AFSCME INT'L Occupation EXECUTIVE OFFICE ASSISTANT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">851.42</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 31 / 2013</span>  <b>Transaction ID : SA11AI.24102</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">59.03</span></p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">143.06</span>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;"></span>		

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 86 OF 516

<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**

Full Name (Last, First, Middle Initial)

**A. KARL E. CHILDRESS**

Mailing Address 1605 E Street SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

MANAGER, APPLICATIONS DEVELOPMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

651.81

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	3

Transaction ID : SA11AI.24104

Amount of Each Receipt this Period

50.25

Full Name (Last, First, Middle Initial)

**B. KARL E. CHILDRESS**

Mailing Address 1605 E Street SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

MANAGER, APPLICATIONS DEVELOPMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

703.31

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	3

Transaction ID : SA11AI.24105

Amount of Each Receipt this Period

51.50

Full Name (Last, First, Middle Initial)

**C. NICHELLE CHIVIS**

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 ▼

512.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	3

Transaction ID : SA11AI.25824

Amount of Each Receipt this Period

73.16

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

174.91

**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 87 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. JUDY K CHOW</b></p> <p>Mailing Address 888 Mililani Street  Suite 601</p> <p>City Honolulu State HI Zip Code 96813-2991</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  700.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 10 / 2013</p> <p><b>Transaction ID : SA11AI.24597</b></p> <p>Amount of Each Receipt this Period  100.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. MICHAEL CLADWELL</b></p> <p>Mailing Address P.O. Box 628043</p> <p>City Middleton State WI Zip Code 53562</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  210.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 16 / 2013</p> <p><b>Transaction ID : SA11AI.26181</b></p> <p>Amount of Each Receipt this Period  15.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. MICHAEL CLADWELL</b></p> <p>Mailing Address P.O. Box 628043</p> <p>City Middleton State WI Zip Code 53562</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  225.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 29 / 2013</p> <p><b>Transaction ID : SA11AI.26182</b></p> <p>Amount of Each Receipt this Period  15.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>130.00</p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 88 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial) <b>A. CAROLYN CLARK</b>			Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.24860</b>		
Mailing Address 4415 Rolling Pine			Amount of Each Receipt this Period 25.00		
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00			
Full Name (Last, First, Middle Initial) <b>B. CAROLYN CLARK</b>			Date of Receipt M M / D D / Y Y Y Y Y 07 / 16 / 2013 <b>Transaction ID : SA11AI.24859</b>		
Mailing Address 4415 Rolling Pine			Amount of Each Receipt this Period 25.00		
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00			
Full Name (Last, First, Middle Initial) <b>C. CHARLES E. CLARK</b>			Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24106</b>		
Mailing Address 240 Alamosa Path SW			Amount of Each Receipt this Period 56.33		
City Atlanta	State GA	Zip Code 30349			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME INT'L		Occupation AREA FIELD SERVICES DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 732.02			
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			106.33		
<b>TOTAL</b> This Period (last page this line number only)..... ▶					



**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 89 OF 516

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. CHARLES E. CLARK**

Mailing Address 240 Alamosa Path SW

City	State	Zip Code
Atlanta	GA	30349

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

788.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

Transaction ID : SA11AI.24107

Amount of Each Receipt this Period

56.33

Full Name (Last, First, Middle Initial)

**B. DOROTHEA CLARK**

Mailing Address 360 Brotzman Road

City	State	Zip Code
Binghamton	NY	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 ▼

240.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	11	/	2013

Transaction ID : SA11AI.25206

Amount of Each Receipt this Period

16.05

Full Name (Last, First, Middle Initial)

**C. DOROTHEA CLARK**

Mailing Address 360 Brotzman Road

City	State	Zip Code
Binghamton	NY	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 ▼

256.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2013

Transaction ID : SA11AI.25205

Amount of Each Receipt this Period

16.05

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

88.43

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

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

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

FOR LINE NUMBER: PAGE 90 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. SHANE CLARK**

Mailing Address 5296 Autumnwood Drive

City State Zip Code  
Cochran PA 16314

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.48

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25825

Amount of Each Receipt this Period

47.46

Full Name (Last, First, Middle Initial)

## **B. RUSSELL J. CLEMENS**

Mailing Address 116 Cranburne Lane

City State Zip Code  
Willamsville NY 14221

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 ▼

611.94

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2013

Transaction ID : SA11AI.24800

Amount of Each Receipt this Period

87.42

Full Name (Last, First, Middle Initial)

## **C. DONALD L. CLINE**

Mailing Address 21 E Hope Place

City State Zip Code  
Shelton WA 98584

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2013

Transaction ID : SA11AI.26002

Amount of Each Receipt this Period

30.00

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

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

164.88

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

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

FOR LINE NUMBER: PAGE 91 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. DONALD L. CLINE</b></p> <p>Mailing Address 21 E Hope Place</p> <p>City State Zip Code Shelton WA 98584</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 420.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2013 <b>Transaction ID : SA11AI.26003</b></p> <p>Amount of Each Receipt this Period 30.00</p>		
<p>Full Name (Last, First, Middle Initial) <b>B. BRETT L. CLUBBE</b></p> <p>Mailing Address 4135 Cooper Point Road NW</p> <p>City State Zip Code Olympia WA 98502</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WA CN 28/WA STATE UNIV EDUCATOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 221.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.26004</b></p> <p>Amount of Each Receipt this Period 17.00</p>		
<p>Full Name (Last, First, Middle Initial) <b>C. BRETT L. CLUBBE</b></p> <p>Mailing Address 4135 Cooper Point Road NW</p> <p>City State Zip Code Olympia WA 98502</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WA CN 28/WA STATE UNIV EDUCATOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 238.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 16 / 2013 <b>Transaction ID : SA11AI.26005</b></p> <p>Amount of Each Receipt this Period 17.00</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>64.00</p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					

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

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

FOR LINE NUMBER: PAGE 92 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. KATHERINE A. COAKLEY</b></p> <p>Mailing Address 410 S. Maple Avenue  #604</p> <p>City Falls Church State VA Zip Code 20046</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer AFSCME INT'L Occupation AFFILIATE COMMUNICATION MANAGER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">601.90</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  07 / 15 / 2013</p> <p><b>Transaction ID : SA11AI.24108</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">46.99</span></p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. KATHERINE A. COAKLEY</b></p> <p>Mailing Address 410 S. Maple Avenue  #604</p> <p>City Falls Church State VA Zip Code 20046</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer AFSCME INT'L Occupation AFFILIATE COMMUNICATION MANAGER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">648.89</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  07 / 31 / 2013</p> <p><b>Transaction ID : SA11AI.24109</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">46.99</span></p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. AARON J. COLE</b></p> <p>Mailing Address 1520 Brighton Way SE</p> <p>City Olympia State WA Zip Code 98501</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer AFSCME INT'L Occupation INT'L UNION REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">414.03</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  07 / 15 / 2013</p> <p><b>Transaction ID : SA11AI.24110</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">31.95</span></p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">125.93</span>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;"></span>	

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

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

FOR LINE NUMBER: PAGE 93 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. AARON J. COLE**

Mailing Address 1520 Brighton Way SE

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

INT'L UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.08

Date of Receipt

07 / 31 / 2013

Transaction ID : SA11AI.24111

Amount of Each Receipt this Period

33.05

Full Name (Last, First, Middle Initial)

**B. KENTON C. COLE**

Mailing Address P.O. Box 882

City Lomax State IA Zip Code 61454

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME IA CN 61

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

07 / 08 / 2013

Transaction ID : SA11AI.24666

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**C. TRACEY CONATY**

Mailing Address 3525 Quebec Street NW

City Washington State DC Zip Code 20016

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, NEW MEDIA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

687.83

Date of Receipt

07 / 15 / 2013

Transaction ID : SA11AI.24112

Amount of Each Receipt this Period

52.91

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

165.96

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 94 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. TRACEY CONATY**

Mailing Address 3525 Quebec Street NW

City  
Washington

State Zip Code  
DC 20016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, NEW MEDIA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.74

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24113

Amount of Each Receipt this Period

52.91

Full Name (Last, First, Middle Initial)

## **B. AMY CONKLIN**

Mailing Address 1212 Jefferson Street SE

City  
Olympia

State Zip Code  
WA 98501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 25 / 2013

Transaction ID : SA11AI.26007

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

## **C. DONALD W. CONLEY**

Mailing Address 2695 Schaff Drive

City  
Columbus

State Zip Code  
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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25367

Amount of Each Receipt this Period

44.00

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

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

111.91

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

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. 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 ▼

374.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2013

Transaction ID : SA11AI.25368

Amount of Each Receipt this Period

44.00

Full Name (Last, First, Middle Initial)

**B. HILARY L. CONLEY**

Mailing Address 3443 Pine Way

City State Zip Code  
Powell OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.86

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2013

Transaction ID : SA11AI.25252

Amount of Each Receipt this Period

43.58

Full Name (Last, First, Middle Initial)

**C. ALBERTA K. CONRAD**

Mailing Address 4320 NW Second Avenue

City State Zip Code  
Des Moines IA 50313

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.48

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 12 / 2013

Transaction ID : SA11AI.24667

Amount of Each Receipt this Period

14.82

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

102.40

**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

FOR LINE NUMBER: PAGE 96 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. ALBERTA K. CONRAD**

Mailing Address 4320 NW Second Avenue

City

Des Moines

State

IA

Zip Code

50313

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.30

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 23 / 2013

Transaction ID : SA11AI.24668

Amount of Each Receipt this Period

14.82

Full Name (Last, First, Middle Initial)

**B. BELINDA D. CONRAD**

Mailing Address 3062 Pebble Court

City

Maumee

State

OH

Zip Code

43537

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/SYLVANIA

Occupation

TEACHER AIDE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.88

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25622

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

**C. BELINDA D. CONRAD**

Mailing Address 3062 Pebble Court

City

Maumee

State

OH

Zip Code

43537

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/SYLVANIA

Occupation

TEACHER AIDE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.12

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25623

Amount of Each Receipt this Period

19.24

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

53.30

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



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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 97 OF 516

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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**

<p>Full Name (Last, First, Middle Initial) <b>A. WENDY R. CONWAY</b></p> <p>Mailing Address 1212 Jefferson St., SE Suite 300</p> <p>City Olympia State WA Zip Code 98501</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 260.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 10 / 2013 <b>Transaction ID : SA11AI.26010</b></p> <p>Amount of Each Receipt this Period 20.00</p>
<p>Full Name (Last, First, Middle Initial) <b>B. WENDY R. CONWAY</b></p> <p>Mailing Address 1212 Jefferson St., SE Suite 300</p> <p>City Olympia State WA Zip Code 98501</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 280.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2013 <b>Transaction ID : SA11AI.26009</b></p> <p>Amount of Each Receipt this Period 20.00</p>
<p>Full Name (Last, First, Middle Initial) <b>C. SHARON M. CORKIN</b></p> <p>Mailing Address 4106 Terrace Street #5</p> <p>City Oakland State CA Zip Code 94611</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME CA CN 57/EAST BAY PARKS Occupation MAINTENANCE WORKER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 320.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 24 / 2013 <b>Transaction ID : SA11AI.24478</b></p> <p>Amount of Each Receipt this Period 40.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		80.00
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 98 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. SYLVIA Y. COSLOW</b></p> <p>Mailing Address 1931 N 2nd Street</p> <p>City Harrisburg State PA Zip Code 17102</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 350.00</p>		<p>Date of Receipt  <b>07 / 31 / 2013</b>  <b>Transaction ID : SA11AI.25826</b> </p> <p>Amount of Each Receipt this Period            40.00         </p>
<p>Full Name (Last, First, Middle Initial) <b>B. BARBARA COUFAL</b></p> <p>Mailing Address 10112 Parkwood Drive</p> <p>City Bethesda State MD Zip Code 20814</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, FED GOVT AFFAIRS</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 687.83</p>		<p>Date of Receipt  <b>07 / 15 / 2013</b>  <b>Transaction ID : SA11AI.24118</b> </p> <p>Amount of Each Receipt this Period            52.91         </p>
<p>Full Name (Last, First, Middle Initial) <b>C. BARBARA COUFAL</b></p> <p>Mailing Address 10112 Parkwood Drive</p> <p>City Bethesda State MD Zip Code 20814</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, FED GOVT AFFAIRS</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 740.74</p>		<p>Date of Receipt  <b>07 / 31 / 2013</b>  <b>Transaction ID : SA11AI.24119</b> </p> <p>Amount of Each Receipt this Period            52.91         </p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		145.82
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 99 OF 516

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. PATRICIA A. COULTER**

Mailing Address 27702 NE 73rd Avenue

City

Battle Ground

State

WA

Zip Code

98604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7					2	0	1	3		

Transaction ID : SA11AI.26012

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. PATRICIA A. COULTER**

Mailing Address 27702 NE 73rd Avenue

City

Battle Ground

State

WA

Zip Code

98604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7					2	0	1	3		

Transaction ID : SA11AI.26011

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. 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  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

506.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7					2	0	1	3		

Transaction ID : SA11AI.24951

Amount of Each Receipt this Period

72.56

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

112.56

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 100 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. WAYNE D. COWLEY</b></p> <p>Mailing Address 15820 NE 15th Street</p> <p>City State Zip Code Vancouver WA 98684</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 235.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 10 / 2013 <b>Transaction ID : SA11AI.26013</b></p> <p>Amount of Each Receipt this Period 25.00</p>
<p>Full Name (Last, First, Middle Initial) <b>B. HELEN E. COX</b></p> <p>Mailing Address 1130 Kirkwood Ave, SE</p> <p>City State Zip Code Atlanta GA 30316</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INTERNATIONAL STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 356.98</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24120</b></p> <p>Amount of Each Receipt this Period 27.46</p>
<p>Full Name (Last, First, Middle Initial) <b>C. HELEN E. COX</b></p> <p>Mailing Address 1130 Kirkwood Ave, SE</p> <p>City State Zip Code Atlanta GA 30316</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INTERNATIONAL STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 384.44</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24121</b></p> <p>Amount of Each Receipt this Period 27.46</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p> <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		<p>79.92</p>

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

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

FOR LINE NUMBER: PAGE 101 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. JOSEPH COX**

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 ▼

338.38

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2013

Transaction ID : SA11AI.24801

Amount of Each Receipt this Period

48.34

Full Name (Last, First, Middle Initial)

## **B. ROBERT COYLE**

Mailing Address 707 Sears Street

City State Zip Code  
Philadelphia PA 19147

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME PA CN 47/LOC 2187

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  
07 / 16 / 2013

Transaction ID : SA11AI.25952

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

## **C. ALICIA M. CRAIG**

Mailing Address 181 Sunnyside Avenue

City State Zip Code  
New Castle PA 16102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME PA CN 13/NSP.LOCAL 2902

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25827

Amount of Each Receipt this Period

52.00

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

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

140.34

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

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

FOR LINE NUMBER: PAGE 102 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. CARLOS CROSS**

Mailing Address 1034 N. Washington Avenue

City State Zip Code  
 Lansing MI 48906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.56

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 02 / 2013

Transaction ID : SA11AI.24862

Amount of Each Receipt this Period

29.12

Full Name (Last, First, Middle Initial)

**B. CARLOS CROSS**

Mailing Address 1034 N. Washington Avenue

City State Zip Code  
 Lansing MI 48906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.56

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 15 / 2013

Transaction ID : SA11AI.24863

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. CARLOS CROSS**

Mailing Address 1034 N. Washington Avenue

City State Zip Code  
 Lansing MI 48906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.68

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 16 / 2013

Transaction ID : SA11AI.24861

Amount of Each Receipt this Period

29.12

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

83.24

**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 103 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. JENNY F. CROUCHER</b></p> <p>Mailing Address 6625 Buckley Circle  #201</p> <p>City State Zip Code  Inver Grove Hgts. MN 55076</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation  AFSCME MN CN 5/ST. PAUL P.S. STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">275.00</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">16</span> / <span style="border: 1px solid black; padding: 2px;">2013</span></p> <p><b>Transaction ID : SA11AI.24952</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">20.00</span></p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. JENNY F. CROUCHER</b></p> <p>Mailing Address 6625 Buckley Circle  #201</p> <p>City State Zip Code  Inver Grove Hgts. MN 55076</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation  AFSCME MN CN 5/ST. PAUL P.S. STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">295.00</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">30</span> / <span style="border: 1px solid black; padding: 2px;">2013</span></p> <p><b>Transaction ID : SA11AI.24953</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">20.00</span></p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. JAMES B. CULLEN</b></p> <p>Mailing Address 1111 Morningside Avenue</p> <p>City State Zip Code  Schenectady NY 12309</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation  AFSCME INT'L AREA FIELD SERVICES DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">651.69</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">15</span> / <span style="border: 1px solid black; padding: 2px;">2013</span></p> <p><b>Transaction ID : SA11AI.24122</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">50.13</span></p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><span style="border: 1px solid black; padding: 2px;">90.13</span></p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p><span style="border: 1px solid black; padding: 2px;"></span></p>	

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

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 104 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. JAMES B. CULLEN</b></p> <p>Mailing Address 1111 Morningside Avenue</p> <p>City State Zip Code Schenectady NY 12309</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L AREA FIELD SERVICES DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 701.82</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24123</b></p> <p>Amount of Each Receipt this Period 50.13</p>
<p>Full Name (Last, First, Middle Initial) <b>B. DEBORAH CURRIE</b></p> <p>Mailing Address 4031 Executive Park Drive</p> <p>City State Zip Code Harrisburg PA 17111</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 417.30</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013 <b>Transaction ID : SA11AI.25828</b></p> <p>Amount of Each Receipt this Period 62.56</p>
<p>Full Name (Last, First, Middle Initial) <b>C. SANDRA J CURTIS</b></p> <p>Mailing Address 23243 Gateway Drive</p> <p>City State Zip Code Akeley MN 56433</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME MN CN 5 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 08 / 2013 <b>Transaction ID : SA11AI.24954</b></p> <p>Amount of Each Receipt this Period 30.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		142.69
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		



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

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

FOR LINE NUMBER: PAGE 105 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. SEAN C. DAHL</b></p> <p>Mailing Address 325 Amesbury Drive</p> <p>City State Zip Code Columbus OH 43230</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>319.30</b></p>			<p>Date of Receipt <b>07 / 02 / 2013</b></p> <p><b>Transaction ID : SA11AI.25625</b></p> <p>Amount of Each Receipt this Period <b>30.77</b></p>	
<p>Full Name (Last, First, Middle Initial) <b>B. SEAN C. DAHL</b></p> <p>Mailing Address 325 Amesbury Drive</p> <p>City State Zip Code Columbus OH 43230</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>350.07</b></p>			<p>Date of Receipt <b>07 / 19 / 2013</b></p> <p><b>Transaction ID : SA11AI.25624</b></p> <p>Amount of Each Receipt this Period <b>30.77</b></p>	
<p>Full Name (Last, First, Middle Initial) <b>C. JIM A. DAHLING</b></p> <p>Mailing Address 66983 403rd Avenue</p> <p>City State Zip Code Goodhue MN 55027</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME MN CN 65 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>503.02</b></p>			<p>Date of Receipt <b>07 / 05 / 2013</b></p> <p><b>Transaction ID : SA11AI.25114</b></p> <p>Amount of Each Receipt this Period <b>72.26</b></p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><b>133.80</b></p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p></p>	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 106 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. 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 ▼

378.00

Date of Receipt

07 / 08 / 2013

Transaction ID : SA11AI.24955

Amount of Each Receipt this Period

54.00

Full Name (Last, First, Middle Initial)

## **B. 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 ▼

1472.70

Date of Receipt

07 / 22 / 2013

Transaction ID : SA11AI.25829

Amount of Each Receipt this Period

294.54

Full Name (Last, First, Middle Initial)

## **C. MARGARET A DANISON**

Mailing Address 5 Heritage Place

City

Ballston Spa

State

NY

Zip Code

12020

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD OFFICE ASSISTANT II

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

07 / 15 / 2013

Transaction ID : SA11AI.24124

Amount of Each Receipt this Period

18.00

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

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

366.54

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

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

FOR LINE NUMBER: PAGE 107 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. MARGARET A DANISON</b></p> <p>Mailing Address 5 Heritage Place</p> <p>City State Zip Code Ballston Spa NY 12020</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L FIELD OFFICE ASSISTANT II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 252.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24125</b></p> <p>Amount of Each Receipt this Period 18.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. JAMES D. DANNEN</b></p> <p>Mailing Address 12747 Renton Avenue S</p> <p>City State Zip Code Seattle WA 98178</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WA CN 28 COUNCIL REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 294.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 24 / 2013 <b>Transaction ID : SA11AI.26014</b></p> <p>Amount of Each Receipt this Period 42.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. SEAN DANNEN</b></p> <p>Mailing Address P.O. Box 7472</p> <p>City State Zip Code Tacoma WA 98417</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WA CN 28 COUNCIL REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 308.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 24 / 2013 <b>Transaction ID : SA11AI.26015</b></p> <p>Amount of Each Receipt this Period 44.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>104.00</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 108 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. TAWFIK Y DAOUD</b></p> <p>Mailing Address 13304 Clifton Park Circle</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Clifton</td> <td style="width: 33%;">State VA</td> <td style="width: 33%;">Zip Code 20124</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME INT'L</td> <td style="width: 66%;">Occupation NETWORK ANALYST III</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">627.25</span> </p>			City Clifton	State VA	Zip Code 20124	Name of Employer AFSCME INT'L	Occupation NETWORK ANALYST III	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 15 / 2013</span>  <b>Transaction ID : SA11AI.24126</b> </p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">48.25</span> </p>		
City Clifton	State VA	Zip Code 20124								
Name of Employer AFSCME INT'L	Occupation NETWORK ANALYST III									
<p>Full Name (Last, First, Middle Initial)  <b>B. TAWFIK Y DAOUD</b></p> <p>Mailing Address 13304 Clifton Park Circle</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Clifton</td> <td style="width: 33%;">State VA</td> <td style="width: 33%;">Zip Code 20124</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME INT'L</td> <td style="width: 66%;">Occupation NETWORK ANALYST III</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">675.50</span> </p>			City Clifton	State VA	Zip Code 20124	Name of Employer AFSCME INT'L	Occupation NETWORK ANALYST III	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 31 / 2013</span>  <b>Transaction ID : SA11AI.24127</b> </p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">48.25</span> </p>		
City Clifton	State VA	Zip Code 20124								
Name of Employer AFSCME INT'L	Occupation NETWORK ANALYST III									
<p>Full Name (Last, First, Middle Initial)  <b>C. KIMBERLY A. DAVANZO</b></p> <p>Mailing Address 4901 New Castle Road</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Lowellville</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 44436</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME PA CN 13</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">311.98</span> </p>			City Lowellville	State OH	Zip Code 44436	Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 22 / 2013</span>  <b>Transaction ID : SA11AI.25830</b> </p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">62.65</span> </p>		
City Lowellville	State OH	Zip Code 44436								
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE									
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">159.15</span>							
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;"></span>							

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 109 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. JOE C. DAVENPORT**

Mailing Address 3825 NE 125th Street

City  
Seattle

State Zip Code  
WA 98125

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/UNIV OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2013

Transaction ID : SA11AI.26016

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. JOE C. DAVENPORT**

Mailing Address 3825 NE 125th Street

City  
Seattle

State Zip Code  
WA 98125

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/UNIV OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 25 / 2013

Transaction ID : SA11AI.26017

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. GREGORY N. DAVIS**

Mailing Address 53737 Heineman Road E.

City  
Edwall

State Zip Code  
WA 99008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

COUNCIL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.26018

Amount of Each Receipt this Period

20.00

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

60.00

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

X	11a		11b		11c		12		
	13		14		15		16		17

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

FEC Schedule A (Form 3X) Rev. 02/2003

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 111 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. ROBERT DAVIS**

Mailing Address 1034 N. Washington Avenue

City State Zip Code  
 Lansing MI 48906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.44

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 02 / 2013

Transaction ID : SA11AI.24865

Amount of Each Receipt this Period

29.12

Full Name (Last, First, Middle Initial)

**B. ROBERT DAVIS**

Mailing Address 1034 N. Washington Avenue

City State Zip Code  
 Lansing MI 48906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.56

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 16 / 2013

Transaction ID : SA11AI.24864

Amount of Each Receipt this Period

29.12

Full Name (Last, First, Middle Initial)

**C. KENNETH DEITZ**

Mailing Address 9505 Date Street

City State Zip Code  
 Fontana CA 92335

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME CA LOC 1199

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  
 07 / 10 / 2013

Transaction ID : SA11AI.24510

Amount of Each Receipt this Period

20.00

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

78.24

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 112 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. KENNETH DEITZ**

Mailing Address 9505 Date Street

City State Zip Code  
Fontana CA 92335

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME CA LOC 1199

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2013

Transaction ID : SA11AI.24509

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **B. EDGAR DEJESUS**

Mailing Address 8 Ralph Street  
First Floor

City State Zip Code  
Bergenfield NJ 07621-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1012.83

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24128

Amount of Each Receipt this Period

77.91

Full Name (Last, First, Middle Initial)

## **C. EDGAR DEJESUS**

Mailing Address 8 Ralph Street  
First Floor

City State Zip Code  
Bergenfield NJ 07621-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1090.74

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24129

Amount of Each Receipt this Period

77.91

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

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

175.82



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 113 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. CHERYL DELL'AGLIO**

Mailing Address 125 State Street

City

Nicholson

State

PA

Zip Code

18446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

340.62

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	22	/	2013

Transaction ID : SA11AI.25833

Amount of Each Receipt this Period

48.66

Full Name (Last, First, Middle Initial)

**B. KENNETH DELORENZO**

Mailing Address 1179 Charles Street

City

North Providence

State

RI

Zip Code

02904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME RI CN 94

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

676.80

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	16	/	2013

Transaction ID : SA11AI.25961

Amount of Each Receipt this Period

169.20

Full Name (Last, First, Middle Initial)

**C. JOSEPH DELOREY**

Mailing Address 8 Beacon Street

City

Boston

State

MA

Zip Code

02108-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MA CN 93

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

291.62

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	02	/	2013

Transaction ID : SA11AI.24781

Amount of Each Receipt this Period

41.66

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

259.52

**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

FOR LINE NUMBER:  
(check only one)

PAGE 114 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. MICHAEL A. DELUKE**

Mailing Address 844 Manchester Avenue

City State Zip Code  
 Kent OH 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 ▼

432.44

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 01 / 2013

Transaction ID : SA11AI.25257

Amount of Each Receipt this Period

61.52

Full Name (Last, First, Middle Initial)

**B. JAYSON C. DEMAGALL**

Mailing Address 15628 Lakewood Hts Blvd.

City State Zip Code  
 Lakewood OH 44107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 02 / 2013

Transaction ID : SA11AI.25627

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. JAYSON C. DEMAGALL**

Mailing Address 15628 Lakewood Hts Blvd.

City State Zip Code  
 Lakewood OH 44107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 19 / 2013

Transaction ID : SA11AI.25628

Amount of Each Receipt this Period

20.00

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

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

101.52

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 115 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. JOHN C. DEMPSEY</b></p> <p>Mailing Address 20235 Watermark Place</p> <p>City State Zip Code  Sterling VA 20165</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME INT'L GENERAL COUNSEL</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  972.12</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 08 / 2013  <b>Transaction ID : SA11AI.24130</b></p> <p>Amount of Each Receipt this Period  98.91</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. CHRISTIE J. DENNIS-SHERRARD</b></p> <p>Mailing Address 4320 NW Second Avenue</p> <p>City State Zip Code  Des Moines IA 50313</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME IA CN 61/STATE OF IA STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  700.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 12 / 2013  <b>Transaction ID : SA11AI.24672</b></p> <p>Amount of Each Receipt this Period  50.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. CHRISTIE J. DENNIS-SHERRARD</b></p> <p>Mailing Address 4320 NW Second Avenue</p> <p>City State Zip Code  Des Moines IA 50313</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME IA CN 61/STATE OF IA STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  750.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 23 / 2013  <b>Transaction ID : SA11AI.24673</b></p> <p>Amount of Each Receipt this Period  50.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>198.91</p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 116 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. GREG D. DEVEREUX</b></p> <p>Mailing Address 3561 Kamilche Point Road</p> <p>City State Zip Code Shelton WA 98584</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WA CN 28 EXECUTIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 924.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 24 / 2013 <b>Transaction ID : SA11AI.26023</b></p> <p>Amount of Each Receipt this Period 120.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. GREG D. DEVEREUX</b></p> <p>Mailing Address 3561 Kamilche Point Road</p> <p>City State Zip Code Shelton WA 98584</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WA CN 28 EXECUTIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 938.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.26024</b></p> <p>Amount of Each Receipt this Period 14.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. WILLIAM A. DEVORE</b></p> <p>Mailing Address 4499 Stover Road</p> <p>City State Zip Code Ostrander OH 43061</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH CN 8 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 446.86</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2013 <b>Transaction ID : SA11AI.25258</b></p> <p>Amount of Each Receipt this Period 63.58</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>197.58</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 117 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. JASON DIBBLE**

Mailing Address 303 12th Street SE

City  
Austin

State  
MN

Zip Code  
55912-4229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1055.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 05 / 2013

Transaction ID : SA11AI.24959

Amount of Each Receipt this Period

170.00

Full Name (Last, First, Middle Initial)

**B. JASON DIBBLE**

Mailing Address 303 12th Street SE

City  
Austin

State  
MN

Zip Code  
55912-4229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24958

Amount of Each Receipt this Period

170.00

Full Name (Last, First, Middle Initial)

**C. CRYSTAL M. DI DOMENICO**

Mailing Address 6616 Comet Circle  
Apt. 314

City  
Springfield

State  
VA

Zip Code  
22150

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

STAFF SPECIALIST II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.59

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24131

Amount of Each Receipt this Period

37.43

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

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

377.43

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

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

FOR LINE NUMBER: PAGE 118 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. CRYSTAL M. DI DOMENICO</b></p> <p>Mailing Address <b>6616 Comet Circle</b>  <b>Apt. 314</b></p> <p>City <b>Springfield</b> State <b>VA</b> Zip Code <b>22150</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer <b>AFSCME INT'L</b> Occupation <b>STAFF SPECIALIST II</b></p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <b>524.02</b></p>		<p>Date of Receipt  <b>07 / 31 / 2013</b>  <b>Transaction ID : SA11AI.24132</b></p> <p>Amount of Each Receipt this Period  <b>37.43</b></p>
<p>Full Name (Last, First, Middle Initial)  <b>B. JEAN M. DIEDERICH</b></p> <p>Mailing Address <b>4741 Grand Ave. So.</b>  <b>No. 3</b></p> <p>City <b>Minneapolis</b> State <b>MN</b> Zip Code <b>55419-5443</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer <b>AFSCME MN CN 5/HENNEPIN COUNTY</b> Occupation <b>CHILD SUPPORT OFFICER</b></p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <b>1160.00</b></p>		<p>Date of Receipt  <b>07 / 02 / 2013</b>  <b>Transaction ID : SA11AI.24962</b></p> <p>Amount of Each Receipt this Period  <b>232.00</b></p>
<p>Full Name (Last, First, Middle Initial)  <b>C. JEAN M. DIEDERICH</b></p> <p>Mailing Address <b>4741 Grand Ave. So.</b>  <b>No. 3</b></p> <p>City <b>Minneapolis</b> State <b>MN</b> Zip Code <b>55419-5443</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer <b>AFSCME MN CN 5/HENNEPIN COUNTY</b> Occupation <b>CHILD SUPPORT OFFICER</b></p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <b>1392.00</b></p>		<p>Date of Receipt  <b>07 / 05 / 2013</b>  <b>Transaction ID : SA11AI.24961</b></p> <p>Amount of Each Receipt this Period  <b>232.00</b></p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p><b>501.43</b></p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

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

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 119 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. JEAN M. DIEDERICH**

Mailing Address 4741 Grand Ave. So.  
No. 3

City State Zip Code  
Minneapolis MN 55419-5443

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/HENNEPIN COUNTY

Occupation

CHILD SUPPORT OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1624.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24960

Amount of Each Receipt this Period

232.00

Full Name (Last, First, Middle Initial)

**B. RACHEL DIETZ**

Mailing Address 1332 Fulton St.

City State Zip Code  
Harrisburg PA 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 ▼

364.95

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25834

Amount of Each Receipt this Period

72.99

Full Name (Last, First, Middle Initial)

**C. JEANETTE DIFLORIO**

Mailing Address 4296 Merriman Loop

City State Zip Code  
Howell MI 48843

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 ▼

393.77

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.24867

Amount of Each Receipt this Period

30.29

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

335.28

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 120 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. JEANETTE DIFLORIO**

Mailing Address 4296 Merriman Loop

City State Zip Code  
Howell MI 48843

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 ▼

424.06

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2013

Transaction ID : SA11AI.24866

Amount of Each Receipt this Period

30.29

Full Name (Last, First, Middle Initial)

**B. LISA DIVITTORE**

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 ▼

411.04

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25835

Amount of Each Receipt this Period

58.72

Full Name (Last, First, Middle Initial)

**C. KEVIN DOEING**

Mailing Address 316 Quittie Park Dr.

City State Zip Code  
Annville PA 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 ▼

598.13

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25836

Amount of Each Receipt this Period

103.13

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

192.14

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



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	13		14		15		16		17

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

Aggregate Year-to-Date ▼

Month	Year-to-Date Sales
Jan	20
Feb	25
Mar	30
Apr	35
May	40
Jun	45
Jul	50
Aug	55
Sep	60
Oct	65
Nov	70
Dec	260.00

Age Group	Percentage
18-24	10%
25-34	15%
35-44	20%
45-54	25%
55-64	30%
65-74	35%
75-84	38%
85+	40%

Aggregate Year-to-Date ▼

Month	Year-to-Date
1	100.00
2	150.00
3	120.00
4	180.00
5	140.00
6	200.00
7	160.00
8	220.00
9	180.00
10	240.00
11	200.00
12	300.00

Age Group	Percentage
18-24	38.00
25-34	35.00
35-44	32.00
45-54	28.00
55-64	25.00
65-74	22.00
75-84	18.00
85+	5.00

Aggregate Year-to-Date ▼

Month	Sales
Jan	0.00
Feb	0.00
Mar	0.00
Apr	0.00
May	0.00
Jun	0.00
Jul	0.00
Aug	0.00
Sep	0.00
Oct	0.00
Nov	0.00
Dec	273.00

21.00

101.00

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466	467	468	469	470	471	472	473	474	475	476	477	478	479	480	481	482	483	484	485	486	487	488	489	490	491	492	493	494	495	496	497	498	499	500	501	502	503	504	505	506	507	508	509	510	511	512	513	514	515	516	517	518	519	520	521	522	523	52
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**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 122 OF 516

<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**

<b>A. PETER DOMPIERE</b> Full Name (Last, First, Middle Initial) Mailing Address 710 Chippewa Street City Marquette State MI Zip Code 49855 FEC ID number of contributing federal political committee. C Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 294.00		Date of Receipt M M / D D / Y Y Y Y Y 07 / 16 / 2013 <b>Transaction ID : SA11AI.24868</b> Amount of Each Receipt this Period 21.00
<b>B. LORI DONALDSON</b> Full Name (Last, First, Middle Initial) Mailing Address 419 1/2 Grant Street City Franklin State PA Zip Code 16323 FEC ID number of contributing federal political committee. C Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.62		Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013 <b>Transaction ID : SA11AI.25837</b> Amount of Each Receipt this Period 48.66
<b>C. DANNY DONOHUE</b> Full Name (Last, First, Middle Initial) Mailing Address 10 Longview Drive City Clifton Park State NY Zip Code 12061 FEC ID number of contributing federal political committee. C Name of Employer AFSCME NY LOC 1000 Occupation PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 502.60		Date of Receipt M M / D D / Y Y Y Y Y 07 / 11 / 2013 <b>Transaction ID : SA11AI.25209</b> Amount of Each Receipt this Period 19.24
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		88.90
<b>TOTAL</b> This Period (last page this line number only)..... ▶		

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

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 123 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. DANNY DONOHUE</b></p> <p>Mailing Address 10 Longview Drive</p> <p>City State Zip Code  Clifton Park NY 12061</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME NY LOC 1000 PRESIDENT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  521.84</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 25 / 2013  <b>Transaction ID : SA11AI.25207</b></p> <p>Amount of Each Receipt this Period  19.24</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. DANNY DONOHUE</b></p> <p>Mailing Address 10 Longview Drive</p> <p>City State Zip Code  Clifton Park NY 12061</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME NY LOC 1000 PRESIDENT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  535.84</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013  <b>Transaction ID : SA11AI.25208</b></p> <p>Amount of Each Receipt this Period  14.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. CAROL A. DOTLICH</b></p> <p>Mailing Address 8312 198th Street E</p> <p>City State Zip Code  Spanaway WA 98387</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME WA CN 28 PRESIDENT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  308.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 24 / 2013  <b>Transaction ID : SA11AI.26025</b></p> <p>Amount of Each Receipt this Period  42.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>75.24</p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER: PAGE 124 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. JEWEL DOZIER**

Mailing Address 9200 Basil Court  
Suite 105

City State Zip Code  
Largo MD 20774

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 ▼

891.11

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 09 / 2013

Transaction ID : SA11AI.24837

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **B. THOMAS C. DRABICK JR.**

Mailing Address 982 Fortkort Drive

City State Zip Code  
Reynoldsburg OH 43068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

DIRECTOR, LEGAL SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25630

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **C. THOMAS C. DRABICK JR.**

Mailing Address 982 Fortkort Drive

City State Zip Code  
Reynoldsburg OH 43068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

DIRECTOR, LEGAL SERVICES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25629

Amount of Each Receipt this Period

20.00

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

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

60.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 125 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. PAMELA F. DUNCAN</b></p> <p>Mailing Address 7282 Aplin Drive</p> <p>City Reynoldsburg State OH Zip Code 43068</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 4 Occupation EXECUTIVE ASSISTANT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 560.50</p>			<p>Date of Receipt  <b>07 / 02 / 2013</b>  <b>Transaction ID : SA11AI.25631</b> </p> <p>Amount of Each Receipt this Period 48.50</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. PAMELA F. DUNCAN</b></p> <p>Mailing Address 7282 Aplin Drive</p> <p>City Reynoldsburg State OH Zip Code 43068</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 4 Occupation EXECUTIVE ASSISTANT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 609.00</p>			<p>Date of Receipt  <b>07 / 19 / 2013</b>  <b>Transaction ID : SA11AI.25632</b> </p> <p>Amount of Each Receipt this Period 48.50</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. SHARI L. DUNCAN</b></p> <p>Mailing Address 2650 Fillmore Lane</p> <p>City Davenport State IA Zip Code 52804</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME IA CN 61/STATE OF IA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 210.00</p>			<p>Date of Receipt  <b>07 / 12 / 2013</b>  <b>Transaction ID : SA11AI.24677</b> </p> <p>Amount of Each Receipt this Period 15.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			112.00	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 126 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. SHARI L. DUNCAN</b></p> <p>Mailing Address 2650 Fillmore Lane</p> <p>City Davenport State IA Zip Code 52804</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME IA CN 61/STATE OF IA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 225.00</p>		<p>Date of Receipt  <b>07 / 23 / 2013</b>  <b>Transaction ID : SA11AI.24676</b> </p> <p>Amount of Each Receipt this Period 15.00</p>
<p>Full Name (Last, First, Middle Initial) <b>B. JAMES W DURKIN</b></p> <p>Mailing Address 8 Beacon Street</p> <p>City Boston State MA Zip Code 02108-0000</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MA CN 93 Occupation COMMUNICATIONS SPECIALIST</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 350.00</p>		<p>Date of Receipt  <b>07 / 02 / 2013</b>  <b>Transaction ID : SA11AI.24782</b> </p> <p>Amount of Each Receipt this Period 50.00</p>
<p>Full Name (Last, First, Middle Initial) <b>C. DENNIS J. EAGLE</b></p> <p>Mailing Address 5007 26th Avenue SE</p> <p>City Lacey State WA Zip Code 98503</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WA CN 28 Occupation DIRECTOR OF LPA</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 630.00</p>		<p>Date of Receipt  <b>07 / 24 / 2013</b>  <b>Transaction ID : SA11AI.26026</b> </p> <p>Amount of Each Receipt this Period 90.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		155.00
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER: PAGE 127 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. LAURIE ECKELS**

Mailing Address 42 Profio Road

City State Zip Code  
McDonald PA 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 ▼

536.48

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25838

Amount of Each Receipt this Period

76.64

Full Name (Last, First, Middle Initial)

## **B. PATRICIA A. EDWARDS**

Mailing Address 720 Mox Chehalis Road

City State Zip Code  
McCleary WA 98557

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2013

Transaction ID : SA11AI.26027

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

## **C. PATRICIA A. EDWARDS**

Mailing Address 720 Mox Chehalis Road

City State Zip Code  
McCleary WA 98557

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 25 / 2013

Transaction ID : SA11AI.26028

Amount of Each Receipt this Period

21.00

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

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

118.64

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 128 OF 516

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. JAMES C. EGGERS**

Mailing Address 563 Harland Drive

City

Columbus

State

OH

Zip Code

43207

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

EMPLOYMENT SERVICES REP

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2013

Transaction ID : SA11AI.25383

Amount of Each Receipt this Period

16.00

Full Name (Last, First, Middle Initial)

**B. JAMES C. EGGERS**

Mailing Address 563 Harland Drive

City

Columbus

State

OH

Zip Code

43207

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

EMPLOYMENT SERVICES REP

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2013

Transaction ID : SA11AI.25382

Amount of Each Receipt this Period

16.00

Full Name (Last, First, Middle Initial)

**C. RICKIE EILANDER**

Mailing Address 4320 NW Second Avenue

City

Des Moines

State

IA

Zip Code

50313

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	08	/	2013

Transaction ID : SA11AI.24678

Amount of Each Receipt this Period

40.00

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

72.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 129 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. LAURA M. ELLIS**

Mailing Address 7711 Sessis Drive

City

Worthington

State

OH

Zip Code

43085

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 ▼

311.35

Date of Receipt

07 / 15 / 2013

Transaction ID : SA11AI.24135

Amount of Each Receipt this Period

23.95

Full Name (Last, First, Middle Initial)

**B. LAURA M. ELLIS**

Mailing Address 7711 Sessis Drive

City

Worthington

State

OH

Zip Code

43085

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 ▼

335.30

Date of Receipt

07 / 31 / 2013

Transaction ID : SA11AI.24136

Amount of Each Receipt this Period

23.95

Full Name (Last, First, Middle Initial)

**C. LORI R. ELMORE**

Mailing Address 1763 North Cassady Avenue

City

Columbus

State

OH

Zip Code

43219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.00

Date of Receipt

07 / 02 / 2013

Transaction ID : SA11AI.25384

Amount of Each Receipt this Period

62.00

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

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

109.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 130 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. LORI R. ELMORE**

Mailing Address 1763 North Cassady Avenue

City	State	Zip Code
Columbus	OH	43219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	30	/	2013

Transaction ID : SA11AI.25385

Amount of Each Receipt this Period

62.00

Full Name (Last, First, Middle Initial)

**B. DARYL ERICKSON**

Mailing Address 240 Parkridge Road

City	State	Zip Code
Mason City	IA	50401

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	22	/	2013

Transaction ID : SA11AI.24679

Amount of Each Receipt this Period

40.84

Full Name (Last, First, Middle Initial)

**C. KURT ERRICKSON**Mailing Address 224 No. Smith Avenue  
Apt. #12

City	State	Zip Code
Saint Paul	MN	55102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

BUSINESS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

506.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	08	/	2013

Transaction ID : SA11AI.24969

Amount of Each Receipt this Period

72.56

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

175.40

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 131 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. GILBERT ESCUDERO**

Mailing Address 14099 SW 17th Terrace

City State Zip Code  
 Miami FL 33175

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L/STATE STREET

Occupation

RETIREE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.39

Date of Receipt

07 / 08 / 2013

Transaction ID : SA11AI.24137

Amount of Each Receipt this Period

31.77

Full Name (Last, First, Middle Initial)

**B. 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 ▼

437.92

Date of Receipt

07 / 22 / 2013

Transaction ID : SA11AI.25839

Amount of Each Receipt this Period

62.56

Full Name (Last, First, Middle Initial)

**C. 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 ▼

626.91

Date of Receipt

07 / 01 / 2013

Transaction ID : SA11AI.24802

Amount of Each Receipt this Period

90.12

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

184.45

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

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 132 OF 516

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. 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 ▼

469.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2013

Transaction ID : SA11AI.25259

Amount of Each Receipt this Period

67.02

Full Name (Last, First, Middle Initial)

**B. SUSAN E. EVERETTS**

Mailing Address 2704 Bella Via Avenue

City	State	Zip Code
Columbus	OH	43231

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ACCOUNT CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2013

Transaction ID : SA11AI.25635

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

**C. SUSAN E. EVERETTS**

Mailing Address 2704 Bella Via Avenue

City	State	Zip Code
Columbus	OH	43231

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ACCOUNT CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.38

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2013

Transaction ID : SA11AI.25634

Amount of Each Receipt this Period

19.23

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

105.48

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 133 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. 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/STATE OF MN

Occupation  
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 05 / 2013

Transaction ID : SA11AI.24971

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

**B. 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/STATE OF MN

Occupation  
 STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.24972

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

**C. JASMINE FALLS**

Mailing Address 3412 Knipp Drive  
 Suite 102

City State Zip Code  
 Jefferson City MO 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 ▼

224.77

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 02 / 2013

Transaction ID : SA11AI.25132

Amount of Each Receipt this Period

17.29

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

157.29

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 134 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. JASMINE FALLS**

Mailing Address 3412 Knipp Drive  
Suite 102

City State Zip Code  
Jefferson City MO 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 ▼

242.06

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 23 / 2013

Transaction ID : SA11AI.25133

Amount of Each Receipt this Period

17.29

Full Name (Last, First, Middle Initial)

## **B. ROBERT FANTAUZZO**

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

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.18

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25636

Amount of Each Receipt this Period

30.77

Full Name (Last, First, Middle Initial)

## **C. ROBERT FANTAUZZO**

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

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.95

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25637

Amount of Each Receipt this Period

30.77

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

78.83

**TOTAL** This Period (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 135 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. STEPHAN FANTAUZZO**

Mailing Address 3840 N. Delaware Street

City  
IndianapolisState  
IN Zip Code  
46205FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

CHIEF OF STAFF TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1411.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		1	5		2	0	1	3		

Transaction ID : SA11AI.24138

Amount of Each Receipt this Period

108.54

Full Name (Last, First, Middle Initial)

**B. STEPHAN FANTAUZZO**

Mailing Address 3840 N. Delaware Street

City  
IndianapolisState  
IN Zip Code  
46205FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

CHIEF OF STAFF TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1519.56

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		3	1		2	0	1	3		

Transaction ID : SA11AI.24139

Amount of Each Receipt this Period

108.54

Full Name (Last, First, Middle Initial)

**C. CAROLINE A. FARAGHER**

Mailing Address 329 Frances Blvd.

City  
ElyriaState  
OH Zip Code  
44035FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		1	2		2	0	1	3		

Transaction ID : SA11AI.25386

Amount of Each Receipt this Period

15.00

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

232.08

**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 136 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. CAROLINE A. FARAGHER</b></p> <p>Mailing Address 329 Frances Blvd.</p> <p>City Elyria State OH Zip Code 44035</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 220.00</p>			<p>Date of Receipt  <b>07 / 26 / 2013</b>  <b>Transaction ID : SA11AI.25387</b> </p> <p>Amount of Each Receipt this Period 15.00</p>		
<p>Full Name (Last, First, Middle Initial) <b>B. MICHAEL J. FEDOR</b></p> <p>Mailing Address 2340 Dewey Lane</p> <p>City Enola State PA Zip Code 17025</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME PA CN 13 Occupation FIELD EDUCATION COORDINATOR II</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 1072.96</p>			<p>Date of Receipt  <b>07 / 22 / 2013</b>  <b>Transaction ID : SA11AI.25840</b> </p> <p>Amount of Each Receipt this Period 153.28</p>		
<p>Full Name (Last, First, Middle Initial) <b>C. PAULETTE A. FELD</b></p> <p>Mailing Address 416 W 5th Avenue</p> <p>City Oshkosh State WI Zip Code 54902</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WI CN 24/STATE OF WI Occupation IS NETWORK SUP TECH I</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 280.00</p>			<p>Date of Receipt  <b>07 / 12 / 2013</b>  <b>Transaction ID : SA11AI.26184</b> </p> <p>Amount of Each Receipt this Period 20.00</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			188.28		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					



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

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

 FOR LINE NUMBER: PAGE 137 OF 516  
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. PAULETTE A. FELD**

Mailing Address 416 W 5th Avenue

City

Oshkosh

State

WI

Zip Code

54902

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WI CN 24/STATE OF WI

Occupation

IS NETWORK SUP TECH I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	1	3

Transaction ID : SA11AI.26185

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. RICHARD M. FELLER**
Mailing Address 5480 Wisconsin Avenue  
Apt. 1017

City

Chevy Chase

State

MD

Zip Code

20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

745.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	3

Transaction ID : SA11AI.24140

Amount of Each Receipt this Period

57.38

Full Name (Last, First, Middle Initial)

**C. RICHARD M. FELLER**
Mailing Address 5480 Wisconsin Avenue  
Apt. 1017

City

Chevy Chase

State

MD

Zip Code

20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

803.32

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	3

Transaction ID : SA11AI.24141

Amount of Each Receipt this Period

57.38

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

134.76

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 138 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. ANGELA FERRITTO**

Mailing Address 1053 Newton Avenue

City State Zip Code  
 Erie PA 16511

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.58

Date of Receipt

07 / 22 / 2013

Transaction ID : SA11AI.25841

Amount of Each Receipt this Period

42.90

Full Name (Last, First, Middle Initial)

**B. GERALD F FIDLER**

Mailing Address 7123 Falcon Street

City State Zip Code  
 Annadale VA 22003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INTL

Occupation

POLITICAL ACTION REPRESENTATIVE III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

627.25

Date of Receipt

07 / 15 / 2013

Transaction ID : SA11AI.24142

Amount of Each Receipt this Period

48.25

Full Name (Last, First, Middle Initial)

**C. GERALD F FIDLER**

Mailing Address 7123 Falcon Street

City State Zip Code  
 Annadale VA 22003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INTL

Occupation

POLITICAL ACTION REPRESENTATIVE III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.50

Date of Receipt

07 / 31 / 2013

Transaction ID : SA11AI.24143

Amount of Each Receipt this Period

48.25

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

139.40

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

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

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

FOR LINE NUMBER: PAGE 139 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. JOHN J. FILAK Jr.</b></p> <p>Mailing Address 6160 Clingan Road</p> <p>City Poland State OH Zip Code 44514</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ <b>607.64</b></p>		<p>Date of Receipt  <b>07 / 01 / 2013</b>  <b>Transaction ID : SA11AI.25261</b> </p> <p>Amount of Each Receipt this Period  <b>86.42</b> </p>
<p>Full Name (Last, First, Middle Initial) <b>B. DAVID FILLMAN</b></p> <p>Mailing Address 4031 Executive Park Drive</p> <p>City Harrisburg State PA Zip Code 17111</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME PA CN 13 Occupation EXECUTIVE DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ <b>1161.00</b></p>		<p>Date of Receipt  <b>07 / 22 / 2013</b>  <b>Transaction ID : SA11AI.25842</b> </p> <p>Amount of Each Receipt this Period  <b>143.60</b> </p>
<p>Full Name (Last, First, Middle Initial) <b>C. DAVID FILLMAN</b></p> <p>Mailing Address 4031 Executive Park Drive</p> <p>City Harrisburg State PA Zip Code 17111</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME PA CN 13 Occupation EXECUTIVE DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ <b>1175.00</b></p>		<p>Date of Receipt  <b>07 / 31 / 2013</b>  <b>Transaction ID : SA11AI.25843</b> </p> <p>Amount of Each Receipt this Period  <b>14.00</b> </p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p><b>244.02</b></p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 140 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. DIANE FIRKUS**

Mailing Address 44935 Deerfield Road

City State Zip Code  
Sturgeon Lake MN 55783

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 08 / 2013

Transaction ID : SA11AI.24976

Amount of Each Receipt this Period

52.00

Full Name (Last, First, Middle Initial)

## **B. GERALD FIRKUS**

Mailing Address 44935 Deerfield Road

City State Zip Code  
Sturgeon Lake MN 55783-3616

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.81

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 05 / 2013

Transaction ID : SA11AI.24977

Amount of Each Receipt this Period

40.74

Full Name (Last, First, Middle Initial)

## **C. GERALD FIRKUS**

Mailing Address 44935 Deerfield Road

City State Zip Code  
Sturgeon Lake MN 55783-3616

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.55

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24978

Amount of Each Receipt this Period

40.74

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

133.48

**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 PageFOR LINE NUMBER: PAGE 141 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. WYNN L. FISHER**

Mailing Address P.O. Box 525

City

New Bradford

State

PA

Zip Code

16140

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME PA CN 13/NSP.LOCAL 2902

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	Y
0	7		2	2		2	0	1	3		

Transaction ID : SA11AI.25846

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. DEBORAH L. FLAHERTY**

Mailing Address 662 Grayton Road

City

Berea

State

OH

Zip Code

44017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/STRONGSVILLE

Occupation

CUSTODIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		0	2		2	0	1	3		

Transaction ID : SA11AI.25639

Amount of Each Receipt this Period

9.62

Full Name (Last, First, Middle Initial)

**C. DEBORAH L. FLAHERTY**

Mailing Address 662 Grayton Road

City

Berea

State

OH

Zip Code

44017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/STRONGSVILLE

Occupation

CUSTODIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.30

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		1	9		2	0	1	3		

Transaction ID : SA11AI.25638

Amount of Each Receipt this Period

19.24

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

68.86

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 142 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. CHRISTOPHER C. FLEMING**

Mailing Address 2351 Huntington Station Court

City State Zip Code  
 Alexandria VA 22303

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR MEDIA OUTREACH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

569.27

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 15 / 2013

Transaction ID : SA11AI.24144

Amount of Each Receipt this Period

43.79

Full Name (Last, First, Middle Initial)

**B. CHRISTOPHER C. FLEMING**

Mailing Address 2351 Huntington Station Court

City State Zip Code  
 Alexandria VA 22303

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR MEDIA OUTREACH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

613.06

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.24145

Amount of Each Receipt this Period

43.79

Full Name (Last, First, Middle Initial)

**C. NANETTE M. FOLSOM**

Mailing Address 5631 Swan Avenue ne

City State Zip Code  
 North Canton OH 44721

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 02 / 2013

Transaction ID : SA11AI.25641

Amount of Each Receipt this Period

25.00

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

112.58

**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 143 OF 516

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. NANETTE M. 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

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2013

Transaction ID : SA11AI.25640

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. BENJAMIN FORSTENZER**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 ▼

445.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2013

Transaction ID : SA11AI.24803

Amount of Each Receipt this Period

64.16

Full Name (Last, First, Middle Initial)

**C. 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 ▼

387.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	08	/	2013

Transaction ID : SA11AI.24981

Amount of Each Receipt this Period

55.52

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

144.68

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 144 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. MICHAEL 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 ▼

2155.20

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25847

Amount of Each Receipt this Period

347.04

Full Name (Last, First, Middle Initial)

**B. 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 ▼

2225.20

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.25848

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

**C. SUZANNE M. FOX**

Mailing Address 4200 Chestnut Hills Road

City

Newark

State

OH

Zip Code

43055

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/NEWARK CITY

Occupation

EDUCATIONAL/TEACHER AIDE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.06

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25643

Amount of Each Receipt this Period

19.24

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

436.28

**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 145 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. SUZANNE M. FOX</b></p> <p>Mailing Address 4200 Chestnut Hills Road</p> <p>City State Zip Code Newark OH 43055</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 4/NEWARK CITY EDUCATIONAL/TEACHER AIDE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 249.68</p>			<p>Date of Receipt  <b>07 / 19 / 2013</b>  <b>Transaction ID : SA11AI.25642</b> </p> <p>Amount of Each Receipt this Period 9.62</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. MICHAEL G. FRAISE</b></p> <p>Mailing Address 3363 190th Street</p> <p>City State Zip Code Fort Madison IA 52627</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME IA CN 61/STATE OF IA STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 210.00</p>			<p>Date of Receipt  <b>07 / 12 / 2013</b>  <b>Transaction ID : SA11AI.24681</b> </p> <p>Amount of Each Receipt this Period 15.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. MICHAEL G. FRAISE</b></p> <p>Mailing Address 3363 190th Street</p> <p>City State Zip Code Fort Madison IA 52627</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME IA CN 61/STATE OF IA STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 225.00</p>			<p>Date of Receipt  <b>07 / 23 / 2013</b>  <b>Transaction ID : SA11AI.24680</b> </p> <p>Amount of Each Receipt this Period 15.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			39.62	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 146 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. WALTER FRANCIS</b></p> <p>Mailing Address 1002 Cypress Rd.</p> <p>City State Zip Code Wilmington DE 19810</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 473.90</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013 <b>Transaction ID : SA11AI.25849</b></p> <p>Amount of Each Receipt this Period 67.70</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. RODOLFO FRANCO</b></p> <p>Mailing Address 4526 Delridge Way SW</p> <p>City State Zip Code Seattle WA 98106</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WA CN 28/COMM COLLEGE STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 232.58</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 10 / 2013 <b>Transaction ID : SA11AI.26031</b></p> <p>Amount of Each Receipt this Period 10.50</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. RODOLFO FRANCO</b></p> <p>Mailing Address 4526 Delridge Way SW</p> <p>City State Zip Code Seattle WA 98106</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WA CN 28/COMM COLLEGE STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 245.58</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 23 / 2013 <b>Transaction ID : SA11AI.26030</b></p> <p>Amount of Each Receipt this Period 13.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>91.20</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 147 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. RODOLFO FRANCO</b></p> <p>Mailing Address 4526 Delridge Way SW</p> <p>City State Zip Code          Seattle WA 98106</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME WA CN 28/COMM COLLEGE STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          256.08</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 25 / 2013  <b>Transaction ID : SA11AI.26029</b></p> <p>Amount of Each Receipt this Period          10.50</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. STEVEN M. FRANCY</b></p> <p>Mailing Address 12 Belmont Court</p> <p>City State Zip Code          Silver Spring MD 20910</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME INT'L COORDINATOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          535.08</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 15 / 2013  <b>Transaction ID : SA11AI.24146</b></p> <p>Amount of Each Receipt this Period          44.59</p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. STEVEN M. FRANCY</b></p> <p>Mailing Address 12 Belmont Court</p> <p>City State Zip Code          Silver Spring MD 20910</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME INT'L COORDINATOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          579.67</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 31 / 2013  <b>Transaction ID : SA11AI.24147</b></p> <p>Amount of Each Receipt this Period          44.59</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			99.68	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 148 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. 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/STATE STREET

Occupation

RETIREE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

541.80

Date of Receipt

07 / 08 / 2013

Transaction ID : SA11AI.24148

Amount of Each Receipt this Period

77.40

Full Name (Last, First, Middle Initial)

**B. DENNIS D. FRAZIER**

Mailing Address 2677 Greenfield Drive

City

Zim

State

MN

Zip Code

55738

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/ST. LOUIS CNTY

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

07 / 10 / 2013

Transaction ID : SA11AI.24982

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. DENNIS D. FRAZIER**

Mailing Address 2677 Greenfield Drive

City

Zim

State

MN

Zip Code

55738

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/ST. LOUIS CNTY

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

07 / 23 / 2013

Transaction ID : SA11AI.24983

Amount of Each Receipt this Period

15.00

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

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

107.40

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

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

FOR LINE NUMBER: PAGE 149 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. ANGELA FROEBE</b></p> <p>Mailing Address 190 W. Ostend Street Suite 101</p> <p>City Baltimore State MD Zip Code 21230</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 227.50</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2013 <b>Transaction ID : SA11AI.24804</b></p> <p>Amount of Each Receipt this Period 32.50</p>
<p>Full Name (Last, First, Middle Initial) <b>B. JAMES E. FRYE</b></p> <p>Mailing Address 11510 Waesche Drive</p> <p>City Bowie State MD Zip Code 20721</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation STAFF SPECIALIST II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24150</b></p> <p>Amount of Each Receipt this Period 15.00</p>
<p>Full Name (Last, First, Middle Initial) <b>C. KIMBERLY FRYMOYER</b></p> <p>Mailing Address 518 REUEL AVENUE</p> <p>City KELLOGG State ID Zip Code 50135</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME IA CN 61 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 205.40</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 23 / 2013 <b>Transaction ID : SA11AI.24685</b></p> <p>Amount of Each Receipt this Period 8.36</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		55.86
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER: PAGE 150 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. AMY H. GALATIAN</b></p> <p>Mailing Address 11072 Sospel Place</p> <p>City State Zip Code  Las Vegas NV 89141</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME INT'L FIELD COORDINATOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  513.63</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013</p> <p><b>Transaction ID : SA11AI.24151</b></p> <p>Amount of Each Receipt this Period  39.51</p>		
<p>Full Name (Last, First, Middle Initial)  <b>B. AMY H. GALATIAN</b></p> <p>Mailing Address 11072 Sospel Place</p> <p>City State Zip Code  Las Vegas NV 89141</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME INT'L FIELD COORDINATOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  554.22</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013</p> <p><b>Transaction ID : SA11AI.24152</b></p> <p>Amount of Each Receipt this Period  40.59</p>		
<p>Full Name (Last, First, Middle Initial)  <b>C. KERRI GALLAGHER</b></p> <p>Mailing Address 8 South Main Street</p> <p>City State Zip Code  Mountain Top PA 18707</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  490.83</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 22 / 2013</p> <p><b>Transaction ID : SA11AI.25851</b></p> <p>Amount of Each Receipt this Period  84.63</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>164.73</p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					

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

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

FOR LINE NUMBER: PAGE 151 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. 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  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

473.90

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25852

Amount of Each Receipt this Period

67.70

Full Name (Last, First, Middle Initial)

B. PAUL H. GAMMEL

Mailing Address 47390 Acacia Trail

City

Stanchfield

State

MN

Zip Code

55080

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 05 / 2013

Transaction ID : SA11AI.24984

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. PAUL H. GAMMEL

Mailing Address 47390 Acacia Trail

City

Stanchfield

State

MN

Zip Code

55080

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24985

Amount of Each Receipt this Period

40.00

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

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

147.70

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

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

FOR LINE NUMBER: PAGE 152 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. DEBRA L. GARCIA</b></p> <p>Mailing Address 449 College Avenue</p> <p>City State Zip Code Richmond IN 47374</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L AREA FIELD SERVICES DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 524.89</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24153</b></p> <p>Amount of Each Receipt this Period 39.64</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. DEBRA L. GARCIA</b></p> <p>Mailing Address 449 College Avenue</p> <p>City State Zip Code Richmond IN 47374</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L AREA FIELD SERVICES DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 564.53</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24154</b></p> <p>Amount of Each Receipt this Period 39.64</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. ALBERT GARRETT</b></p> <p>Mailing Address 18491 Lauder</p> <p>City State Zip Code Detroit MI 48232</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME MI CN 25 PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1531.79</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.24871</b></p> <p>Amount of Each Receipt this Period 117.83</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>197.11</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 153 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. ALBERT GARRETT**

Mailing Address 18491 Lauder

City  
Detroit

State  
MI

Zip Code  
48232

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 ▼

1649.62

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2013

Transaction ID : SA11AI.24870

Amount of Each Receipt this Period

117.83

Full Name (Last, First, Middle Initial)

**B. AUSTIN GARRETT**

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 ▼

337.92

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.24873

Amount of Each Receipt this Period

26.19

Full Name (Last, First, Middle Initial)

**C. AUSTIN GARRETT**

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 ▼

364.11

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2013

Transaction ID : SA11AI.24872

Amount of Each Receipt this Period

26.19

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

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

170.21

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 154 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. ROBERT A. GARRETT</b></p> <p>Mailing Address 5621 Wigmore Drive</p> <p>City State Zip Code  Columbus OH 43235</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME OH CN 8 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  360.58</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 01 / 2013</p> <p><b>Transaction ID : SA11AI.25262</b></p> <p>Amount of Each Receipt this Period  51.34</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. KATHLEEN P. GARRISON</b></p> <p>Mailing Address 9 Kings Road</p> <p>City State Zip Code  Ganesvoort NY 12831</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME NY LOC 1000 VICE PRESIDENT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  260.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 03 / 2013</p> <p><b>Transaction ID : SA11AI.25212</b></p> <p>Amount of Each Receipt this Period  20.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. KATHLEEN P. GARRISON</b></p> <p>Mailing Address 9 Kings Road</p> <p>City State Zip Code  Ganesvoort NY 12831</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME NY LOC 1000 VICE PRESIDENT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  280.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 17 / 2013</p> <p><b>Transaction ID : SA11AI.25211</b></p> <p>Amount of Each Receipt this Period  20.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>91.34</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 155 OF 516  
(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**

<b>A. KATHLEEN P. GARRISON</b> Full Name (Last, First, Middle Initial) Mailing Address 9 Kings Road City Ganesvoort State NY Zip Code 12831 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME NY LOC 1000 Occupation VICE PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.25210</b> Amount of Each Receipt this Period 20.00
<b>B. DAVID GASH</b> Full Name (Last, First, Middle Initial) Mailing Address 226 Hartley Road City Hershey State PA Zip Code 17033 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 512.12			Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013 <b>Transaction ID : SA11AI.25853</b> Amount of Each Receipt this Period 73.16
<b>C. MICHAEL J. GASS</b> Full Name (Last, First, Middle Initial) Mailing Address 6602 SE Sundancer City Pleasant Hill State IA Zip Code 50327 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME IA CN 61/STATE OF IA Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 335.41			Date of Receipt M M / D D / Y Y Y Y Y 07 / 12 / 2013 <b>Transaction ID : SA11AI.24688</b> Amount of Each Receipt this Period 25.00
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			118.16
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 156 OF 516

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. MICHAEL J. GASS**

Mailing Address 6602 SE Sundancer

City

Pleasant Hill

State

IA

Zip Code

50327

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.41

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	23	/	2013

Transaction ID : SA11AI.24687

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. RYAN GENOVESE**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 ▼

378.30

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	09	/	2013

Transaction ID : SA11AI.24838

Amount of Each Receipt this Period

50.44

Full Name (Last, First, Middle Initial)

**C. JENNIFER GEORGE**

Mailing Address 201 NORTH 36TH STREET

City

CAMP HILL

State

PA

Zip Code

17011

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 ▼

340.62

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	22	/	2013

Transaction ID : SA11AI.25854

Amount of Each Receipt this Period

48.66

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

124.10

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 157 OF 516

<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**

<b>A. RAGLAN GEORGE Jr.</b> Full Name (Last, First, Middle Initial) Mailing Address 75 Varick Street Suite #1404 City New York State NY Zip Code 10013-9902 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME NY CN 1707 Occupation EXECUTIVE DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>779.32</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.25185</b> Amount of Each Receipt this Period <b>25.00</b>
<b>B. RAGLAN GEORGE Jr.</b> Full Name (Last, First, Middle Initial) Mailing Address 75 Varick Street Suite #1404 City New York State NY Zip Code 10013-9902 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME NY CN 1707 Occupation EXECUTIVE DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>793.32</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.25184</b> Amount of Each Receipt this Period <b>14.00</b>
<b>C. THOMAS GIBBS</b> Full Name (Last, First, Middle Initial) Mailing Address 152 Upper Claar Rd. City Claysburg State PA Zip Code 16625 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>512.12</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013 <b>Transaction ID : SA11AI.25855</b> Amount of Each Receipt this Period <b>73.16</b>
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		<b>112.16</b>
<b>TOTAL</b> 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 158 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. CRAIG W. GIBELYOU**

Mailing Address 10905 132nd Street E

City State Zip Code  
 Puyallup WA 98374

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

07 / 10 / 2013

Transaction ID : SA11AI.26033

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

**B. CRAIG W. GIBELYOU**

Mailing Address 10905 132nd Street E

City State Zip Code  
 Puyallup WA 98374

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

07 / 25 / 2013

Transaction ID : SA11AI.26032

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

**C. CHERYL A. GIBSON**

Mailing Address 4320 NW Second Avenue

City State Zip Code  
 Des Moines IA 50313

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.68

Date of Receipt

07 / 12 / 2013

Transaction ID : SA11AI.24690

Amount of Each Receipt this Period

24.62

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

66.62

**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:  
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PAGE 159 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. CHERYL A. GIBSON</b></p> <p>Mailing Address 4320 NW Second Avenue</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Des Moines</td> <td style="width: 33%;">State IA</td> <td style="width: 33%;">Zip Code 50313</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME IA CN 61/STATE OF IA</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">369.30</span> </p>			City Des Moines	State IA	Zip Code 50313	Name of Employer AFSCME IA CN 61/STATE OF IA	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 23 / 2013</span> </p> <p><b>Transaction ID : SA11AI.24689</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">24.62</span> </p>	
City Des Moines	State IA	Zip Code 50313							
Name of Employer AFSCME IA CN 61/STATE OF IA	Occupation STAFF REPRESENTATIVE								
<p>Full Name (Last, First, Middle Initial) <b>B. LENORA R. GILES</b></p> <p>Mailing Address 40778 Boyd Road</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Wellsville</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43968</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH LOC 4</td> <td style="width: 66%;">Occupation FIELD REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">320.00</span> </p>			City Wellsville	State OH	Zip Code 43968	Name of Employer AFSCME OH LOC 4	Occupation FIELD REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 02 / 2013</span> </p> <p><b>Transaction ID : SA11AI.25645</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">30.00</span> </p>	
City Wellsville	State OH	Zip Code 43968							
Name of Employer AFSCME OH LOC 4	Occupation FIELD REPRESENTATIVE								
<p>Full Name (Last, First, Middle Initial) <b>C. LENORA R. GILES</b></p> <p>Mailing Address 40778 Boyd Road</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Wellsville</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43968</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH LOC 4</td> <td style="width: 66%;">Occupation FIELD REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">350.00</span> </p>			City Wellsville	State OH	Zip Code 43968	Name of Employer AFSCME OH LOC 4	Occupation FIELD REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 19 / 2013</span> </p> <p><b>Transaction ID : SA11AI.25644</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">30.00</span> </p>	
City Wellsville	State OH	Zip Code 43968							
Name of Employer AFSCME OH LOC 4	Occupation FIELD REPRESENTATIVE								
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p> <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p><span style="border: 1px solid black; padding: 2px;">84.62</span></p> <p><span style="border: 1px solid black; padding: 2px;"></span></p>						

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

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 160 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. 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 ▼

1059.50

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24157

Amount of Each Receipt this Period

81.50

Full Name (Last, First, Middle Initial)

**B. 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 ▼

1141.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24158

Amount of Each Receipt this Period

81.50

Full Name (Last, First, Middle Initial)

**C. GARY L. GILLESPIE**

Mailing Address P.O. Box 1

City State Zip Code  
Eugene OR 97440

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OR CN 75/STATE OF OR

Occupation

CUST ACCTS SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.25788

Amount of Each Receipt this Period

30.00

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

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

193.00



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 161 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. DOROTHY L. GILLIAM</b></p> <p>Mailing Address 1216 Waterford Drive</p> <p>City State Zip Code District Heights MD 20747</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L EXECUTIVE OFFICE ASSISTANT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 511.55</p>			<p>Date of Receipt  <b>07 / 15 / 2013</b>  <b>Transaction ID : SA11AI.24159</b> </p> <p>Amount of Each Receipt this Period 39.35</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. DOROTHY L. GILLIAM</b></p> <p>Mailing Address 1216 Waterford Drive</p> <p>City State Zip Code District Heights MD 20747</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L EXECUTIVE OFFICE ASSISTANT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 550.90</p>			<p>Date of Receipt  <b>07 / 31 / 2013</b>  <b>Transaction ID : SA11AI.24160</b> </p> <p>Amount of Each Receipt this Period 39.35</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. DENISE GILMORE</b></p> <p>Mailing Address 190 W. Ostend Street Suite 101</p> <p>City State Zip Code Baltimore MD 21230</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME MD CN 982 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 315.00</p>			<p>Date of Receipt  <b>07 / 01 / 2013</b>  <b>Transaction ID : SA11AI.24805</b> </p> <p>Amount of Each Receipt this Period 45.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			123.70	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER: PAGE 162 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. STEVE GIORGI</b></p> <p>Mailing Address 8386 Gardenia Street</p> <p>City State Zip Code          Virginia MN 55792</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME MN CN 65 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          621.08</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 05 / 2013  <b>Transaction ID : SA11AI.25115</b></p> <p>Amount of Each Receipt this Period          88.34</p>		
<p>Full Name (Last, First, Middle Initial)  <b>B. MARK T. GIPSON</b></p> <p>Mailing Address 2961 SW Champlain Drive</p> <p>City State Zip Code          Portland OR 97205</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME OR CN 75/STATE OF OR CUSTODIAN</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          280.00</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 01 / 2013  <b>Transaction ID : SA11AI.25791</b></p> <p>Amount of Each Receipt this Period          110.00</p>		
<p>Full Name (Last, First, Middle Initial)  <b>C. MARK T. GIPSON</b></p> <p>Mailing Address 2961 SW Champlain Drive</p> <p>City State Zip Code          Portland OR 97205</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME OR CN 75/STATE OF OR CUSTODIAN</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          450.00</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 31 / 2013  <b>Transaction ID : SA11AI.25789</b></p> <p>Amount of Each Receipt this Period          170.00</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			368.34		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					

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

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

FOR LINE NUMBER: PAGE 163 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. ROGER GLADDEN</b></p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 02 / 2013  <b>Transaction ID : SA11AI.25135</b></p>	
<p>Mailing Address 3412 Knipp Drive  Suite 102</p>		<p>Amount of Each Receipt this Period  18.75</p>	
<p>City Jefferson City State MO Zip Code 65109</p>			
<p>FEC ID number of contributing federal political committee. C</p>			
<p>Name of Employer  AFSCME MO CN 72</p>	<p>Occupation  STAFF REPRESENTATIVE</p>		
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Aggregate Year-to-Date ▼  243.75</p>		
<p>Full Name (Last, First, Middle Initial)  <b>B. ROGER GLADDEN</b></p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 23 / 2013  <b>Transaction ID : SA11AI.25134</b></p>	
<p>Mailing Address 3412 Knipp Drive  Suite 102</p>		<p>Amount of Each Receipt this Period  18.75</p>	
<p>City Jefferson City State MO Zip Code 65109</p>			
<p>FEC ID number of contributing federal political committee. C</p>			
<p>Name of Employer  AFSCME MO CN 72</p>	<p>Occupation  STAFF REPRESENTATIVE</p>		
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Aggregate Year-to-Date ▼  262.50</p>		
<p>Full Name (Last, First, Middle Initial)  <b>C. PATRICIA M. GLYNN</b></p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 02 / 2013  <b>Transaction ID : SA11AI.24783</b></p>	
<p>Mailing Address 55 Aberdeen Avenue</p>		<p>Amount of Each Receipt this Period  92.50</p>	
<p>City Cambridge State MA Zip Code 02138-0000</p>			
<p>FEC ID number of contributing federal political committee. C</p>			
<p>Name of Employer  AFSCME MA CN 93</p>	<p>Occupation  AREA FIELD SERVICES DIRECTOR</p>		
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Aggregate Year-to-Date ▼  672.50</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>130.00</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 164 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<b>A. RICHARD GOLLIN</b> Full Name (Last, First, Middle Initial) Mailing Address 900 Randolph Place City Union State NJ Zip Code 07083-0000 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME NJ CN 52 Occupation EXECUTIVE DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 769.52		Date of Receipt M M / D D / Y Y Y Y Y 07 / 11 / 2013 <b>Transaction ID : SA11AI.25157</b> Amount of Each Receipt this Period 105.92
<b>B. RICHARD GOLLIN</b> Full Name (Last, First, Middle Initial) Mailing Address 900 Randolph Place City Union State NJ Zip Code 07083-0000 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME NJ CN 52 Occupation EXECUTIVE DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 783.52		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.25158</b> Amount of Each Receipt this Period 14.00
<b>C. SETH GOLLIN</b> Full Name (Last, First, Middle Initial) Mailing Address 5 Randolph Place Apt. 1C City Montclair State NJ Zip Code 07042-0000 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME NJ CN 52 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 07 / 11 / 2013 <b>Transaction ID : SA11AI.25159</b> Amount of Each Receipt this Period 50.00
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		169.92
<b>TOTAL</b> This Period (last page this line number only)..... ▶		

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

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

FOR LINE NUMBER: PAGE 165 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. JAMES R. GOLLINGS Jr.**

Mailing Address 40 Rathbone

City State Zip Code  
Columbus OH 43214

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

546.25

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25647

Amount of Each Receipt this Period

41.54

Full Name (Last, First, Middle Initial)

**B. JAMES R. GOLLINGS Jr.**

Mailing Address 40 Rathbone

City State Zip Code  
Columbus OH 43214

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

587.79

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25646

Amount of Each Receipt this Period

41.54

Full Name (Last, First, Middle Initial)

**C. ANISSIA GOODWIN**

Mailing Address 390 Worthington Road

City State Zip Code  
Westerville OH 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 ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25399

Amount of Each Receipt this Period

66.00

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

149.08

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 166 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. ANISSIA GOODWIN</b></p> <p>Mailing Address 390 Worthington Road</p> <p>City State Zip Code Westerville OH 43082</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 11 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 561.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 30 / 2013 <b>Transaction ID : SA11AI.25398</b></p> <p>Amount of Each Receipt this Period 66.00</p>
<p>Full Name (Last, First, Middle Initial) <b>B. PATRICIA GORDON</b></p> <p>Mailing Address 112 Chesbrough Road</p> <p>City State Zip Code West Roxbury MA 02132-0000</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L FIELD OFFICE ASSISTANT II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 336.83</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24161</b></p> <p>Amount of Each Receipt this Period 25.91</p>
<p>Full Name (Last, First, Middle Initial) <b>C. PATRICIA GORDON</b></p> <p>Mailing Address 112 Chesbrough Road</p> <p>City State Zip Code West Roxbury MA 02132-0000</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L FIELD OFFICE ASSISTANT II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 362.74</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24162</b></p> <p>Amount of Each Receipt this Period 25.91</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		117.82
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER: PAGE 167 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. PERRY GORDON

Mailing Address P.O. Box 1123

City State Zip Code  
 Roy WA 98580

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

COUNCIL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 24 / 2013

Transaction ID : SA11AI.26034

Amount of Each Receipt this Period

58.00

Full Name (Last, First, Middle Initial)

B. SHERRYL GORDON

Mailing Address 2930 South Broad Street

City State Zip Code  
 Trenton NJ 08610

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 ▼

407.40

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 15 / 2013

Transaction ID : SA11AI.25151

Amount of Each Receipt this Period

58.20

Full Name (Last, First, Middle Initial)

C. SHERRYL GORDON

Mailing Address 2930 South Broad Street

City State Zip Code  
 Trenton NJ 08610

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 ▼

465.60

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 22 / 2013

Transaction ID : SA11AI.25152

Amount of Each Receipt this Period

58.20

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

184.40

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

FOR LINE NUMBER:  
(check only one)

PAGE 168 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. WILLIAM H. GORDON JR.</b></p> <p>Mailing Address 7203 Van Kirk Avenue</p> <p>City State Zip Code Cincinnati OH 45216</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH CORRECTION OFFICER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 12 / 2013 <b>Transaction ID : SA11AI.25400</b></p> <p>Amount of Each Receipt this Period 15.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. WILLIAM H. GORDON JR.</b></p> <p>Mailing Address 7203 Van Kirk Avenue</p> <p>City State Zip Code Cincinnati OH 45216</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH CORRECTION OFFICER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2013 <b>Transaction ID : SA11AI.25401</b></p> <p>Amount of Each Receipt this Period 15.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. DANA M. GOUIN</b></p> <p>Mailing Address 9121 Knox Court</p> <p>City State Zip Code Laurel MD 20723</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L SUPPORT STAFF</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 390.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24163</b></p> <p>Amount of Each Receipt this Period 30.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>60.00</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 169 OF 516

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. DANA M. GOUIN**

Mailing Address 9121 Knox Court

City

Laurel

State

MD

Zip Code

20723

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

SUPPORT STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	3

Transaction ID : SA11AI.24164

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. STEPHEN M. GRAHAM**

Mailing Address 6002 Euclid Street

City

Cheverly

State

MD

Zip Code

20785

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 ▼

684.62

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	3

Transaction ID : SA11AI.24165

Amount of Each Receipt this Period

52.91

Full Name (Last, First, Middle Initial)

**C. STEPHEN M. GRAHAM**

Mailing Address 6002 Euclid Street

City

Cheverly

State

MD

Zip Code

20785

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 ▼

737.53

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	3

Transaction ID : SA11AI.24166

Amount of Each Receipt this Period

52.91

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

135.82

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 170 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. BONNIE L. GRANTZ**

Mailing Address 3898 Ascott Court

City

Youngstown

State

OH

Zip Code

44511

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/AUSTINTOWN LSD

Occupation

BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25649

Amount of Each Receipt this Period

38.47

Full Name (Last, First, Middle Initial)

**B. BONNIE L. GRANTZ**

Mailing Address 3898 Ascott Court

City

Youngstown

State

OH

Zip Code

44511

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/AUSTINTOWN LSD

Occupation

BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.58

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25648

Amount of Each Receipt this Period

38.47

Full Name (Last, First, Middle Initial)

**C. SYLVIA GRASS**

Mailing Address 1720 North High St

City

Independence

State

MO

Zip Code

64050

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INTERNATIONAL

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.54

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24167

Amount of Each Receipt this Period

34.58

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

111.52

**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:  
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PAGE 171 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. SYLVIA GRASS</b></p> <p>Mailing Address 1720 North High St</p> <p>City Independence State MO Zip Code 64050</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INTERNATIONAL Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ <b>484.12</b></p>			<p>Date of Receipt  <b>07 / 31 / 2013</b>  <b>Transaction ID : SA11AI.24168</b> </p> <p>Amount of Each Receipt this Period  <b>34.58</b> </p>	
<p>Full Name (Last, First, Middle Initial) <b>B. ELIZABETH D. GRAY-LINDSLEY</b></p> <p>Mailing Address 1302 4th Street SW</p> <p>City Washington State DC Zip Code 20024</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation ASSIST DIRECTOR, CAPITAL STRATEGIES</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ <b>1375.66</b></p>			<p>Date of Receipt  <b>07 / 15 / 2013</b>  <b>Transaction ID : SA11AI.24278</b> </p> <p>Amount of Each Receipt this Period  <b>105.82</b> </p>	
<p>Full Name (Last, First, Middle Initial) <b>C. ELIZABETH D. GRAY-LINDSLEY</b></p> <p>Mailing Address 1302 4th Street SW</p> <p>City Washington State DC Zip Code 20024</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation ASSIST DIRECTOR, CAPITAL STRATEGIES</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ <b>1455.02</b></p>			<p>Date of Receipt  <b>07 / 31 / 2013</b>  <b>Transaction ID : SA11AI.24279</b> </p> <p>Amount of Each Receipt this Period  <b>79.36</b> </p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><b>219.76</b></p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p></p>	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 172 OF 516  
(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**

<b>A. R. SEAN GRAYSON</b> Full Name (Last, First, Middle Initial) Mailing Address 10201 Galena Pointe Drive City Galena State OH Zip Code 43021 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME OH CN 8 Occupation GENERAL COUNSEL Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 740.50			Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2013 <b>Transaction ID : SA11AI.25263</b> Amount of Each Receipt this Period 105.40
<b>B. JONATHAN GREBNER</b> Full Name (Last, First, Middle Initial) Mailing Address 840 Randolph Avenue City Saint Paul State MN Zip Code 55126 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME MN CN 5/CN14 Occupation POLITICAL DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 474.18			Date of Receipt M M / D D / Y Y Y Y Y 07 / 08 / 2013 <b>Transaction ID : SA11AI.24988</b> Amount of Each Receipt this Period 67.74
<b>C. PATRICIA GREEN</b> Full Name (Last, First, Middle Initial) Mailing Address 4031 Executive Park Drive City Harrisburg State PA Zip Code 17111 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 340.62			Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013 <b>Transaction ID : SA11AI.25856</b> Amount of Each Receipt this Period 48.66
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			221.80
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

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

FOR LINE NUMBER: PAGE 173 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. BRUCE GREINER**

Mailing Address 14071 OAKGREEN CIRCLE WEST

City State Zip Code  
 AFTON MN 55001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN RET CHPT 5

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  
 07 / 17 / 2013

Transaction ID : SA11AI.25111

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. JEFFREY R. GRELL**

Mailing Address 4422 Harbin Drive

City State Zip Code  
 Waterloo IA 50701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/DOCS

Occupation

PROBATION/PAROLE OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 03 / 2013

Transaction ID : SA11AI.24691

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. JEFFREY R. GRELL**

Mailing Address 4422 Harbin Drive

City State Zip Code  
 Waterloo IA 50701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/DOCS

Occupation

PROBATION/PAROLE OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 15 / 2013

Transaction ID : SA11AI.24692

Amount of Each Receipt this Period

20.00

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

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

90.00

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

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

FOR LINE NUMBER: PAGE 174 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. JEFFREY R. GRELL**

Mailing Address 4422 Harbin Drive

City

Waterloo

State

IA

Zip Code

50701

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME IA CN 61/DOCS

Occupation

PROBATION/PAROLE OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 07 / 30 / 2013

Transaction ID : SA11AI.24693

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

1073.41

Date of Receipt

 M M / D D / Y Y Y Y Y  
 07 / 15 / 2013

Transaction ID : SA11AI.24174

Amount of Each Receipt this Period

82.57

Full Name (Last, First, Middle Initial)

**C. 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 ▼

1155.98

Date of Receipt

 M M / D D / Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.24175

Amount of Each Receipt this Period

82.57

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

185.14

**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:  
(check only one)

PAGE 175 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. KIMBERLY GRIFFIN</b></p> <p>Mailing Address 2456 Five Fathom Circle</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Woodbridge</td> <td style="width: 33%;">State VA</td> <td style="width: 33%;">Zip Code 22192</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME INT'L</td> <td style="width: 66%;">Occupation ADMINISTRATIVE ASSISTANT II</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">468.78</span></p>			City Woodbridge	State VA	Zip Code 22192	Name of Employer AFSCME INT'L	Occupation ADMINISTRATIVE ASSISTANT II	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">15</span> / <span style="border: 1px solid black; padding: 2px;">2013</span></p> <p><b>Transaction ID : SA11AI.24176</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">36.06</span></p>	
City Woodbridge	State VA	Zip Code 22192							
Name of Employer AFSCME INT'L	Occupation ADMINISTRATIVE ASSISTANT II								
<p>Full Name (Last, First, Middle Initial)  <b>B. KIMBERLY GRIFFIN</b></p> <p>Mailing Address 2456 Five Fathom Circle</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Woodbridge</td> <td style="width: 33%;">State VA</td> <td style="width: 33%;">Zip Code 22192</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME INT'L</td> <td style="width: 66%;">Occupation ADMINISTRATIVE ASSISTANT II</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">504.84</span></p>			City Woodbridge	State VA	Zip Code 22192	Name of Employer AFSCME INT'L	Occupation ADMINISTRATIVE ASSISTANT II	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">31</span> / <span style="border: 1px solid black; padding: 2px;">2013</span></p> <p><b>Transaction ID : SA11AI.24177</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">36.06</span></p>	
City Woodbridge	State VA	Zip Code 22192							
Name of Employer AFSCME INT'L	Occupation ADMINISTRATIVE ASSISTANT II								
<p>Full Name (Last, First, Middle Initial)  <b>C. ALIA GRIFFING</b></p> <p>Mailing Address 1315 Smith Street SE</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Olympia</td> <td style="width: 33%;">State WA</td> <td style="width: 33%;">Zip Code 98501</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME WA CN 28</td> <td style="width: 66%;">Occupation LOBBYIST</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">294.00</span></p>			City Olympia	State WA	Zip Code 98501	Name of Employer AFSCME WA CN 28	Occupation LOBBYIST	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">24</span> / <span style="border: 1px solid black; padding: 2px;">2013</span></p> <p><b>Transaction ID : SA11AI.26035</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">42.00</span></p>	
City Olympia	State WA	Zip Code 98501							
Name of Employer AFSCME WA CN 28	Occupation LOBBYIST								
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">114.12</span>						
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;"></span>						

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 176 OF 516  
(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**

<b>A. SUZANNE L. GRIFFITH</b> Full Name (Last, First, Middle Initial) Mailing Address 10 El Prado Court City Martinez State CA Zip Code 94553 FEC ID number of contributing federal political committee. C Name of Employer AFSCME CA CN 57/SAN MATEO CNTY Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 305.00			Date of Receipt M M / D D / Y Y Y Y Y 07 / 24 / 2013 <b>Transaction ID : SA11AI.24479</b> Amount of Each Receipt this Period 20.00
<b>B. LYLE B GRIMES</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 9432 City Bridge City State LA Zip Code 70096 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation ORGANIZER II Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 431.64			Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24178</b> Amount of Each Receipt this Period 33.34
<b>C. LYLE B GRIMES</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 9432 City Bridge City State LA Zip Code 70096 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation ORGANIZER II Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 464.98			Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24179</b> Amount of Each Receipt this Period 33.34
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			86.68
<b>TOTAL</b> This Period (last page this line number only)..... ▶			



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 177 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. DONALD GRINER</b></p> <p>Mailing Address 1809 Philadelphia Avenue</p> <p>City Northern Cambria State PA Zip Code 15714</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  218.82</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 22 / 2013  <b>Transaction ID : SA11AI.25857</b></p> <p>Amount of Each Receipt this Period  31.26</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. THEODORE RALPH GROENER</b></p> <p>Mailing Address 18709 Madrona Drive</p> <p>City Oregon City State OR Zip Code 97045</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OR CN 75 Occupation POLITICAL COORDINATOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  235.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013  <b>Transaction ID : SA11AI.25792</b></p> <p>Amount of Each Receipt this Period  30.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. OTTO GROENEWALD</b></p> <p>Mailing Address Route 9 Box 154</p> <p>City Bloomfield State IA Zip Code 52537</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME IA CN 61 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  360.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 08 / 2013  <b>Transaction ID : SA11AI.24694</b></p> <p>Amount of Each Receipt this Period  60.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		121.26
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER: PAGE 178 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. DANIEL GROVE

Mailing Address 131 Scanlon Drive

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 ▼

512.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25859

Amount of Each Receipt this Period

73.16

Full Name (Last, First, Middle Initial)

B. CHERYLL E. GROVER

Mailing Address PO BOX 255

City

MARTINEZ

State

CA

Zip Code

94553

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 ▼

284.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 12 / 2013

Transaction ID : SA11AI.24480

Amount of Each Receipt this Period

17.00

Full Name (Last, First, Middle Initial)

C. SHAWN M. GRUBER

Mailing Address 1218 Adams Street

City

Lima

State

OH

Zip Code

45801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 12 / 2013

Transaction ID : SA11AI.25405

Amount of Each Receipt this Period

15.00

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

105.16

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 179 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. SHAWN M. GRUBER**

Mailing Address 1218 Adams Street

City State Zip Code  
 Lima OH 45801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 26 / 2013

Transaction ID : SA11AI.25406

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. PATRICK J. GUERNSEY**

Mailing Address 961 Tuscarora Avenue

City State Zip Code  
 St. Paul MN 55102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/HENNEPIN COUNTY

Occupation

CORRECITONS OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.24991

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. BRIAN E. GUILLAUME**

Mailing Address 3613 Grayhawk Avenue  
 Apt. 103

City State Zip Code  
 Ames IA 50010

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 08 / 2013

Transaction ID : SA11AI.24695

Amount of Each Receipt this Period

30.00

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

75.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 180 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. 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  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 08 / 2013

Transaction ID : SA11AI.25962

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

## **B. LORETTA GUTIERREZ**

Mailing Address 1212 Jefferson St., SE  
Suite 300

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

07 / 10 / 2013

Transaction ID : SA11AI.26036

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **C. LORETTA GUTIERREZ**

Mailing Address 1212 Jefferson St., SE  
Suite 300

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

07 / 25 / 2013

Transaction ID : SA11AI.26037

Amount of Each Receipt this Period

20.00

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

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

80.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 181 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. JOSEPH M GUZYNSKI</b></p> <p>Mailing Address 2543 Cornelia Trail Unit J</p> <p>City Woodbury State MN Zip Code 55125</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 237.84</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24180</b></p> <p>Amount of Each Receipt this Period 59.46</p>
<p>Full Name (Last, First, Middle Initial) <b>B. JOSEPH M GUZYNSKI</b></p> <p>Mailing Address 2543 Cornelia Trail Unit J</p> <p>City Woodbury State MN Zip Code 55125</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 297.30</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24181</b></p> <p>Amount of Each Receipt this Period 59.46</p>
<p>Full Name (Last, First, Middle Initial) <b>C. DERRYL HALL</b></p> <p>Mailing Address 80 Cambridge Drive</p> <p>City Springboro State OH Zip Code 45066</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 298.17</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.25650</b></p> <p>Amount of Each Receipt this Period 28.85</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		147.77
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 182 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. DERRYL HALL**

Mailing Address 80 Cambridge Drive

City State Zip Code  
 Springboro OH 45066

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.02

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 19 / 2013

Transaction ID : SA11AI.25651

Amount of Each Receipt this Period

28.85

Full Name (Last, First, Middle Initial)

**B. JAMES H. HALLER**

Mailing Address 2037 Burch Avenue

City State Zip Code  
 Lima OH 45801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/LIMA CSD

Occupation

CUSTODIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.30

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 19 / 2013

Transaction ID : SA11AI.25652

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

**C. ROGER B. HALLUM**

Mailing Address 5136 Edgeview Road

City State Zip Code  
 Columbus OH 43207

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/HAMILTON - COL

Occupation

BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.69

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 19 / 2013

Transaction ID : SA11AI.25653

Amount of Each Receipt this Period

41.67

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

89.76

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 183 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. TOMIKA C. HALSEY</b></p> <p>Mailing Address 299 Saginaw</p> <p>City State Zip Code Calumet City IL 60409</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L LEAD ORGANIZER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 435.11</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24182</b></p> <p>Amount of Each Receipt this Period 34.03</p>		
<p>Full Name (Last, First, Middle Initial) <b>B. TOMIKA C. HALSEY</b></p> <p>Mailing Address 299 Saginaw</p> <p>City State Zip Code Calumet City IL 60409</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L LEAD ORGANIZER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 469.14</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24183</b></p> <p>Amount of Each Receipt this Period 34.03</p>		
<p>Full Name (Last, First, Middle Initial) <b>C. DAWN HANDY</b></p> <p>Mailing Address 2560 Edmondson Avenue</p> <p>City State Zip Code Baltimore MD 21223</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME MD CN 67 ADMIN ASST./TECH SUPERVISOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 375.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 09 / 2013 <b>Transaction ID : SA11AI.24839</b></p> <p>Amount of Each Receipt this Period 50.00</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>118.06</p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p></p>		

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

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

FOR LINE NUMBER: PAGE 184 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. KEVIN S. HANES</b></p> <p>Mailing Address 176 Thunderwood Drive</p> <p>City State Zip Code Pittsburgh PA 15102</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L COMMUNICATIONS SPECIALIST II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 407.78</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24184</b></p> <p>Amount of Each Receipt this Period 31.38</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. KEVIN S. HANES</b></p> <p>Mailing Address 176 Thunderwood Drive</p> <p>City State Zip Code Pittsburgh PA 15102</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L COMMUNICATIONS SPECIALIST II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 439.16</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24185</b></p> <p>Amount of Each Receipt this Period 31.38</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. EUGINE HANKS</b></p> <p>Mailing Address 296 Churchmans Road</p> <p>City State Zip Code New Castle DE 19720-9930</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME DE CN 81 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 377.29</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 10 / 2013 <b>Transaction ID : SA11AI.24586</b></p> <p>Amount of Each Receipt this Period 52.60</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>115.36</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p></p>	



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

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

FOR LINE NUMBER: PAGE 185 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. INGRID J. HANSEN**

Mailing Address 1609 Langridge Avenue NW

City	State	Zip Code
Olympia	WA	98502

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

HEALTH SVC CNSLTNT III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2013

Transaction ID : SA11AI.26038

Amount of Each Receipt this Period

15.50

Full Name (Last, First, Middle Initial)

**B. INGRID J. HANSEN**

Mailing Address 1609 Langridge Avenue NW

City	State	Zip Code
Olympia	WA	98502

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

HEALTH SVC CNSLTNT III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2013

Transaction ID : SA11AI.26039

Amount of Each Receipt this Period

16.00

Full Name (Last, First, Middle Initial)

**C. RYAN HANSON**

Mailing Address 300 Hardman Avenue South

City	State	Zip Code
South St. Paul	MN	55075

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	08	/	2013

Transaction ID : SA11AI.25000

Amount of Each Receipt this Period

55.52

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

87.02

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

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

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

 FOR LINE NUMBER:  
 (check only one)

PAGE 186 OF 516

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. GRANT L. HARDING**

Mailing Address 39 W. Virginia Avenue

 City  
 Vermilion

 State  
 OH

 Zip Code  
 44089

 FEC ID number of contributing  
 federal political committee.

Name of Employer

AFSCME OH LOC 4/VERMILLION LSD

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	19	/	2013

Transaction ID : SA11AI.25656

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**B. JOYCE HARDING**

Mailing Address 39 W Virginia Avenue

 City  
 Vermillion

 State  
 OH

 Zip Code  
 44089

 FEC ID number of contributing  
 federal political committee.

Name of Employer

AFSCME OH LOC 4/VERMILLION LSD

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	19	/	2013

Transaction ID : SA11AI.25657

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C. GABRIEL HARGROVE**

Mailing Address 4912 Woodlawn Avenue N

 City  
 Seattle

 State  
 WA

 Zip Code  
 98013

 FEC ID number of contributing  
 federal political committee.

Name of Employer

AFSCME WA CN 28

Occupation

COUNCIL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	24	/	2013

Transaction ID : SA11AI.26041

Amount of Each Receipt this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 187 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. MATTIE HARRELL**

Mailing Address 5211 E CHESTNUT AVE

City  
VINELAND

State Zip Code  
NJ 08361

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME NJ CN 71

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.25164

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. STEPHANIE HARRISON**

Mailing Address 1640 Upshur Street NW

City  
Washington

State Zip Code  
DC 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 ▼

820.04

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24190

Amount of Each Receipt this Period

63.08

Full Name (Last, First, Middle Initial)

**C. STEPHANIE HARRISON**

Mailing Address 1640 Upshur Street NW

City  
Washington

State Zip Code  
DC 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 ▼

883.12

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24191

Amount of Each Receipt this Period

63.08

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

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

226.16

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 188 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. MICHAEL HARTEL**

Mailing Address 4531 6th Street

City

Minneapolis

State

MN

Zip Code

55421-2234

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 05 / 2013

Transaction ID : SA11AI.25001

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. MICHAEL HARTEL**

Mailing Address 4531 6th Street

City

Minneapolis

State

MN

Zip Code

55421-2234

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

07 / 31 / 2013

Transaction ID : SA11AI.25002

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. JAMES A. HARTLE**

Mailing Address 3172 Schell Drive

City

Marion

State

OH

Zip Code

43302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

CORRECTION OFFICER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

298.00

Date of Receipt

07 / 12 / 2013

Transaction ID : SA11AI.25413

Amount of Each Receipt this Period

22.00

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

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

122.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 189 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. JAMES A. HARTLE**

Mailing Address 3172 Schell Drive

City

Marion

State

OH

Zip Code

43302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 26 / 2013

Transaction ID : SA11AI.25412

Amount of Each Receipt this Period

22.00

Full Name (Last, First, Middle Initial)

**B. RAYDENE HARWICK**

Mailing Address 2101-27 Hill Road  
Apt. #1

City

Sellersville

State

PA

Zip Code

18960

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.92

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25860

Amount of Each Receipt this Period

62.56

Full Name (Last, First, Middle Initial)

**C. DAVID HASLETT**

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 ▼

334.56

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25861

Amount of Each Receipt this Period

52.80

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

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

137.36

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

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

 FOR LINE NUMBER: PAGE 190 OF 516  
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial) <b>A. MICHAEL D. HATCHER</b>			Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24192</b>		
Mailing Address 1981 Hogback Road			Amount of Each Receipt this Period 46.22		
City Albany	State KY	Zip Code 42602			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME INT'L		Occupation ASSISTANT TO REGIONAL DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.86			
Full Name (Last, First, Middle Initial) <b>B. MICHAEL D. HATCHER</b>			Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24193</b>		
Mailing Address 1981 Hogback Road			Amount of Each Receipt this Period 46.22		
City Albany	State KY	Zip Code 42602			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME INT'L		Occupation ASSISTANT TO REGIONAL DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 647.08			
Full Name (Last, First, Middle Initial) <b>C. KAREN HATHAWAY</b>			Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.24784</b>		
Mailing Address 29 Jenny Lind Street			Amount of Each Receipt this Period 40.46		
City Taunton	State MA	Zip Code 02780-0000			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME MA CN 93		Occupation STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 283.22			
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			132.90		
<b>TOTAL</b> This Period (last page this line number only)..... ▶					

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

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

FOR LINE NUMBER: PAGE 191 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. ALISON HAYGOOD</b></p> <p>Mailing Address 190 W. Ostend Street  Suite 101</p> <p>City Baltimore State MD Zip Code 21230</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  294.56</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 01 / 2013</p> <p><b>Transaction ID : SA11AI.24806</b></p> <p>Amount of Each Receipt this Period  42.08</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. LISA HAZARD</b></p> <p>Mailing Address 4031 Executive Park Drive</p> <p>City Harrisburg State PA Zip Code 17111</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  477.84</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 22 / 2013</p> <p><b>Transaction ID : SA11AI.25862</b></p> <p>Amount of Each Receipt this Period  68.26</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. JIMMIE HEARNS</b></p> <p>Mailing Address 18509 Mendota</p> <p>City Detroit State MI Zip Code 48221</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  470.73</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 02 / 2013</p> <p><b>Transaction ID : SA11AI.24878</b></p> <p>Amount of Each Receipt this Period  36.21</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>146.55</p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER: PAGE 192 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. JIMMIE HEARNS**

Mailing Address 18509 Mendota

City State Zip Code  
 Detroit MI 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 ▼

506.94

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 16 / 2013

Transaction ID : SA11AI.24877

Amount of Each Receipt this Period

36.21

Full Name (Last, First, Middle Initial)

## **B. ANDREA HELM**

Mailing Address 619 S. Main Street

City State Zip Code  
 New Castle IN 47362

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IN CN 62

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 02 / 2013

Transaction ID : SA11AI.24770

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

## **C. RENITA L. HELTON**

Mailing Address 2025 W Galbraith Road  
 Apt. E

City State Zip Code  
 Cincinnati OH 45239

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

SECRETARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 12 / 2013

Transaction ID : SA11AI.25416

Amount of Each Receipt this Period

16.00

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

92.21

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



X	11a		11b		11c		12		
	13		14		15		16		17

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

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466	467	468	469	470	471	472	473	474	475	476	477	478	479	480	481	482	483	484	485	486	487	488	489	490	491	492	493	494	495	496	497	498	499	500	501	502	503	504	505	506	507	508	509	510	511	512	513	514	515	516	517	518	519	520	521	522	523	52
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**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 194 OF 516

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. KAY HENDERSON**

Mailing Address 624 S. Winnifred Street

City	State	Zip Code
Tacoma	WA	98465

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2013

Transaction ID : SA11AI.26044

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**B. KAY HENDERSON**

Mailing Address 624 S. Winnifred Street

City	State	Zip Code
Tacoma	WA	98465

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2013

Transaction ID : SA11AI.26043

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**C. ROBERT HENDERSON**

Mailing Address 4320 NW Second Avenue

City	State	Zip Code
Des Moines	IA	50313

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/DOCS

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	03	/	2013

Transaction ID : SA11AI.24696

Amount of Each Receipt this Period

16.00

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

86.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 195 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. ROBERT HENDERSON**

Mailing Address 4320 NW Second Avenue

City

Des Moines

State

IA

Zip Code

50313

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/DOCS

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

07 / 15 / 2013

Transaction ID : SA11AI.24697

Amount of Each Receipt this Period

16.00

Full Name (Last, First, Middle Initial)

**B. ROBERT HENDERSON**

Mailing Address 4320 NW Second Avenue

City

Des Moines

State

IA

Zip Code

50313

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/DOCS

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

07 / 30 / 2013

Transaction ID : SA11AI.24698

Amount of Each Receipt this Period

16.00

Full Name (Last, First, Middle Initial)

**C. TIMOTHY HENDERSON**

Mailing Address 6987 W. Shadow Lake Drive

City

Lino Lakes

State

MN

Zip Code

55014-1931

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.13

Date of Receipt

07 / 08 / 2013

Transaction ID : SA11AI.25007

Amount of Each Receipt this Period

48.72

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

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

80.72

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

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

FOR LINE NUMBER: PAGE 196 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. MONIQUE L. HENNAGAN</b></p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013  <b>Transaction ID : SA11AI.24194</b></p>		
<p>Mailing Address 505 Winter View Way</p>			<p>Amount of Each Receipt this Period  21.84</p>		
<p>City Stockbridge</p>	<p>State GA</p>	<p>Zip Code 30281</p>			
<p>FEC ID number of contributing federal political committee.  C</p>					
<p>Name of Employer AFSCME INT'L</p>		<p>Occupation ORGANIZER</p>			
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>		<p>Aggregate Year-to-Date ▼  283.92</p>			
<p>Full Name (Last, First, Middle Initial)  <b>B. MONIQUE L. HENNAGAN</b></p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013  <b>Transaction ID : SA11AI.24195</b></p>		
<p>Mailing Address 505 Winter View Way</p>			<p>Amount of Each Receipt this Period  21.84</p>		
<p>City Stockbridge</p>	<p>State GA</p>	<p>Zip Code 30281</p>			
<p>FEC ID number of contributing federal political committee.  C</p>					
<p>Name of Employer AFSCME INT'L</p>		<p>Occupation ORGANIZER</p>			
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>		<p>Aggregate Year-to-Date ▼  305.76</p>			
<p>Full Name (Last, First, Middle Initial)  <b>C. JOYCE L. HENNING</b></p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 17 / 2013  <b>Transaction ID : SA11AI.25264</b></p>		
<p>Mailing Address 885 W Webb Road</p>			<p>Amount of Each Receipt this Period  9.62</p>		
<p>City Mineral Ridge</p>	<p>State OH</p>	<p>Zip Code 44440</p>			
<p>FEC ID number of contributing federal political committee.  C</p>					
<p>Name of Employer AFSCME OH CN 8/WARREN OH RH</p>		<p>Occupation STAFF REPRESENTATIVE</p>			
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>		<p>Aggregate Year-to-Date ▼  311.68</p>			
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>53.30</p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					

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

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

FOR LINE NUMBER: PAGE 197 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. JOYCE L. HENNING</b></p> <p>Mailing Address 885 W Webb Road</p> <p>City State Zip Code  Mineral Ridge OH 44440</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME OH CN 8/WARREN OH RH STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  321.30</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 22 / 2013</p> <p><b>Transaction ID : SA11AI.25265</b></p> <p>Amount of Each Receipt this Period  9.62</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. SUSAN R. HENRICKSEN</b></p> <p>Mailing Address 16511 193rd Avenue E</p> <p>City State Zip Code  Bonney Lake WA 98391</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  288.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 10 / 2013</p> <p><b>Transaction ID : SA11AI.26046</b></p> <p>Amount of Each Receipt this Period  21.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. SUSAN R. HENRICKSEN</b></p> <p>Mailing Address 16511 193rd Avenue E</p> <p>City State Zip Code  Bonney Lake WA 98391</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  309.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 25 / 2013</p> <p><b>Transaction ID : SA11AI.26045</b></p> <p>Amount of Each Receipt this Period  21.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>51.62</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 198 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. MICHELLE C. HENRY</b></p> <p>Mailing Address 5614 S 147th Street</p> <p>City State Zip Code Tukwila WA 98168</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WA CN 28/COMM COLLEGE STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2013</p> <p>Transaction ID : SA11AI.26047</p> <p>Amount of Each Receipt this Period 15.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. RICK HENSON</b></p> <p>Mailing Address 317 South F Street</p> <p>City State Zip Code Springfield OR 97477</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OR CN 75 COUNCIL REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 270.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013</p> <p>Transaction ID : SA11AI.25793</p> <p>Amount of Each Receipt this Period 15.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. EMERALD HERNANDEZ</b></p> <p>Mailing Address 1542 Presidential Dr.</p> <p>City State Zip Code Columbus OH 46212</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 11 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 600.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013</p> <p>Transaction ID : SA11AI.25417</p> <p>Amount of Each Receipt this Period 80.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>110.00</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p></p>	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 199 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. EMERALD HERNANDEZ</b></p> <p>Mailing Address 1542 Presidential Dr.</p> <p>City State Zip Code  Columbus OH 46212</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME OH LOC 11 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  680.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 30 / 2013</p> <p><b>Transaction ID : SA11AI.25418</b></p> <p>Amount of Each Receipt this Period  80.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. ERIC D. HERTZOG</b></p> <p>Mailing Address 141 174th Street E.</p> <p>City State Zip Code  Spanaway WA 98387</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  351.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 10 / 2013</p> <p><b>Transaction ID : SA11AI.26051</b></p> <p>Amount of Each Receipt this Period  27.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. ERIC D. HERTZOG</b></p> <p>Mailing Address 141 174th Street E.</p> <p>City State Zip Code  Spanaway WA 98387</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  378.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 25 / 2013</p> <p><b>Transaction ID : SA11AI.26050</b></p> <p>Amount of Each Receipt this Period  27.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>134.00</p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER: PAGE 200 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. JOHANNA P HESTER**

Mailing Address 805 Glen Drive

City State Zip Code  
San Leandro CA 94577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INTERNATIONAL

Occupation

Lead Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 23 / 2013

Transaction ID : SA11AI.24540

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. JOHANNA P HESTER**

Mailing Address 805 Glen Drive

City State Zip Code  
San Leandro CA 94577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INTERNATIONAL

Occupation

Lead Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24539

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. VALENTINO HICE**

Mailing Address 10415 202ND AVE E

City State Zip Code  
BONNEY LAKE WA 98391

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2013

Transaction ID : SA11AI.26053

Amount of Each Receipt this Period

50.00

**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:  
(check only one)

PAGE 201 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. VALENTINO HICE**

Mailing Address 10415 202ND AVE E

City State Zip Code  
BONNEY LAKE WA 98391

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WA CN 28/STATE OF WA

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 25 / 2013

Transaction ID : SA11AI.26052

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. DENNIS HILL**

Mailing Address 4 Hickory Street

City State Zip Code  
Farmington MN 55024-9124

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MN CN 5/STATE OF MN

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 05 / 2013

Transaction ID : SA11AI.25008

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. DENNIS HILL**

Mailing Address 4 Hickory Street

City State Zip Code  
Farmington MN 55024-9124

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MN CN 5/STATE OF MN

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.25009

Amount of Each Receipt this Period

100.00

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

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

250.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 202 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. DONALD J. HILL**

Mailing Address 2382 Krumroy Road

City State Zip Code  
Akron OH 44312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4/SPRINGFIELD SD

Occupation  
CUSTODIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25660

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. DONALD J. HILL**

Mailing Address 2382 Krumroy Road

City State Zip Code  
Akron OH 44312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4/SPRINGFIELD SD

Occupation  
CUSTODIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25659

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. KEVIN E. HILL**

Mailing Address 541 Coconut Street

City State Zip Code  
Satellite Beach FL 32937

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation  
ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

673.01

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24200

Amount of Each Receipt this Period

51.77

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

101.77

**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 203 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. KEVIN E. HILL</b></p> <p>Mailing Address 541 Coconut Street</p> <p>City State Zip Code Satellite Beach FL 32937</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L ORGANIZER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 726.20</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24201</b></p> <p>Amount of Each Receipt this Period 53.19</p>
<p>Full Name (Last, First, Middle Initial) <b>B. SHEILA I HILL</b></p> <p>Mailing Address 190 W. Ostend Street Suite 101</p> <p>City State Zip Code Baltimore MD 21230</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME MD CN 982 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 385.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2013 <b>Transaction ID : SA11AI.24807</b></p> <p>Amount of Each Receipt this Period 45.00</p>
<p>Full Name (Last, First, Middle Initial) <b>C. SHEILA I HILL</b></p> <p>Mailing Address 190 W. Ostend Street Suite 101</p> <p>City State Zip Code Baltimore MD 21230</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME MD CN 982 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 399.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24808</b></p> <p>Amount of Each Receipt this Period 14.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p> <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		<p>112.19</p>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 204 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. TRACY A. HILL</b></p> <p>Mailing Address 2382 Krumroy Road</p> <p>City Akron State OH Zip Code 44312</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 4/SPRINGFIELD SD Occupation TEACHER AIDE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 300.00</p>			<p>Date of Receipt  <b>07 / 02 / 2013</b>  <b>Transaction ID : SA11AI.25662</b> </p> <p>Amount of Each Receipt this Period            25.00         </p>	
<p>Full Name (Last, First, Middle Initial) <b>B. TRACY A. HILL</b></p> <p>Mailing Address 2382 Krumroy Road</p> <p>City Akron State OH Zip Code 44312</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 4/SPRINGFIELD SD Occupation TEACHER AIDE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 325.00</p>			<p>Date of Receipt  <b>07 / 19 / 2013</b>  <b>Transaction ID : SA11AI.25661</b> </p> <p>Amount of Each Receipt this Period            25.00         </p>	
<p>Full Name (Last, First, Middle Initial) <b>C. DANNY HINDE</b></p> <p>Mailing Address 612 4th Avenue NE</p> <p>City Independence State IA Zip Code 50644</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME IA CN 61/STATE OF IA Occupation RTT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 280.00</p>			<p>Date of Receipt  <b>07 / 12 / 2013</b>  <b>Transaction ID : SA11AI.24699</b> </p> <p>Amount of Each Receipt this Period            20.00         </p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			70.00	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 205 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. DANNY HINDE**

Mailing Address 612 4th Avenue NE

City State Zip Code  
Independence IA 50644

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IA CN 61/STATE OF IA

Occupation  
RTT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 23 / 2013

**Transaction ID : SA11AI.24700**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **B. SEAN HINGA**

Mailing Address 3137 Fulton Street

City State Zip Code  
Denver CO 80238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation  
POLITICAL ACTION REPRESENTATIVE III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.77

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

**Transaction ID : SA11AI.24202**

Amount of Each Receipt this Period

41.03

Full Name (Last, First, Middle Initial)

## **C. SEAN HINGA**

Mailing Address 3137 Fulton Street

City State Zip Code  
Denver CO 80238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME INT'L

Occupation  
POLITICAL ACTION REPRESENTATIVE III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.80

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

**Transaction ID : SA11AI.24203**

Amount of Each Receipt this Period

41.03

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

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

102.06

X	11a		11b		11c		12		
	13		14		15		16		17

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

[illegible]

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

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

FOR LINE NUMBER: PAGE 207 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. 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 ▼

652.68

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24205

Amount of Each Receipt this Period

46.62

Full Name (Last, First, Middle Initial)

**B. JENNY HO**

Mailing Address 10111 Ebershire Court

City

Oakton

State

VA

Zip Code

22124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

LABOR ECONOMIST I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.66

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24206

Amount of Each Receipt this Period

30.54

Full Name (Last, First, Middle Initial)

**C. JENNY HO**

Mailing Address 10111 Ebershire Court

City

Oakton

State

VA

Zip Code

22124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

LABOR ECONOMIST I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.20

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24207

Amount of Each Receipt this Period

30.54

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

107.70

**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 208 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. 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 ▼

512.12

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25865

Amount of Each Receipt this Period

73.16

Full Name (Last, First, Middle Initial)

**B. DONNA L. HOFLAND**

Mailing Address 4032 Division Avenue W

City

Bremerton

State

WA

Zip Code

98312

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

SUPPLY OFFICE I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2013

Transaction ID : SA11AI.26055

Amount of Each Receipt this Period

23.00

Full Name (Last, First, Middle Initial)

**C. DONNA L. HOFLAND**

Mailing Address 4032 Division Avenue W

City

Bremerton

State

WA

Zip Code

98312

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

SUPPLY OFFICE I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 25 / 2013

Transaction ID : SA11AI.26054

Amount of Each Receipt this Period

23.00

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

119.16

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 209 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. MARY J. HOGAN**

Mailing Address P.O. Box 65262

City

Tacoma

State

WA

Zip Code

98464

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

LPN I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 25 / 2013

Transaction ID : SA11AI.26056

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. JENNIFER E. HOHMAN**

Mailing Address 1710 Shadyside Drive

City

Edgewater

State

MD

Zip Code

21037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, BENEFITS

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

510.90

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24208

Amount of Each Receipt this Period

39.30

Full Name (Last, First, Middle Initial)

**C. JENNIFER E. HOHMAN**

Mailing Address 1710 Shadyside Drive

City

Edgewater

State

MD

Zip Code

21037

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, BENEFITS

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

550.20

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24209

Amount of Each Receipt this Period

39.30

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

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

93.60

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

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

FOR LINE NUMBER: PAGE 210 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. CHRISTINE D. HOLLAND**

Mailing Address 29332 Kearsley Road

City

Millbury

State

OH

Zip Code

43447

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 4/OREGON BOE

Occupation

SECRETARY

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

331.69

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013

Transaction ID : SA11AI.25664

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

**B. HENRY L HOLLIS Jr.**

Mailing Address 10906 Capstan Lake Drive

City

Riverview

State

FL

Zip Code

33579

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 ▼

201.53

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2013

Transaction ID : SA11AI.24210

Amount of Each Receipt this Period

17.06

Full Name (Last, First, Middle Initial)

**C. HENRY L HOLLIS Jr.**

Mailing Address 10906 Capstan Lake Drive

City

Riverview

State

FL

Zip Code

33579

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 ▼

221.03

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.24211

Amount of Each Receipt this Period

19.50

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

78.23

**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 211 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. SYLVIA E. HOLMES**

Mailing Address 958 Sodom Hutchings Road SE

City State Zip Code  
Vienna OH 44473

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/GIRARD CSD

Occupation

SECRETARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.82

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25681

Amount of Each Receipt this Period

9.62

Full Name (Last, First, Middle Initial)

**B. SYLVIA E. HOLMES**

Mailing Address 958 Sodom Hutchings Road SE

City State Zip Code  
Vienna OH 44473

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/GIRARD CSD

Occupation

SECRETARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.44

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25682

Amount of Each Receipt this Period

9.62

Full Name (Last, First, Middle Initial)

**C. THOMAS M. HOLSINGER**

Mailing Address 1014 Franklin Street

City State Zip Code  
Roaring Spring PA 16673

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME PA CN 13/STATE OF PA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.25866

Amount of Each Receipt this Period

15.00

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

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

34.24

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

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

FOR LINE NUMBER: PAGE 212 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. DANNY J. HOMAN**

Mailing Address 4320 NW Second Avenue

City State Zip Code  
Des Moines IA 50313

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

980.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 08 / 2013

Transaction ID : SA11AI.24701

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**B. DANNY J. HOMAN**

Mailing Address 4320 NW Second Avenue

City State Zip Code  
Des Moines IA 50313

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24702

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

**C. JOHN D. HORN**

Mailing Address 8615 Maineville Road

City State Zip Code  
Maineville OH 45039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.64

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25684

Amount of Each Receipt this Period

33.00

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

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

183.00

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

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

FOR LINE NUMBER: PAGE 213 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. JOHN D. HORN**

Mailing Address 8615 Maineville Road

City State Zip Code  
Maineville OH 45039

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.64

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25683

Amount of Each Receipt this Period

33.00

Full Name (Last, First, Middle Initial)

**B. TIMOTHY M. HOSHAL**

Mailing Address P.O. Box 239

City State Zip Code  
Coleraine MN 55722

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 65

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

513.06

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 05 / 2013

Transaction ID : SA11AI.25116

Amount of Each Receipt this Period

72.26

Full Name (Last, First, Middle Initial)

**C. CHRISTINE R HOSKINS**

Mailing Address 8306 James Street

City State Zip Code  
Upper Marlboro MD 20772

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AFFILIATE RELATIONS COORDINATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.47

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24212

Amount of Each Receipt this Period

41.19

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

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

146.45

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

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

FOR LINE NUMBER: PAGE 214 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<b>A. CHRISTINE R HOSKINS</b> Full Name (Last, First, Middle Initial) Mailing Address 8306 James Street City State Zip Code Upper Marlboro MD 20772 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation AFSCME INT'L AFFILIATE RELATIONS COORDINATOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>576.66</b>			Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24213</b> Amount of Each Receipt this Period <b>41.19</b>	
<b>B. DENNIS HOULIHAN</b> Full Name (Last, First, Middle Initial) Mailing Address 1744 Church Street NW City State Zip Code Washington DC 20036 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation AFSCME INT'L LABOR ECONOMIST III Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>530.75</b>			Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24214</b> Amount of Each Receipt this Period <b>48.25</b>	
<b>C. DENNIS HOULIHAN</b> Full Name (Last, First, Middle Initial) Mailing Address 1744 Church Street NW City State Zip Code Washington DC 20036 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation AFSCME INT'L LABOR ECONOMIST III Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>579.00</b>			Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24215</b> Amount of Each Receipt this Period <b>48.25</b>	
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			<b>137.69</b>	
<b>TOTAL</b> This Period (last page this line number only)..... ▶				

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

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

FOR LINE NUMBER: PAGE 215 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. BRITTNEY HOWARD**

Mailing Address 6800 N High Street

City

Worthington

State

OH

Zip Code

43085

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 ▼

297.11

Date of Receipt

07 / 01 / 2013

Transaction ID : SA11AI.25266

Amount of Each Receipt this Period

50.94

Full Name (Last, First, Middle Initial)

**B. MARQUETTA L. HOWARD**

Mailing Address 6662 Bennell Drive

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

OFFICE ASSISTANT I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

07 / 12 / 2013

Transaction ID : SA11AI.25426

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. MARQUETTA L. HOWARD**

Mailing Address 6662 Bennell Drive

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

OFFICE ASSISTANT I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

07 / 26 / 2013

Transaction ID : SA11AI.25425

Amount of Each Receipt this Period

15.00

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

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

80.94

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

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

FOR LINE NUMBER: PAGE 216 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. ROBERT J. HUBBARD</b></p> <p>Mailing Address 55 Pioneer Road</p> <p>City Weiser State ID Zip Code 83672</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OR CN 75/STATE OF OR Occupation SECURITY GUARD</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 280.00</p>			<p>Date of Receipt  <b>07 / 31 / 2013</b>  <b>Transaction ID : SA11AI.25796</b>            Amount of Each Receipt this Period 40.00         </p>		
<p>Full Name (Last, First, Middle Initial) <b>B. ELIZABETH K. HUFFMAN</b></p> <p>Mailing Address 7429 Inman Ave South</p> <p>City Cottage Grove State MN Zip Code 55016</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation FIELD OFFICE ASSISTANT I</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 228.41</p>			<p>Date of Receipt  <b>07 / 15 / 2013</b>  <b>Transaction ID : SA11AI.24216</b>            Amount of Each Receipt this Period 18.16         </p>		
<p>Full Name (Last, First, Middle Initial) <b>C. ELIZABETH K. HUFFMAN</b></p> <p>Mailing Address 7429 Inman Ave South</p> <p>City Cottage Grove State MN Zip Code 55016</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation FIELD OFFICE ASSISTANT I</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 246.57</p>			<p>Date of Receipt  <b>07 / 31 / 2013</b>  <b>Transaction ID : SA11AI.24217</b>            Amount of Each Receipt this Period 18.16         </p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>76.32</p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					



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

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

FOR LINE NUMBER: PAGE 217 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. **SAMUEL M. HUGGINS**

Mailing Address 235 Scenic Hill Drive

City

Carnegie

State

PA

Zip Code

15106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

REGIONAL FIELD ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

436.67

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24219

Amount of Each Receipt this Period

33.59

Full Name (Last, First, Middle Initial)

B. **SAMUEL M. HUGGINS**

Mailing Address 235 Scenic Hill Drive

City

Carnegie

State

PA

Zip Code

15106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

REGIONAL FIELD ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.26

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24218

Amount of Each Receipt this Period

33.59

Full Name (Last, First, Middle Initial)

C. **JACK E. HUGHES**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 ▼

373.38

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2013

Transaction ID : SA11AI.24809

Amount of Each Receipt this Period

53.34

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

120.52

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 218 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. JEFFREY HUGHES</b></p> <p>Mailing Address 190 W. Ostend Street Suite 101</p> <p>City Baltimore State MD Zip Code 21230</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 415.38</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2013 <b>Transaction ID : SA11AI.24810</b></p> <p>Amount of Each Receipt this Period 59.34</p>
<p>Full Name (Last, First, Middle Initial) <b>B. CHUNG HUI</b></p> <p>Mailing Address 21235 Bunyan Circle</p> <p>City Germantown State MD Zip Code 20876</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation POLITICAL FINANCE COORDINATOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 563.03</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24220</b></p> <p>Amount of Each Receipt this Period 43.31</p>
<p>Full Name (Last, First, Middle Initial) <b>C. CHUNG HUI</b></p> <p>Mailing Address 21235 Bunyan Circle</p> <p>City Germantown State MD Zip Code 20876</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation POLITICAL FINANCE COORDINATOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 606.34</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24221</b></p> <p>Amount of Each Receipt this Period 43.31</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		145.96
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 219 OF 516

(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 P E O P L E

Full Name (Last, First, Middle Initial)

A. DAWN M. HUNLEY

Mailing Address 215 Grover Street

City

Nelsonville

State

OH

Zip Code

45764

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

ODJFS CUSTOMER REP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		1	2		2	0	1	3		

Transaction ID : SA11AI.25428

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. DAWN M. HUNLEY

Mailing Address 215 Grover Street

City

Nelsonville

State

OH

Zip Code

45764

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

ODJFS CUSTOMER REP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		2	6		2	0	1	3		

Transaction ID : SA11AI.25427

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. MICHELLE R. HUNTER

Mailing Address 436 S. Kilmer Street

City

Dayton

State

OH

Zip Code

45408

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

THERAPUTIC PROGRAM TECH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		1	2		2	0	1	3		

Transaction ID : SA11AI.25429

Amount of Each Receipt this Period

16.00

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

46.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 220 OF 516

<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**

<b>A. MICHELLE R. HUNTER</b> Full Name (Last, First, Middle Initial) Mailing Address 436 S. Kilmer Street City Dayton State OH Zip Code 45408 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation THERAPUTIC PROGRAM TECH Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00			Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2013 <b>Transaction ID : SA11AI.25430</b> Amount of Each Receipt this Period 16.00
<b>B. WILLIAM S. HURLOW</b> Full Name (Last, First, Middle Initial) Mailing Address 4805 Monnett Chapel Road City Galion State OH Zip Code 44833 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4/GALION BOE Occupation CUSTODIAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 290.08			Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.25686</b> Amount of Each Receipt this Period 20.84
<b>C. WILLIAM S. HURLOW</b> Full Name (Last, First, Middle Initial) Mailing Address 4805 Monnett Chapel Road City Galion State OH Zip Code 44833 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4/GALION BOE Occupation CUSTODIAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 310.92			Date of Receipt M M / D D / Y Y Y Y Y 07 / 19 / 2013 <b>Transaction ID : SA11AI.25685</b> Amount of Each Receipt this Period 20.84
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			57.68
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

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

FOR LINE NUMBER: PAGE 221 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. CARLA INSINGA-MINSER</b></p> <p>Mailing Address 4287 South Carolina Drive</p> <p>City State Zip Code Blue Ridge PA 17112</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME PA CN 13 ORGANIZING DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 736.35</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013 <b>Transaction ID : SA11AI.25868</b></p> <p>Amount of Each Receipt this Period 147.27</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. WILLIAM ISLER</b></p> <p>Mailing Address 7708 Quest Lane</p> <p>City State Zip Code Bowie MD 20720</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L MANAGER, GENERAL SERVICES</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 557.05</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24222</b></p> <p>Amount of Each Receipt this Period 42.85</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. WILLIAM ISLER</b></p> <p>Mailing Address 7708 Quest Lane</p> <p>City State Zip Code Bowie MD 20720</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L MANAGER, GENERAL SERVICES</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 599.90</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24223</b></p> <p>Amount of Each Receipt this Period 42.85</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>232.97</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER: PAGE 222 OF 516

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. ALBERT JACKSON**

Mailing Address 3690 Orange Place  
Suite 550

City	State	Zip Code
Beachwood	OH	44122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.78

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25688

Amount of Each Receipt this Period

34.62

Full Name (Last, First, Middle Initial)

**B. ALBERT JACKSON**

Mailing Address 3690 Orange Place  
Suite 550

City	State	Zip Code
Beachwood	OH	44122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.40

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25687

Amount of Each Receipt this Period

34.62

Full Name (Last, First, Middle Initial)

**C. CEOLA JACKSON**

Mailing Address P.O. Box 67

City	State	Zip Code
Richmond	MO	64085

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 ▼

209.72

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24224

Amount of Each Receipt this Period

28.34

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

97.58

**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 223 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. CEOLA JACKSON**

Mailing Address P.O. Box 67

City State Zip Code  
Richmond MO 64085

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 ▼

238.06

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24225

Amount of Each Receipt this Period

28.34

Full Name (Last, First, Middle Initial)

**B. GRETA JACKSON**

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 ▼

334.32

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2013

Transaction ID : SA11AI.24811

Amount of Each Receipt this Period

48.06

Full Name (Last, First, Middle Initial)

**C. JUSTUS JAMES**

Mailing Address 1705 Platt Court

City State Zip Code  
Allentown PA 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 ▼

473.90

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25869

Amount of Each Receipt this Period

67.70

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

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

144.10

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 224 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. STEVEN E. JAMES**

Mailing Address 2044 Kensington Street

City

Harrisburg

State

PA

Zip Code

17104-1924

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME PA CN 13/STATE OF PA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.25870

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. 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  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

745.94

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24226

Amount of Each Receipt this Period

57.38

Full Name (Last, First, Middle Initial)

**C. 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  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

803.32

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24227

Amount of Each Receipt this Period

57.38

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

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

154.76



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

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

FOR LINE NUMBER: PAGE 225 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. PAMELA L. JENKINS**

Mailing Address 47604 Sandbank Square

City State Zip Code  
 Potomac Falls VA 20165

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

SPECIAL ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.34

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 15 / 2013

Transaction ID : SA11AI.24228

Amount of Each Receipt this Period

58.18

Full Name (Last, First, Middle Initial)

**B. PAMELA L. JENKINS**

Mailing Address 47604 Sandbank Square

City State Zip Code  
 Potomac Falls VA 20165

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

SPECIAL ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

814.52

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.24229

Amount of Each Receipt this Period

58.18

Full Name (Last, First, Middle Initial)

**C. BRIAN JENNINGS**

Mailing Address 1104 26th Street

City State Zip Code  
 Des Moines IA 50311

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 08 / 2013

Transaction ID : SA11AI.24703

Amount of Each Receipt this Period

48.00

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

164.36

**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 226 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<b>A. FRANK X. JEREZ</b> Full Name (Last, First, Middle Initial) Mailing Address 94 Karatzas Avenue City Manchester State NH Zip Code 03014-0000 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation FIELD COORDINATOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 557.05			Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24230</b> Amount of Each Receipt this Period 42.85
<b>B. FRANK X. JEREZ</b> Full Name (Last, First, Middle Initial) Mailing Address 94 Karatzas Avenue City Manchester State NH Zip Code 03014-0000 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation FIELD COORDINATOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 601.07			Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24231</b> Amount of Each Receipt this Period 44.02
<b>C. HELEN J. JOHNSON</b> Full Name (Last, First, Middle Initial) Mailing Address 837 Koebel Avenue City Columbus State OH Zip Code 43207 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 267.68			Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2013 <b>Transaction ID : SA11AI.25267</b> Amount of Each Receipt this Period 35.82
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			122.69
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

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

FOR LINE NUMBER: PAGE 227 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. SETH M JOHNSON</b></p> <p>Mailing Address 2415 20th Street, NW #28</p> <p>City Washington State DC Zip Code 20009</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer AFSCME INTL' Occupation Assitant Director Political Action</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1366.26</span> </p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">15</span> / <span style="border: 1px solid black; padding: 2px;">2013</span> </p> <p><b>Transaction ID : SA11AI.24232</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">105.82</span> </p>	
<p>Full Name (Last, First, Middle Initial) <b>B. SETH M JOHNSON</b></p> <p>Mailing Address 2415 20th Street, NW #28</p> <p>City Washington State DC Zip Code 20009</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer AFSCME INTL' Occupation Assitant Director Political Action</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1472.08</span> </p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">31</span> / <span style="border: 1px solid black; padding: 2px;">2013</span> </p> <p><b>Transaction ID : SA11AI.24233</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">105.82</span> </p>	
<p>Full Name (Last, First, Middle Initial) <b>C. TERRA F. JOHNSON</b></p> <p>Mailing Address 807 Nome Avenue</p> <p>City Akron State OH Zip Code 44320</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer AFSCME OH LOC 4/AKRON SUMMIT Occupation TEACHER AIDE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">315.84</span> </p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">02</span> / <span style="border: 1px solid black; padding: 2px;">2013</span> </p> <p><b>Transaction ID : SA11AI.25689</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">26.32</span> </p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">237.96</span>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;"></span>	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 228 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. TYWANNA JOHNSON</b></p> <p>Mailing Address 76 White Street</p> <p>City State Zip Code  Hartford CT 06114-0000</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME CT CN 4/STATE OF CT STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  233.80</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 03 / 2013</p> <p><b>Transaction ID : SA11AI.24562</b></p> <p>Amount of Each Receipt this Period  16.70</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. TYWANNA JOHNSON</b></p> <p>Mailing Address 76 White Street</p> <p>City State Zip Code  Hartford CT 06114-0000</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME CT CN 4/STATE OF CT STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  250.50</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013</p> <p><b>Transaction ID : SA11AI.24561</b></p> <p>Amount of Each Receipt this Period  16.70</p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. TYWANNA JOHNSON</b></p> <p>Mailing Address 76 White Street</p> <p>City State Zip Code  Hartford CT 06114-0000</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME CT CN 4/STATE OF CT STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  267.20</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 30 / 2013</p> <p><b>Transaction ID : SA11AI.24560</b></p> <p>Amount of Each Receipt this Period  16.70</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>50.10</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER: PAGE 229 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. 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 ▼

378.56

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.24882

Amount of Each Receipt this Period

29.12

Full Name (Last, First, Middle Initial)

B. 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 ▼

407.68

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2013

Transaction ID : SA11AI.24881

Amount of Each Receipt this Period

29.12

Full Name (Last, First, Middle Initial)

C. JOANN JOHNTONY

Mailing Address 973 Shannon Road

City

Girard

State

OH

Zip Code

44420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/GIRARD CSD

Occupation

HEAD CUSTODIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.88

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25690

Amount of Each Receipt this Period

19.24

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

77.48

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:  
(check only one)

PAGE 230 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. JOANN JOHNTONY</b></p> <p>Mailing Address 973 Shannon Road</p> <p>City State Zip Code          Girard OH 44420</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME OH LOC 4/GIRARD CSD HEAD CUSTODIAN</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          290.12</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 19 / 2013</p> <p><b>Transaction ID : SA11AI.25691</b></p> <p>Amount of Each Receipt this Period          19.24</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. GERARD P. JOLLY</b></p> <p>Mailing Address 2107 Twin Flower Circle</p> <p>City State Zip Code          Grove City OH 43123</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME OH LOC 11/STATE OF OH FISCAL SPECIALIST I</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          415.00</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 12 / 2013</p> <p><b>Transaction ID : SA11AI.25444</b></p> <p>Amount of Each Receipt this Period          30.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. GERARD P. JOLLY</b></p> <p>Mailing Address 2107 Twin Flower Circle</p> <p>City State Zip Code          Grove City OH 43123</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME OH LOC 11/STATE OF OH FISCAL SPECIALIST I</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          445.00</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 26 / 2013</p> <p><b>Transaction ID : SA11AI.25443</b></p> <p>Amount of Each Receipt this Period          30.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			79.24	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 231 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. ANTHONY JONES**

Mailing Address 3240 Windwood Place NE

City Olympia State WA Zip Code 98506

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

COUNCIL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

07 / 24 / 2013

Transaction ID : SA11AI.26062

Amount of Each Receipt this Period

33.00

Full Name (Last, First, Middle Initial)

**B. GERALD E. JONES**

Mailing Address 4320 NW Second Avenue

City Des Moines State IA Zip Code 50313

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

07 / 12 / 2013

Transaction ID : SA11AI.24704

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. GERALD E. JONES**

Mailing Address 4320 NW Second Avenue

City Des Moines State IA Zip Code 50313

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

07 / 23 / 2013

Transaction ID : SA11AI.24705

Amount of Each Receipt this Period

40.00

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

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

113.00

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

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 232 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. JACQUELYN P. JONES</b></p> <p>Mailing Address 190 W. Ostend Street  Suite 101</p> <p>City Baltimore State MD Zip Code 21230</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  315.00</p>		<p>Date of Receipt  M M M / D D D / Y Y Y Y Y Y  07 / 01 / 2013</p> <p><b>Transaction ID : SA11AI.24812</b></p> <p>Amount of Each Receipt this Period  45.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. MICHAEL J. JONES</b></p> <p>Mailing Address 390 Worthington Road</p> <p>City Westerville State OH Zip Code 43082</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 11 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  510.00</p>		<p>Date of Receipt  M M M / D D D / Y Y Y Y Y Y  07 / 02 / 2013</p> <p><b>Transaction ID : SA11AI.25450</b></p> <p>Amount of Each Receipt this Period  68.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. MICHAEL J. JONES</b></p> <p>Mailing Address 390 Worthington Road</p> <p>City Westerville State OH Zip Code 43082</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 11 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  578.00</p>		<p>Date of Receipt  M M M / D D D / Y Y Y Y Y Y  07 / 30 / 2013</p> <p><b>Transaction ID : SA11AI.25451</b></p> <p>Amount of Each Receipt this Period  68.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		181.00
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		



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

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

FOR LINE NUMBER: PAGE 233 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. TOAYIA JONES**

Mailing Address 7571 Bayview Club Drive  
Apt. 2D

City State Zip Code  
Indianapolis IN 46250

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.78

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24234

Amount of Each Receipt this Period

27.06

Full Name (Last, First, Middle Initial)

## **B. TOAYIA JONES**

Mailing Address 7571 Bayview Club Drive  
Apt. 2D

City State Zip Code  
Indianapolis IN 46250

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.84

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24235

Amount of Each Receipt this Period

27.06

Full Name (Last, First, Middle Initial)

## **C. JACQUELINE L. JONES-WALSH**

Mailing Address 12401 Renton Avenue S.  
Apt. 307

City State Zip Code  
Seattle WA 98178

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2013

Transaction ID : SA11AI.26061

Amount of Each Receipt this Period

21.00

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

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

75.12

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

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

FOR LINE NUMBER: PAGE 234 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. JACQUELINE L. JONES-WALSH</b></p> <p>Mailing Address 12401 Renton Avenue S.  Apt. 307</p> <p>City State Zip Code  Seattle WA 98178</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  294.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 25 / 2013  <b>Transaction ID : SA11AI.26060</b></p> <p>Amount of Each Receipt this Period  21.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. JAIME A. JORDAN</b></p> <p>Mailing Address 11522 ST. Route 588</p> <p>City State Zip Code  Bidwell OH 45614</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME OH LOC 4/GALLIPOLIS CITY CUSTODIAN</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  290.12</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 02 / 2013  <b>Transaction ID : SA11AI.25693</b></p> <p>Amount of Each Receipt this Period  19.24</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. JAIME A. JORDAN</b></p> <p>Mailing Address 11522 ST. Route 588</p> <p>City State Zip Code  Bidwell OH 45614</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME OH LOC 4/GALLIPOLIS CITY CUSTODIAN</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  309.36</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 19 / 2013  <b>Transaction ID : SA11AI.25692</b></p> <p>Amount of Each Receipt this Period  19.24</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>59.48</p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER: PAGE 235 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. RACHEL JORDAN**

Mailing Address 7836 Peachmont Avenue NW

City State Zip Code  
North Canton OH 44720

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25695

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. RACHEL JORDAN**

Mailing Address 7836 Peachmont Avenue NW

City State Zip Code  
North Canton OH 44720

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25694

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. HOWARD JORGENSEN**

Mailing Address P.O. Box 1024

City State Zip Code  
Medical Lake WA 99022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA RET CHPT 10

Occupation

RETIREE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2013

Transaction ID : SA11AI.25972

Amount of Each Receipt this Period

30.00

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

70.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 236 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. PEGGY A. JOSEPH**

Mailing Address 5266 Dillon Hills Drive

City

Nashport

State

OH

Zip Code

43830

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

238.00

Date of Receipt

07 / 12 / 2013

Transaction ID : SA11AI.25452

Amount of Each Receipt this Period

17.00

Full Name (Last, First, Middle Initial)

**B. PEGGY A. JOSEPH**

Mailing Address 5266 Dillon Hills Drive

City

Nashport

State

OH

Zip Code

43830

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

255.00

Date of Receipt

07 / 26 / 2013

Transaction ID : SA11AI.25453

Amount of Each Receipt this Period

17.00

Full Name (Last, First, Middle Initial)

**C. 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  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1104.76

Date of Receipt

07 / 15 / 2013

Transaction ID : SA11AI.24236

Amount of Each Receipt this Period

85.42

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

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

119.42

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

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

FOR LINE NUMBER: PAGE 237 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. CHARLES JURGONIS</b></p> <p>Mailing Address 11704 Bobs Ford Road</p> <p>City State Zip Code Fairfax VA 22030</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L DIRECTOR, FINANCIAL SERVICES</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1190.18</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24237</b></p> <p>Amount of Each Receipt this Period 85.42</p>
<p>Full Name (Last, First, Middle Initial) <b>B. TONI R. KAMERER</b></p> <p>Mailing Address 259 Grand Blvd.</p> <p>City State Zip Code Bedford OH 44146</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 4/BEDFORD SECURITY OFFICER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 331.69</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 19 / 2013 <b>Transaction ID : SA11AI.25697</b></p> <p>Amount of Each Receipt this Period 41.67</p>
<p>Full Name (Last, First, Middle Initial) <b>C. CHRISTINA P. KAOH</b></p> <p>Mailing Address 3607 10th Street NW Apt. A</p> <p>City State Zip Code Washington DC 20010</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L LABOR ECONOMIST I</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24239</b></p> <p>Amount of Each Receipt this Period 15.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		142.09
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 238 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. KHALILAH KARIM</b></p> <p>Mailing Address 158 Hood Circle</p> <p>City Decatur State GA Zip Code 30030</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation ORGANIZER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <b>217.68</b></p>		<p>Date of Receipt  <b>07 / 15 / 2013</b>  <b>Transaction ID : SA11AI.24240</b></p> <p>Amount of Each Receipt this Period  <b>19.30</b></p>
<p>Full Name (Last, First, Middle Initial)  <b>B. KHALILAH KARIM</b></p> <p>Mailing Address 158 Hood Circle</p> <p>City Decatur State GA Zip Code 30030</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation ORGANIZER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <b>236.98</b></p>		<p>Date of Receipt  <b>07 / 31 / 2013</b>  <b>Transaction ID : SA11AI.24241</b></p> <p>Amount of Each Receipt this Period  <b>19.30</b></p>
<p>Full Name (Last, First, Middle Initial)  <b>C. STUART KATZENBERG</b></p> <p>Mailing Address 190 W. Ostend Street Suite 101</p> <p>City Baltimore State MD Zip Code 21230</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <b>408.38</b></p>		<p>Date of Receipt  <b>07 / 01 / 2013</b>  <b>Transaction ID : SA11AI.24813</b></p> <p>Amount of Each Receipt this Period  <b>58.34</b></p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p><b>96.94</b></p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

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

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

FOR LINE NUMBER: PAGE 239 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. BRITT D. KAUFMAN</b></p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 24 / 2013  <b>Transaction ID : SA11AI.26064</b></p>	
<p>Mailing Address 1212 Jefferson Street SE  Suite 300</p>		<p>Amount of Each Receipt this Period  40.00</p>	
<p>City Olympia State WA Zip Code 98501</p>			
<p>FEC ID number of contributing federal political committee. C</p>			
<p>Name of Employer AFSCME WA CN 28</p>	<p>Occupation COUNCIL REPRESENTATIVE</p>		
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Aggregate Year-to-Date ▼  280.00</p>		
<p>Full Name (Last, First, Middle Initial)  <b>B. ALAN E. KEARNEY</b></p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 08 / 2013  <b>Transaction ID : SA11AI.25020</b></p>	
<p>Mailing Address 9254 Highland Creek Road</p>		<p>Amount of Each Receipt this Period  61.54</p>	
<p>City Bloomington State MN Zip Code 55437</p>			
<p>FEC ID number of contributing federal political committee. C</p>			
<p>Name of Employer AFSCME MN CN 5/CN14</p>	<p>Occupation STAFF REPRESENTATIVE</p>		
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Aggregate Year-to-Date ▼  429.58</p>		
<p>Full Name (Last, First, Middle Initial)  <b>C. ROBERT E. KELLER</b></p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 24 / 2013  <b>Transaction ID : SA11AI.26065</b></p>	
<p>Mailing Address 5428 78th Avenue NW</p>		<p>Amount of Each Receipt this Period  46.00</p>	
<p>City Olympia State WA Zip Code 98502</p>			
<p>FEC ID number of contributing federal political committee. C</p>			
<p>Name of Employer AFSCME WA CN 28</p>	<p>Occupation FIELD SUPERVISOR</p>		
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Aggregate Year-to-Date ▼  322.00</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>147.54</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 240 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. SUSAN M. KELLER</b></p> <p>Mailing Address 5428 78th Avenue NW</p> <p>City Olympia State WA Zip Code 98502</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WA CN 28 Occupation EXECUTIVE ASSISTANT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 294.00</p>		<p>Date of Receipt  <b>07 / 24 / 2013</b>  <b>Transaction ID : SA11AI.26066</b> </p> <p>Amount of Each Receipt this Period 42.00</p>
<p>Full Name (Last, First, Middle Initial) <b>B. DONALD JOSEPH KELLY</b></p> <p>Mailing Address 23 Glen Drive</p> <p>City Troy State NY Zip Code 12180</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME NY LOC 1000 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 269.36</p>		<p>Date of Receipt  <b>07 / 10 / 2013</b>  <b>Transaction ID : SA11AI.25214</b> </p> <p>Amount of Each Receipt this Period 19.24</p>
<p>Full Name (Last, First, Middle Initial) <b>C. DONALD JOSEPH KELLY</b></p> <p>Mailing Address 23 Glen Drive</p> <p>City Troy State NY Zip Code 12180</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME NY LOC 1000 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 288.60</p>		<p>Date of Receipt  <b>07 / 10 / 2013</b>  <b>Transaction ID : SA11AI.25215</b> </p> <p>Amount of Each Receipt this Period 19.24</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		80.48
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 241 OF 516

<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**

<b>A. DONALD JOSEPH KELLY</b> Full Name (Last, First, Middle Initial) Mailing Address 23 Glen Drive City State Zip Code Troy NY 12180 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation AFSCME NY LOC 1000 STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>307.84</b>			Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.25213</b> Amount of Each Receipt this Period <b>19.24</b>
<b>B. LYNN E. KEMP</b> Full Name (Last, First, Middle Initial) Mailing Address 390 Worthington Road City State Zip Code Westerville OH 43082 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation AFSCME OH LOC 11 STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>280.00</b>			Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.25455</b> Amount of Each Receipt this Period <b>40.00</b>
<b>C. LYNN E. KEMP</b> Full Name (Last, First, Middle Initial) Mailing Address 390 Worthington Road City State Zip Code Westerville OH 43082 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation AFSCME OH LOC 11 STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>320.00</b>			Date of Receipt M M / D D / Y Y Y Y Y 07 / 30 / 2013 <b>Transaction ID : SA11AI.25456</b> Amount of Each Receipt this Period <b>40.00</b>
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			<b>99.24</b>
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

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

 FOR LINE NUMBER: PAGE 242 OF 516  
 (check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. JOSEPH A. KENDO**

Mailing Address 2119 N 59th Street

 City  
 Seattle

 State  
 WA

 Zip Code  
 98103

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

COUNCIL 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	7		2	4		2	0	1	3

Transaction ID : SA11AI.26067

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. ADRIENNE J. KERN**

Mailing Address P.O. Box 44

 City  
 Hawthorne

 State  
 WI

 Zip Code  
 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 ▼

384.82

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	1	3

Transaction ID : SA11AI.25021

Amount of Each Receipt this Period

55.52

Full Name (Last, First, Middle Initial)

**C. JOANNE KICKEN**

Mailing Address 271 W. Mason Avenue

 City  
 Buckley

 State  
 WA

 Zip Code  
 98321

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	3

Transaction ID : SA11AI.26068

Amount of Each Receipt this Period

25.00

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

120.52

**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

FOR LINE NUMBER:  
(check only one)

PAGE 243 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. JOANNE KICKEN**

Mailing Address 271 W. Mason Avenue

City State Zip Code  
Buckley WA 98321

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WA CN 28/STATE OF WA

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 25 / 2013

Transaction ID : SA11AI.26070

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. LORI E. KIEF**

Mailing Address 4413 Doe Crossing Trail

City State Zip Code  
Madison WI 53704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40/CTY OF MADISON

Occupation  
ADMINISTRATIVE CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.26216

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**C. LORI E. KIEF**

Mailing Address 4413 Doe Crossing Trail

City State Zip Code  
Madison WI 53704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WI CN 40/CTY OF MADISON

Occupation  
ADMINISTRATIVE CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2013

Transaction ID : SA11AI.26215

Amount of Each Receipt this Period

35.00

**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:  
(check only one)

PAGE 244 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. LORI E. KIEF**

Mailing Address 4413 Doe Crossing Trail

City

Madison

State

WI

Zip Code

53704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WI CN 40/CTY OF MADISON

Occupation

ADMINISTRATIVE CLERK

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

525.00

Date of Receipt

07 / 30 / 2013

Transaction ID : SA11AI.26214

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**B. 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  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

506.36

Date of Receipt

07 / 08 / 2013

Transaction ID : SA11AI.25022

Amount of Each Receipt this Period

72.54

Full Name (Last, First, Middle Initial)

**C. MONA L. KING**

Mailing Address 929 Rye Drive

City

La Plata

State

MD

Zip Code

20646

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

RECORDS OFFICE ASSISTANT

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

338.00

Date of Receipt

07 / 15 / 2013

Transaction ID : SA11AI.24243

Amount of Each Receipt this Period

26.00

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

133.54

**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 245 OF 516

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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**

Full Name (Last, First, Middle Initial)

A. MONA L. KING

Mailing Address 929 Rye Drive

City

La Plata

State

MD

Zip Code

20646

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

RECORDS OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24244

Amount of Each Receipt this Period

26.00

Full Name (Last, First, Middle Initial)

B. SPENCER KING

Mailing Address 1212 Jefferson St., SE  
Suite 300

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 25 / 2013

Transaction ID : SA11AI.26071

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. DEBRA L. KING-HUTCHINSON

Mailing Address 1545 Smith Road

City

Columbus

State

OH

Zip Code

43207

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

LABOR MARKET ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 12 / 2013

Transaction ID : SA11AI.25459

Amount of Each Receipt this Period

15.00

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

56.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 246 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. DEBRA L. KING-HUTCHINSON**

Mailing Address 1545 Smith Road

City

Columbus

State

OH

Zip Code

43207

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

LABOR MARKET ANALYST

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 26 / 2013

Transaction ID : SA11AI.25458

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. CAROLYN KLINGLESMTIH**

Mailing Address 10700 Grecian Road

City

Louisville

State

KY

Zip Code

40272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.44

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24245

Amount of Each Receipt this Period

103.88

Full Name (Last, First, Middle Initial)

**C. CAROLYN KLINGLESMTIH**

Mailing Address 10700 Grecian Road

City

Louisville

State

KY

Zip Code

40272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1454.32

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24246

Amount of Each Receipt this Period

103.88

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

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

222.76

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

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

FOR LINE NUMBER: PAGE 247 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. BRIAN W. KLOPP</b></p> <p>Mailing Address 6711 Queens Chapel Road</p> <p>City State Zip Code University Park MD 20782</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L LABOR ECONOMIST III</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 549.46</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24249</b></p> <p>Amount of Each Receipt this Period 42.96</p>		
<p>Full Name (Last, First, Middle Initial) <b>B. BRIAN W. KLOPP</b></p> <p>Mailing Address 6711 Queens Chapel Road</p> <p>City State Zip Code University Park MD 20782</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L LABOR ECONOMIST III</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 592.77</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24248</b></p> <p>Amount of Each Receipt this Period 43.31</p>		
<p>Full Name (Last, First, Middle Initial) <b>C. MARCIA R. KNOX</b></p> <p>Mailing Address 1660 Newton Avenue</p> <p>City State Zip Code Dayton OH 45406</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH CN 8 REGIONAL DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 647.60</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2013 <b>Transaction ID : SA11AI.25269</b></p> <p>Amount of Each Receipt this Period 87.98</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>174.25</p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 248 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. MARCIA R. KNOX</b></p> <p>Mailing Address 1660 Newton Avenue</p> <p>City State Zip Code  Dayton OH 45406</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME OH CN 8 REGIONAL DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  652.60</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 16 / 2013</p> <p><b>Transaction ID : SA11AI.25270</b></p> <p>Amount of Each Receipt this Period  5.00</p>		
<p>Full Name (Last, First, Middle Initial)  <b>B. KERRY KORPI</b></p> <p>Mailing Address 8913 First Avenue</p> <p>City State Zip Code  Silver Spring MD 20910</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME INT'L DIRECTOR, RESEARCH</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  980.76</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013</p> <p><b>Transaction ID : SA11AI.24251</b></p> <p>Amount of Each Receipt this Period  73.52</p>		
<p>Full Name (Last, First, Middle Initial)  <b>C. KERRY KORPI</b></p> <p>Mailing Address 8913 First Avenue</p> <p>City State Zip Code  Silver Spring MD 20910</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME INT'L DIRECTOR, RESEARCH</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  1054.28</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013</p> <p><b>Transaction ID : SA11AI.24252</b></p> <p>Amount of Each Receipt this Period  73.52</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>152.04</p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 249 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. STEVEN J KOWALIK

Mailing Address 5431 Larchwood Lane

City State Zip Code  
 Toledo OH 43614

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.68

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 01 / 2013

Transaction ID : SA11AI.25271

Amount of Each Receipt this Period

86.42

Full Name (Last, First, Middle Initial)

B. LYNN A. KRATZ

Mailing Address 326 Brentwood Drive  
 P.O. Box 8453

City State Zip Code  
 Cedar Rapids IA 52408

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

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  
 07 / 12 / 2013

Transaction ID : SA11AI.24709

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. LYNN A. KRATZ

Mailing Address 326 Brentwood Drive  
 P.O. Box 8453

City State Zip Code  
 Cedar Rapids IA 52408

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

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  
 07 / 23 / 2013

Transaction ID : SA11AI.24708

Amount of Each Receipt this Period

20.00

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:  
(check only one)

PAGE 250 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial)  <b>A. LORETTA K. KREIGER</b></p> <p>Mailing Address 55 Circle Drive</p> <p>City State Zip Code  Medina OH 44256</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME OH LOC 11/STATE OF OH ACCOUNT CLERK II</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  207.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 12 / 2013</p> <p><b>Transaction ID : SA11AI.25465</b></p> <p>Amount of Each Receipt this Period  15.00</p>		
<p>Full Name (Last, First, Middle Initial)  <b>B. LORETTA K. KREIGER</b></p> <p>Mailing Address 55 Circle Drive</p> <p>City State Zip Code  Medina OH 44256</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME OH LOC 11/STATE OF OH ACCOUNT CLERK II</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  222.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 26 / 2013</p> <p><b>Transaction ID : SA11AI.25464</b></p> <p>Amount of Each Receipt this Period  15.00</p>		
<p>Full Name (Last, First, Middle Initial)  <b>C. STEVEN KREISBERG</b></p> <p>Mailing Address 9954 Whitewater Drive</p> <p>City State Zip Code  Burke VA 22015</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME INT'L ASSOCIATE DIRECTOR, RESEARCH</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  745.88</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013</p> <p><b>Transaction ID : SA11AI.24253</b></p> <p>Amount of Each Receipt this Period  57.36</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>87.36</p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					

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

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

FOR LINE NUMBER: PAGE 251 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. STEVEN KREISBERG**

Mailing Address 9954 Whitewater Drive

City State Zip Code  
Burke VA 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 ▼

803.24

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24254

Amount of Each Receipt this Period

57.36

Full Name (Last, First, Middle Initial)

## **B. BARBARA KREMP**

Mailing Address 302 Donnelly Avenue

City State Zip Code  
Aston PA 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 ▼

512.12

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25874

Amount of Each Receipt this Period

73.16

Full Name (Last, First, Middle Initial)

## **C. JEREMY S KRUSE**

Mailing Address 1410 SE Belmont St.  
Apt. 208

City State Zip Code  
Portland OR 97214

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 ▼

218.05

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24255

Amount of Each Receipt this Period

17.06

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

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

147.58

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 252 OF 516

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. JEREMY S KRUSE**Mailing Address 1410 SE Belmont St.  
Apt. 208

City	State	Zip Code
Portland	OR	97214

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 ▼

237.55

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	3

Transaction ID : SA11AI.24256

Amount of Each Receipt this Period

19.50

Full Name (Last, First, Middle Initial)

**B. RONALD D. KUCHLER**

Mailing Address P.O. Box 3019

City	State	Zip Code
Port Angeles	WA	98362

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	3

Transaction ID : SA11AI.26075

Amount of Each Receipt this Period

37.00

Full Name (Last, First, Middle Initial)

**C. RONALD D. KUCHLER**

Mailing Address P.O. Box 3019

City	State	Zip Code
Port Angeles	WA	98362

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	1	3

Transaction ID : SA11AI.26074

Amount of Each Receipt this Period

93.50

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

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

93.50

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

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

FOR LINE NUMBER: PAGE 253 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. MICHAEL G. KUCHTA**

Mailing Address 300 Hardman Avenue South

City State Zip Code  
South St. Paul MN 55075

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

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  
07 / 08 / 2013

Transaction ID : SA11AI.25026

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. JAMIE G. KUHNER**

Mailing Address 390 Worthington Road

City State Zip Code  
Westerville OH 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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25467

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. JAMIE G. KUHNER**

Mailing Address 390 Worthington Road

City State Zip Code  
Westerville OH 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 ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2013

Transaction ID : SA11AI.25466

Amount of Each Receipt this Period

40.00

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

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

110.00

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

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

FOR LINE NUMBER: PAGE 254 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. **ANDREW KUJAN**

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 ▼

315.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 01 / 2013

Transaction ID : SA11AI.24814

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

B. **STEVEN F. KULLMAN**

Mailing Address 310 Timber Run Road

City State Zip Code  
Zanesville OH 43701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 12 / 2013

Transaction ID : SA11AI.25468

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. **STEVEN F. KULLMAN**

Mailing Address 310 Timber Run Road

City State Zip Code  
Zanesville OH 43701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

ENVIRONMENTAL SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 26 / 2013

Transaction ID : SA11AI.25470

Amount of Each Receipt this Period

15.00

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

75.00

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 255 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. LEANNE KUNZE**

Mailing Address 8155 Scandia Road

City	State	Zip Code
Waconia	MN	55387

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 65

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		0	5		2	0	1	3		

Transaction ID : SA11AI.25119

Amount of Each Receipt this Period

69.88

Full Name (Last, First, Middle Initial)

**B. RANDALL KURTZ**

Mailing Address 8019 64th Drive NE

City	State	Zip Code
Marysville	WA	98270

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

FSS III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		1	0		2	0	1	3		

Transaction ID : SA11AI.26077

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. RANDALL KURTZ**

Mailing Address 8019 64th Drive NE

City	State	Zip Code
Marysville	WA	98270

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

FSS III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		2	5		2	0	1	3		

Transaction ID : SA11AI.26076

Amount of Each Receipt this Period

10.00

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

89.88

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 256 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<b>A. PATRICIA K. KWIATKOWSKI</b> Full Name (Last, First, Middle Initial) Mailing Address 17420 Aquasco Farm Road City Aquasco State MD Zip Code 20608 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME INT'L Occupation EXECUTIVE OFFICE ASSISTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>511.55</b>			Date of Receipt M M / D D / Y Y Y Y Y <b>07 / 15 / 2013</b> <b>Transaction ID : SA11AI.24257</b> Amount of Each Receipt this Period <b>39.35</b>
<b>B. JEANINE LAKE</b> Full Name (Last, First, Middle Initial) Mailing Address 1324 Bittersweet Circle City Las Vegas State NV Zip Code 89128 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME NV LOC 4041 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>238.00</b>			Date of Receipt M M / D D / Y Y Y Y Y <b>07 / 12 / 2013</b> <b>Transaction ID : SA11AI.25179</b> Amount of Each Receipt this Period <b>68.00</b>
<b>C. FRANCIS M. LALLY III</b> Full Name (Last, First, Middle Initial) Mailing Address 5 Vansant Rd., Deacon's Walk City Newark State DE Zip Code 19711 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME DE CN 81 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>518.90</b>			Date of Receipt M M / D D / Y Y Y Y Y <b>07 / 10 / 2013</b> <b>Transaction ID : SA11AI.24587</b> Amount of Each Receipt this Period <b>65.34</b>
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			<b>172.69</b>
<b>TOTAL</b> This Period (last page this line number only)..... ▶			



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

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

FOR LINE NUMBER: PAGE 257 OF 516

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. JOSE A. LALUZ JR.

Mailing Address 6255 Bent Pine Drive  
Apt. 722A

City	State	Zip Code
Orlando	FL	32822

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

782.47

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24260

Amount of Each Receipt this Period

60.19

Full Name (Last, First, Middle Initial)

B. JOSE A. LALUZ JR.

Mailing Address 6255 Bent Pine Drive  
Apt. 722A

City	State	Zip Code
Orlando	FL	32822

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

842.66

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24261

Amount of Each Receipt this Period

60.19

Full Name (Last, First, Middle Initial)

C. ANGELA LAMANNA

Mailing Address 296 Churchmans Road

City	State	Zip Code
New Castle	DE	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 ▼

374.72

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2013

Transaction ID : SA11AI.24588

Amount of Each Receipt this Period

52.60

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

172.98

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 PageFOR LINE NUMBER: PAGE 258 OF 516  
(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**

<b>A. JERRY S. LARICCHIUTA</b> Full Name (Last, First, Middle Initial) Mailing Address 117 Van Buren Street City Massapequa Park State NY Zip Code 11762 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME NY LOC 1000/NASSAU CNTY Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 269.36			Date of Receipt M M / D D / Y Y Y Y Y 07 / 10 / 2013 <b>Transaction ID : SA11AI.25216</b> Amount of Each Receipt this Period 19.24
<b>B. JERRY S. LARICCHIUTA</b> Full Name (Last, First, Middle Initial) Mailing Address 117 Van Buren Street City Massapequa Park State NY Zip Code 11762 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME NY LOC 1000/NASSAU CNTY Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 288.60			Date of Receipt M M / D D / Y Y Y Y Y 07 / 23 / 2013 <b>Transaction ID : SA11AI.25217</b> Amount of Each Receipt this Period 19.24
<b>C. DANA LARSON</b> Full Name (Last, First, Middle Initial) Mailing Address 8111 Lake Pleasant Rd City Erie State PA Zip Code 16509 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.10			Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013 <b>Transaction ID : SA11AI.25875</b> Amount of Each Receipt this Period 39.30
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			77.78
<b>TOTAL</b> 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:  
(check only one)

PAGE 259 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. DONALD W. LARSON</b></p> <p>Mailing Address 452 W Scott Street</p> <p>City State Zip Code Fond du Lac WI 54937</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation AFSCME WI CN 24/STATE OF WI STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">270.00</span> </p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 01 / 2013</span>  <b>Transaction ID : SA11AI.26188</b> </p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">10.00</span> </p>	
<p>Full Name (Last, First, Middle Initial) <b>B. DONALD W. LARSON</b></p> <p>Mailing Address 452 W Scott Street</p> <p>City State Zip Code Fond du Lac WI 54937</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation AFSCME WI CN 24/STATE OF WI STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">290.00</span> </p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 12 / 2013</span>  <b>Transaction ID : SA11AI.26187</b> </p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">20.00</span> </p>	
<p>Full Name (Last, First, Middle Initial) <b>C. DONALD W. LARSON</b></p> <p>Mailing Address 452 W Scott Street</p> <p>City State Zip Code Fond du Lac WI 54937</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation AFSCME WI CN 24/STATE OF WI STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">310.00</span> </p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 26 / 2013</span>  <b>Transaction ID : SA11AI.26186</b> </p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">20.00</span> </p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">50.00</span>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;"></span>	

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 260 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. SUSAN J. LARUE</b></p> <p>Mailing Address 106 Haskell Drive</p> <p>City Lancaster State PA Zip Code 17601</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME PA CN 13/STATE OF PA Occupation CLERICAL/ADMINISTRATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 240.00</p>			<p>Date of Receipt  <b>07 / 22 / 2013</b>  <b>Transaction ID : SA11AI.25876</b> </p> <p>Amount of Each Receipt this Period            30.00         </p>	
<p>Full Name (Last, First, Middle Initial) <b>B. BRENDA R. LATHAM</b></p> <p>Mailing Address 3140 Scottwood Road</p> <p>City Columbus State OH Zip Code 43227</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation OFFICE ASSISTANT III</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 205.00</p>			<p>Date of Receipt  <b>07 / 12 / 2013</b>  <b>Transaction ID : SA11AI.25473</b> </p> <p>Amount of Each Receipt this Period            15.00         </p>	
<p>Full Name (Last, First, Middle Initial) <b>C. BRENDA R. LATHAM</b></p> <p>Mailing Address 3140 Scottwood Road</p> <p>City Columbus State OH Zip Code 43227</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation OFFICE ASSISTANT III</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 220.00</p>			<p>Date of Receipt  <b>07 / 26 / 2013</b>  <b>Transaction ID : SA11AI.25472</b> </p> <p>Amount of Each Receipt this Period            15.00         </p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			60.00	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

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	13		14		15		16		17

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 262 OF 516  
(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**

<b>A. JEANETTE LEBRECHT</b> Full Name (Last, First, Middle Initial) Mailing Address 6071 Ravenswicke Terrace City State Zip Code Davie FL 33331 FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span> Name of Employer Occupation AFSCME INT'L AREA FIELD SERVICES DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">652.68</span>			Date of Receipt <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y  07 / 31 / 2013 </div> <b>Transaction ID : SA11AI.24265</b> Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">46.62</span>	
<b>B. ROBIN C. LEDBETTER</b> Full Name (Last, First, Middle Initial) Mailing Address 12002 NE Roosevelt Way C-302 City State Zip Code Seattle WA 98125 FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span> Name of Employer Occupation AFSCME WA CN 28 COUNCIL REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">318.00</span>			Date of Receipt <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y  07 / 24 / 2013 </div> <b>Transaction ID : SA11AI.26079</b> Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">46.00</span>	
<b>C. ALAN L LEE</b> Full Name (Last, First, Middle Initial) Mailing Address 950 Seven Hills Drive #522 City State Zip Code Henderson NV 89052 FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span> Name of Employer Occupation AFSCME INT'L ASSISTANT TO REGIONAL DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">595.66</span>			Date of Receipt <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y  07 / 15 / 2013 </div> <b>Transaction ID : SA11AI.24266</b> Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">46.22</span>	
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			<span style="border: 1px solid black; padding: 2px;">138.84</span>	
<b>TOTAL</b> This Period (last page this line number only)..... ▶			<span style="border: 1px solid black; padding: 2px;"></span>	

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 263 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. ALAN L LEE

Mailing Address 950 Seven Hills Drive  
#522

City State Zip Code  
Henderson NV 89052

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT TO REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

641.88

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24267

Amount of Each Receipt this Period

46.22

Full Name (Last, First, Middle Initial)

B. SUE C. LEE-ALLEN

Mailing Address 7935 SW Santolina Place

City State Zip Code  
Beaverton OR 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 Y  
07 / 31 / 2013

Transaction ID : SA11AI.25797

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

C. ERIC N. LEHTO

Mailing Address 2122 West 2nd Street  
Apt. #2

City State Zip Code  
Duluth MN 55086

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

736.54

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 08 / 2013

Transaction ID : SA11AI.25030

Amount of Each Receipt this Period

105.22

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

221.44

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

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 264 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name (Last, First, Middle Initial) <b>A. JACQUALINE D. LEISURE</b></p> <p>Mailing Address 1600 28th Street NW</p> <p>City State Zip Code Canton OH 44709</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 4/CANTON CITY COOK</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>289.99</b></p>			<p>Date of Receipt M M / D D / Y Y Y Y Y <b>07 / 02 / 2013</b></p> <p><b>Transaction ID : SA11AI.25700</b></p> <p>Amount of Each Receipt this Period <b>19.23</b></p>		
<p>Full Name (Last, First, Middle Initial) <b>B. JACQUALINE D. LEISURE</b></p> <p>Mailing Address 1600 28th Street NW</p> <p>City State Zip Code Canton OH 44709</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 4/CANTON CITY COOK</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>328.45</b></p>			<p>Date of Receipt M M / D D / Y Y Y Y Y <b>07 / 19 / 2013</b></p> <p><b>Transaction ID : SA11AI.25699</b></p> <p>Amount of Each Receipt this Period <b>38.46</b></p>		
<p>Full Name (Last, First, Middle Initial) <b>C. ROBERT M. LELIS</b></p> <p>Mailing Address 7805 Normandie Blvd. Apt. E</p> <p>City State Zip Code Cleveland OH 44130</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>210.00</b></p>			<p>Date of Receipt M M / D D / Y Y Y Y Y <b>07 / 12 / 2013</b></p> <p><b>Transaction ID : SA11AI.25476</b></p> <p>Amount of Each Receipt this Period <b>15.00</b></p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><b>72.69</b></p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					



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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 265 OF 516

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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**

<p>Full Name (Last, First, Middle Initial) <b>A. ROBERT M. LELIS</b></p> <p>Mailing Address 7805 Normandie Blvd. Apt. E</p> <p>City Cleveland State OH Zip Code 44130</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2013 <b>Transaction ID : SA11AI.25475</b></p> <p>Amount of Each Receipt this Period 15.00</p>		
<p>Full Name (Last, First, Middle Initial) <b>B. CHARLES E LESTER</b></p> <p>Mailing Address 1317 Micheltorena Street</p> <p>City Los Angeles State CA Zip Code 90026</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME Occupation EDUCATION COORDINATOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 901.29</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24268</b></p> <p>Amount of Each Receipt this Period 69.33</p>		
<p>Full Name (Last, First, Middle Initial) <b>C. CHARLES E LESTER</b></p> <p>Mailing Address 1317 Micheltorena Street</p> <p>City Los Angeles State CA Zip Code 90026</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME Occupation EDUCATION COORDINATOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 926.29</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 23 / 2013 <b>Transaction ID : SA11AI.24270</b></p> <p>Amount of Each Receipt this Period 25.00</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>109.33</p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					

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

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Detailed Summary Page

FOR LINE NUMBER:  
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PAGE 266 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. CHARLES E LESTER**

Mailing Address 1317 Micheltorena Street

City

Los Angeles

State

CA

Zip Code

90026

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME

Occupation

EDUCATION COORDINATOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

995.62

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24269

Amount of Each Receipt this Period

69.33

Full Name (Last, First, Middle Initial)

**B. DAVID LEVINE**

Mailing Address 41 Florence Place

City

PITTSBURGH

State

PA

Zip Code

15228

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

226.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.25877

Amount of Each Receipt this Period

28.00

Full Name (Last, First, Middle Initial)

**C. ROGER LEVINGS**

Mailing Address 206 East Dunklin Street

City

Jefferson City

State

MO

Zip Code

65101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MO CN 72

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

257.27

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 09 / 2013

Transaction ID : SA11AI.25137

Amount of Each Receipt this Period

19.79

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

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

117.12

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 267 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. ROGER LEVINGS**

Mailing Address 206 East Dunklin Street

City State Zip Code  
Jefferson City MO 65101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MO CN 72

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.06

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 23 / 2013

Transaction ID : SA11AI.25136

Amount of Each Receipt this Period

19.79

Full Name (Last, First, Middle Initial)

**B. SUSAN T. LEVITAN**

Mailing Address 2650 Worrell Court

City State Zip Code  
Crofton MD 21114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

661.27

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24271

Amount of Each Receipt this Period

48.79

Full Name (Last, First, Middle Initial)

**C. SUSAN T. LEVITAN**

Mailing Address 2650 Worrell Court

City State Zip Code  
Crofton MD 21114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.06

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24272

Amount of Each Receipt this Period

48.79

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

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

117.37

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 268 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. SARAH LEWERENZ</b></p> <p>Mailing Address 6997 West Van Road</p> <p>City State Zip Code Duluth MN 55803-9359</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME MN CN 65 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>512.14</b></p>			<p>Date of Receipt M M / D D / Y Y Y Y Y <b>07 / 05 / 2013</b></p> <p><b>Transaction ID : SA11AI.25121</b></p> <p>Amount of Each Receipt this Period <b>74.38</b></p>		
<p>Full Name (Last, First, Middle Initial) <b>B. CORDELIA M. LEWIS</b></p> <p>Mailing Address P.O. Box 5149</p> <p>City State Zip Code Boston MA 02206-5149</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L/STATE STREET RETIREE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>245.00</b></p>			<p>Date of Receipt M M / D D / Y Y Y Y Y <b>07 / 08 / 2013</b></p> <p><b>Transaction ID : SA11AI.24273</b></p> <p>Amount of Each Receipt this Period <b>35.00</b></p>		
<p>Full Name (Last, First, Middle Initial) <b>C. GREG LEWIS</b></p> <p>Mailing Address 1816 E. 22nd Street</p> <p>City State Zip Code Des Moines IA 50317</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME IA CN 61 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>420.00</b></p>			<p>Date of Receipt M M / D D / Y Y Y Y Y <b>07 / 08 / 2013</b></p> <p><b>Transaction ID : SA11AI.24710</b></p> <p>Amount of Each Receipt this Period <b>60.00</b></p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><b>169.38</b></p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p></p>		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 269 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. JENNIE A. LEWIS</b></p> <p>Mailing Address 390 Worthington Road</p> <p>City State Zip Code Westerville OH 43082</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 11 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.25477</b></p> <p>Amount of Each Receipt this Period 40.00</p>
<p>Full Name (Last, First, Middle Initial) <b>B. JENNIE A. LEWIS</b></p> <p>Mailing Address 390 Worthington Road</p> <p>City State Zip Code Westerville OH 43082</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 11 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 340.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 30 / 2013 <b>Transaction ID : SA11AI.25478</b></p> <p>Amount of Each Receipt this Period 40.00</p>
<p>Full Name (Last, First, Middle Initial) <b>C. MICHELE LEWIS</b></p> <p>Mailing Address 205 Franklin Avenue</p> <p>City State Zip Code Silver Spring MD 20901</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L DIRECTOR, CONF &amp; TRAVEL SVCS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 873.88</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24274</b></p> <p>Amount of Each Receipt this Period 59.76</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		139.76
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 270 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

## **A. MICHELE LEWIS**

Mailing Address 205 Franklin Avenue

City State Zip Code  
 Silver Spring MD 20901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, CONF & TRAVEL SVCS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

933.64

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.24275

Amount of Each Receipt this Period

59.76

Full Name (Last, First, Middle Initial)

## **B. VALERY LIGHT**

Mailing Address 32 Barley Lane

City State Zip Code  
 Palmyra PA 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 ▼

567.53

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 22 / 2013

Transaction ID : SA11AI.25881

Amount of Each Receipt this Period

97.85

Full Name (Last, First, Middle Initial)

## **C. BRIAN J. LINDHOLT**

Mailing Address 2311 McKinley Street NE

City State Zip Code  
 Minneapolis MN 55418

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 05 / 2013

Transaction ID : SA11AI.25031

Amount of Each Receipt this Period

58.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

215.61

**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 271 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. BRIAN J. LINDHOLT**

Mailing Address 2311 McKinley Street NE

City

Minneapolis

State

MN

Zip Code

55418

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

07 / 31 / 2013

Transaction ID : SA11AI.25032

Amount of Each Receipt this Period

58.00

Full Name (Last, First, Middle Initial)

**B. MICHAEL LINDHOLT**

Mailing Address 2752 Randolph Street NE

City

Minneapolis

State

MN

Zip Code

55418-2622

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

07 / 05 / 2013

Transaction ID : SA11AI.25034

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**C. MICHAEL LINDHOLT**

Mailing Address 2752 Randolph Street NE

City

Minneapolis

State

MN

Zip Code

55418-2622

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

07 / 31 / 2013

Transaction ID : SA11AI.25033

Amount of Each Receipt this Period

120.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

298.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 272 OF 516  
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. THERESA LIPKO**

Mailing Address 117 South Main Street

City	State	Zip Code
Carbondale	PA	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 ▼

479.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	22	/	2013

Transaction ID : SA11AI.25882

Amount of Each Receipt this Period

78.20

Full Name (Last, First, Middle Initial)

**B. TOM LIPKO**

Mailing Address 117 South Main Street

City	State	Zip Code
Carbondale	PA	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 ▼

362.47

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	22	/	2013

Transaction ID : SA11AI.25883

Amount of Each Receipt this Period

79.20

Full Name (Last, First, Middle Initial)

**C. ANTIONE LITTLE**

Mailing Address 2762 N 24th Street

City	State	Zip Code
Philadelphia	PA	19132

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME PA CN 33/CITY OF PA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	11	/	2013

Transaction ID : SA11AI.25946

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

177.40

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 273 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. ANTIONE LITTLE**

Mailing Address 2762 N 24th Street

City

Philadelphia

State

PA

Zip Code

19132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME PA CN 33/CITY OF PA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 25 / 2013

Transaction ID : SA11AI.25945

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. JAMECIA L. LITTLE**

Mailing Address 3237 Stirling Bridge

City

Canal Winchester

State

OH

Zip Code

43110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

MANAGEMENT ANALYST

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25480

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**C. JAMECIA L. LITTLE**

Mailing Address 3237 Stirling Bridge

City

Canal Winchester

State

OH

Zip Code

43110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

MANAGEMENT ANALYST

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 30 / 2013

Transaction ID : SA11AI.25479

Amount of Each Receipt this Period

60.00

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  
Detailed Summary Page

FOR LINE NUMBER: PAGE 274 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. ROBERT LITTLE**

Mailing Address 2930 S. Board Street

City State Zip Code  
Trenton NJ 08610-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME NJ CN 1

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.92

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.25155

Amount of Each Receipt this Period

37.56

Full Name (Last, First, Middle Initial)

**B. ROBERT LITTLE**

Mailing Address 2930 S. Board Street

City State Zip Code  
Trenton NJ 08610-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME NJ CN 1

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.48

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25156

Amount of Each Receipt this Period

37.56

Full Name (Last, First, Middle Initial)

**C. RODRIGUEZ M. LOBBINS**

Mailing Address 110 Kingland St.

City State Zip Code  
Woodstock GA 30189

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INTERNATIONAL

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.36

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24280

Amount of Each Receipt this Period

29.72

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

104.84

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 275 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. RODRIGUEZ M. LOBBINS**

Mailing Address 110 Kingland St.

City

Woodstock

State

GA

Zip Code

30189

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INTERNATIONAL

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.08

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24281

Amount of Each Receipt this Period

29.72

Full Name (Last, First, Middle Initial)

**B. COREY LOCKARD**

Mailing Address P.O. Box 22

City

Benton

State

PA

Zip Code

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 ▼

718.78

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25884

Amount of Each Receipt this Period

173.52

Full Name (Last, First, Middle Initial)

**C. KIP LOCKHART**

Mailing Address 139 Simpkins Drive

City

Bristol

State

CT

Zip Code

06010-0000

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 ▼

524.63

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 11 / 2013

Transaction ID : SA11AI.24564

Amount of Each Receipt this Period

70.34

**SUBTOTAL** of Receipts This Page (optional)..... ►

273.58

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 276 OF 516

<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**

<b>A. KENNETH H LOEFFLER-KEMP</b> Full Name (Last, First, Middle Initial) Mailing Address 2902 Bald Eagle Trail City Duluth State MN Zip Code 55804 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME MN CN 5 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>467.98</b>			Date of Receipt M M / D D / Y Y Y Y Y 07 / 08 / 2013 <b>Transaction ID : SA11AI.25035</b> Amount of Each Receipt this Period <b>67.04</b>
<b>B. RONALD LOHR</b> Full Name (Last, First, Middle Initial) Mailing Address 11210 CRESAP MILL RD SE City FLINTSTONE State MD Zip Code 21530 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME MD CN 3/STAFF Occupation CORR OFFICER II Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>249.95</b>			Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2013 <b>Transaction ID : SA11AI.24815</b> Amount of Each Receipt this Period <b>42.08</b>
<b>C. JAMES N. LOMONACO</b> Full Name (Last, First, Middle Initial) Mailing Address 107 Wormwood Hill Road City Mansfield State CT Zip Code 06250-0000 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME CT CN 4/STATE OF CT Occupation VICE PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>350.00</b>			Date of Receipt M M / D D / Y Y Y Y Y 07 / 03 / 2013 <b>Transaction ID : SA11AI.24565</b> Amount of Each Receipt this Period <b>25.00</b>
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			<b>134.12</b>
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 277 OF 516

(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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. JAMES N. LOMONACO**

Mailing Address 107 Wormwood Hill Road

City

Mansfield

State

CT

Zip Code

06250-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME CT CN 4/STATE OF CT

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		1	5		2	0	1	3		

Transaction ID : SA11AI.24567

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. JAMES N. LOMONACO**

Mailing Address 107 Wormwood Hill Road

City

Mansfield

State

CT

Zip Code

06250-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME CT CN 4/STATE OF CT

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		3	0		2	0	1	3		

Transaction ID : SA11AI.24566

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. PAUL LONG**

Mailing Address P.O. Box 310864

City

Flint

State

MI

Zip Code

48531

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 ▼

299.46

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		0	2		2	0	1	3		

Transaction ID : SA11AI.24884

Amount of Each Receipt this Period

23.47

**SUBTOTAL** of Receipts This Page (optional)..... ►

73.47

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 278 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. PAUL LONG**

Mailing Address P.O. Box 310864

City State Zip Code  
Flint MI 48531

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 ▼

322.93

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2013

Transaction ID : SA11AI.24883

Amount of Each Receipt this Period

23.47

Full Name (Last, First, Middle Initial)

**B. RANDAL E. LORELLO**

Mailing Address N 9203 James Court

City State Zip Code  
Spokane WA 99208

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

FIELD SUPERVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 24 / 2013

Transaction ID : SA11AI.26080

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. SABRINA LOVE**

Mailing Address 23 Chadwick Drive

City State Zip Code  
Stafford VA 22556

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ADMINISTRATIVE ASSISTANT I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.39

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24282

Amount of Each Receipt this Period

23.03

**SUBTOTAL** of Receipts This Page (optional)..... ►

96.50

**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 279 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. SABRINA LOVE**

Mailing Address 23 Chadwick Drive

City State Zip Code  
 Stafford VA 22556

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ADMINISTRATIVE ASSISTANT I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.42

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.24283

Amount of Each Receipt this Period

23.03

Full Name (Last, First, Middle Initial)

**B. CHARLES M. LOVELESS**Mailing Address 2100 11th Street NW  
#206

City State Zip Code  
 Washington DC 20001

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, FED GOVT AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1019.33

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 15 / 2013

Transaction ID : SA11AI.24284

Amount of Each Receipt this Period

78.41

Full Name (Last, First, Middle Initial)

**C. CHARLES M. LOVELESS**Mailing Address 2100 11th Street NW  
#206

City State Zip Code  
 Washington DC 20001

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, FED GOVT AFFAIRS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1097.74

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.24285

Amount of Each Receipt this Period

78.41

SUBTOTAL of Receipts This Page (optional)..... ►

179.85

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 280 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

A. **GEORGE LOVELL**

Mailing Address RR 3 Box 3403

City

Goshen

State

VT

Zip Code

05733-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MA CN 93

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.32

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.24785

Amount of Each Receipt this Period

60.76

Full Name (Last, First, Middle Initial)

B. **SALVATORE LUCIANO**

Mailing Address 947 Bunker Hill Road

City

Watertown

State

CT

Zip Code

06795-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME CT CN 4

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

834.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 11 / 2013

Transaction ID : SA11AI.24568

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. **SALVATORE LUCIANO**

Mailing Address 947 Bunker Hill Road

City

Watertown

State

CT

Zip Code

06795-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME CT CN 4

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

848.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24569

Amount of Each Receipt this Period

14.00

SUBTOTAL of Receipts This Page (optional)..... ►

174.76

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 281 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. WILLIAM LUCY</b></p> <p>Mailing Address 1831 Sudbury Lane NW</p> <p>City Washington State DC Zip Code 20012-2202</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L/STATE STREET Occupation RETIREE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1234.24</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 08 / 2013  <b>Transaction ID : SA11AI.24286</b></p> <p>Amount of Each Receipt this Period 176.32</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. DENISE ANN LUNA</b></p> <p>Mailing Address 38 River Lane</p> <p>City Levittown State PA Zip Code 19055</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME PA CN 13 Occupation COURT CLERK ADMINISTRATOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 258.93</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 22 / 2013  <b>Transaction ID : SA11AI.25885</b></p> <p>Amount of Each Receipt this Period 47.46</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. CHARLES H. LUNDY</b></p> <p>Mailing Address 2024 SW 173 Avenue</p> <p>City Miramar State FL Zip Code 33029</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation AREA ORGANIZING DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 557.05</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013  <b>Transaction ID : SA11AI.24287</b></p> <p>Amount of Each Receipt this Period 42.99</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			266.77	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 282 OF 516  
(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. CHARLES H. LUNDY**

Mailing Address 2024 SW 173 Avenue

City

Miramar

State

FL

Zip Code

33029

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 ▼

600.04

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24288

Amount of Each Receipt this Period

42.99

Full Name (Last, First, Middle Initial)

**B. WILLIAM LURYE**

Mailing Address 17 Sherman Ave.

City

Takoma Park

State

MD

Zip Code

20912

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INTERNATIONAL

Occupation

GENERAL COUNSEL

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1029.66

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24289

Amount of Each Receipt this Period

85.42

Full Name (Last, First, Middle Initial)

**C. WILLIAM LURYE**

Mailing Address 17 Sherman Ave.

City

Takoma Park

State

MD

Zip Code

20912

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INTERNATIONAL

Occupation

GENERAL COUNSEL

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1115.08

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24290

Amount of Each Receipt this Period

85.42

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

213.83

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 283 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. JOHN A. LYALL**

Mailing Address 383 Ashmoore Circle East

City State Zip Code  
Powell OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

967.92

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2013

**Transaction ID : SA11AI.25273**

Amount of Each Receipt this Period

128.56

Full Name (Last, First, Middle Initial)

**B. JOHN A. LYALL**

Mailing Address 383 Ashmoore Circle East

City State Zip Code  
Powell OH 43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

981.92

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

**Transaction ID : SA11AI.25274**

Amount of Each Receipt this Period

14.00

Full Name (Last, First, Middle Initial)

**C. ALEXIS LYMAN**

Mailing Address 1179 Charles Street

City State Zip Code  
North Providence RI 02904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME RI CN 94

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  
07 / 16 / 2013

**Transaction ID : SA11AI.25959**

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

202.56

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 284 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. JAMES F. LYMAN</b></p> <p>Mailing Address 18 Dogwood Lane</p> <p>City Loudonville State NY Zip Code 12211</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME NY CN 82/LEOU Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  280.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 26 / 2013  <b>Transaction ID : SA11AI.25190</b></p> <p>Amount of Each Receipt this Period  40.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. ROBERTA LYNCH</b></p> <p>Mailing Address 4650 N. Hermitage Street</p> <p>City Chicago State IL Zip Code 60640</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME IL CN 31 Occupation DEPUTY DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  750.56</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013  <b>Transaction ID : SA11AI.24767</b></p> <p>Amount of Each Receipt this Period  14.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. BRENDA L. MABE</b></p> <p>Mailing Address 34291 Brokaw Road</p> <p>City Columbia Station State OH Zip Code 44028</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  280.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 12 / 2013  <b>Transaction ID : SA11AI.25482</b></p> <p>Amount of Each Receipt this Period  20.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		74.00
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 285 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. BRENDA L. MABE</b></p> <p>Mailing Address 34291 Brokaw Road</p> <p>City State Zip Code  Columbia Station OH 44028</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME OH LOC 11/STATE OF OH CORRECTION OFFICER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  300.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 26 / 2013</p> <p><b>Transaction ID : SA11AI.25481</b></p> <p>Amount of Each Receipt this Period  20.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. CHRISTOPHER A. MABE</b></p> <p>Mailing Address 34291 Brokaw Road</p> <p>City State Zip Code  Columbia Station OH 44028</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME OH LOC 11/STATE OF OH CORRECTION SERGEANT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  350.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 12 / 2013</p> <p><b>Transaction ID : SA11AI.25484</b></p> <p>Amount of Each Receipt this Period  25.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. CHRISTOPHER A. MABE</b></p> <p>Mailing Address 34291 Brokaw Road</p> <p>City State Zip Code  Columbia Station OH 44028</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME OH LOC 11/STATE OF OH CORRECTION SERGEANT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  375.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 26 / 2013</p> <p><b>Transaction ID : SA11AI.25483</b></p> <p>Amount of Each Receipt this Period  25.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>70.00</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 286 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. ROBERT MACKEY**

Mailing Address 3928 Smedley Street

City

Philadelphia

State

PA

Zip Code

19140

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME PA CN 33/CITY OF PA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

07 / 11 / 2013

Transaction ID : SA11AI.25948

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. ROBERT MACKEY**

Mailing Address 3928 Smedley Street

City

Philadelphia

State

PA

Zip Code

19140

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME PA CN 33/CITY OF PA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

07 / 25 / 2013

Transaction ID : SA11AI.25947

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. GERARDO MAGALLAN**

Mailing Address P.O. Box 1046

City

Medical Lake

State

WA

Zip Code

99022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

07 / 10 / 2013

Transaction ID : SA11AI.26081

Amount of Each Receipt this Period

21.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

51.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 287 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. GERARDO MAGALLAN**

Mailing Address P.O. Box 1046

City

Medical Lake

State

WA

Zip Code

99022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	1	3

Transaction ID : SA11AI.26082

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

**B. MICHAEL P. MAGUIRE**

Mailing Address 20 Duffield Drive

City

Lititz

State

PA

Zip Code

17543

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

587.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	3

Transaction ID : SA11AI.25886

Amount of Each Receipt this Period

78.28

Full Name (Last, First, Middle Initial)

**C. LOUIS J. MAHOLIC**Mailing Address 2726 Juno Place  
Apt. #2

City

Fairlawn

State

OH

Zip Code

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 ▼

446.86

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	3

Transaction ID : SA11AI.25275

Amount of Each Receipt this Period

63.58

SUBTOTAL of Receipts This Page (optional)..... ►

162.86

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 288 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. DEANGELO MALCOLM**

Mailing Address 1034 N. Washington Avenue

City State Zip Code  
 Lansing MI 48906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.21

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 02 / 2013

Transaction ID : SA11AI.24886

Amount of Each Receipt this Period

32.07

Full Name (Last, First, Middle Initial)

**B. DEANGELO MALCOLM**

Mailing Address 1034 N. Washington Avenue

City State Zip Code  
 Lansing MI 48906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

381.33

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 16 / 2013

Transaction ID : SA11AI.24885

Amount of Each Receipt this Period

29.12

Full Name (Last, First, Middle Initial)

**C. JULIA C. C. MALETTE**

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 ▼

338.38

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 01 / 2013

Transaction ID : SA11AI.24816

Amount of Each Receipt this Period

48.34

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

109.53



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 289 OF 516  
(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**

<b>A. KATHRYN S. MALONE</b> Full Name (Last, First, Middle Initial) Mailing Address 988 Circle on the Green City Columbus State OH Zip Code 43235 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation DIRECTOR, POLITICAL ACTION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 590.20			Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.25702</b> Amount of Each Receipt this Period 40.44
<b>B. KATHRYN S. MALONE</b> Full Name (Last, First, Middle Initial) Mailing Address 988 Circle on the Green City Columbus State OH Zip Code 43235 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation DIRECTOR, POLITICAL ACTION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 630.64			Date of Receipt M M / D D / Y Y Y Y Y 07 / 19 / 2013 <b>Transaction ID : SA11AI.25701</b> Amount of Each Receipt this Period 40.44
<b>C. LARRY MALONE JR.</b> Full Name (Last, First, Middle Initial) Mailing Address 5949 Hampton Corners N. City Hilliard State OH Zip Code 43026 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 726.45			Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.25704</b> Amount of Each Receipt this Period 57.69
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			138.57
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 290 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. LARRY MALONE JR.</b></p> <p>Mailing Address 5949 Hampton Corners N.</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Hilliard</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43026</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH LOC 4</td> <td style="width: 66%;">Occupation FIELD REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">784.14</span> </p>			City Hilliard	State OH	Zip Code 43026	Name of Employer AFSCME OH LOC 4	Occupation FIELD REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 19 / 2013</span> </p> <p><b>Transaction ID : SA11AI.25705</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">57.69</span> </p>
City Hilliard	State OH	Zip Code 43026						
Name of Employer AFSCME OH LOC 4	Occupation FIELD REPRESENTATIVE							
<p>Full Name (Last, First, Middle Initial) <b>B. MOLLY MALONEY</b></p> <p>Mailing Address 131 Mainhart Drive</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Grass Valley</td> <td style="width: 33%;">State CA</td> <td style="width: 33%;">Zip Code 95945</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME INT'L</td> <td style="width: 66%;">Occupation PEOPLE CORDINATOR</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">365.02</span> </p>			City Grass Valley	State CA	Zip Code 95945	Name of Employer AFSCME INT'L	Occupation PEOPLE CORDINATOR	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 15 / 2013</span> </p> <p><b>Transaction ID : SA11AI.24292</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">28.21</span> </p>
City Grass Valley	State CA	Zip Code 95945						
Name of Employer AFSCME INT'L	Occupation PEOPLE CORDINATOR							
<p>Full Name (Last, First, Middle Initial) <b>C. MOLLY MALONEY</b></p> <p>Mailing Address 131 Mainhart Drive</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Grass Valley</td> <td style="width: 33%;">State CA</td> <td style="width: 33%;">Zip Code 95945</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME INT'L</td> <td style="width: 66%;">Occupation PEOPLE CORDINATOR</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">393.23</span> </p>			City Grass Valley	State CA	Zip Code 95945	Name of Employer AFSCME INT'L	Occupation PEOPLE CORDINATOR	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 31 / 2013</span> </p> <p><b>Transaction ID : SA11AI.24293</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">28.21</span> </p>
City Grass Valley	State CA	Zip Code 95945						
Name of Employer AFSCME INT'L	Occupation PEOPLE CORDINATOR							
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><span style="border: 1px solid black; padding: 2px;">114.11</span></p>					
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p><span style="border: 1px solid black; padding: 2px;"></span></p>					

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 291 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

## **A. MARK MANDICH**

Mailing Address 315 South Park

City State Zip Code  
 Springfield MN 56087

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 65

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.30

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 05 / 2013

Transaction ID : SA11AI.25122

Amount of Each Receipt this Period

72.26

Full Name (Last, First, Middle Initial)

## **B. MANUEL MANGUAL**

Mailing Address 417 Arizona Avenue

City State Zip Code  
 Bay Shore NY 11706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME NY LOC 1000/NYS INST.

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.60

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 11 / 2013

Transaction ID : SA11AI.25218

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

## **C. MANUEL MANGUAL**

Mailing Address 417 Arizona Avenue

City State Zip Code  
 Bay Shore NY 11706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME NY LOC 1000/NYS INST.

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.84

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 25 / 2013

Transaction ID : SA11AI.25219

Amount of Each Receipt this Period

19.24

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

110.74

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 292 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. ANTONIO K MANOR</b></p> <p>Mailing Address 1911 EAST 62ND ST.</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City SAVANNAH</td> <td style="width: 33%;">State GA</td> <td style="width: 33%;">Zip Code 31404</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME INT'L</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">431.20</span></p>			City SAVANNAH	State GA	Zip Code 31404	Name of Employer AFSCME INT'L	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">15</span> / <span style="border: 1px solid black; padding: 2px;">2013</span></p> <p><b>Transaction ID : SA11AI.24294</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">39.20</span></p>	
City SAVANNAH	State GA	Zip Code 31404							
Name of Employer AFSCME INT'L	Occupation STAFF REPRESENTATIVE								
<p>Full Name (Last, First, Middle Initial)  <b>B. ANTONIO K MANOR</b></p> <p>Mailing Address 1911 EAST 62ND ST.</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City SAVANNAH</td> <td style="width: 33%;">State GA</td> <td style="width: 33%;">Zip Code 31404</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME INT'L</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">470.40</span></p>			City SAVANNAH	State GA	Zip Code 31404	Name of Employer AFSCME INT'L	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">31</span> / <span style="border: 1px solid black; padding: 2px;">2013</span></p> <p><b>Transaction ID : SA11AI.24295</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">39.20</span></p>	
City SAVANNAH	State GA	Zip Code 31404							
Name of Employer AFSCME INT'L	Occupation STAFF REPRESENTATIVE								
<p>Full Name (Last, First, Middle Initial)  <b>C. ANDREW M. MANTELLA</b></p> <p>Mailing Address 6866 Tully Truxton Road</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Tully</td> <td style="width: 33%;">State NY</td> <td style="width: 33%;">Zip Code 13159</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME NY LOC 1000/NYS ADMIN.</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">250.12</span></p>			City Tully	State NY	Zip Code 13159	Name of Employer AFSCME NY LOC 1000/NYS ADMIN.	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">03</span> / <span style="border: 1px solid black; padding: 2px;">2013</span></p> <p><b>Transaction ID : SA11AI.25220</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">19.24</span></p>	
City Tully	State NY	Zip Code 13159							
Name of Employer AFSCME NY LOC 1000/NYS ADMIN.	Occupation STAFF REPRESENTATIVE								
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><span style="border: 1px solid black; padding: 2px;">97.64</span></p>						
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p><span style="border: 1px solid black; padding: 2px;"></span></p>						

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 293 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. ANDREW M. MANTELLA**

Mailing Address 6866 Tully Truxton Road

City State Zip Code  
 Tully NY 13159

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME NY LOC 1000/NYS ADMIN.

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 17 2013

Transaction ID : SA11AI.25221

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

**B. ANDREW M. MANTELLA**

Mailing Address 6866 Tully Truxton Road

City State Zip Code  
 Tully NY 13159

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME NY LOC 1000/NYS ADMIN.

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2013

Transaction ID : SA11AI.25222

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

**C. MELLISA C. MARKSTROM**

Mailing Address 4123 N. 18th Place

City State Zip Code  
 Phoenix AZ 85016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation  
ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.72

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 15 2013

Transaction ID : SA11AI.24296

Amount of Each Receipt this Period

22.44

**SUBTOTAL** of Receipts This Page (optional)..... ►

60.92

**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 294 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. MELLISA C. MARKSTROM</b></p> <p>Mailing Address 4123 N. 18th Place</p> <p>City State Zip Code  Phoenix AZ 85016</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME INT'L ORGANIZER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  314.16</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013  <b>Transaction ID : SA11AI.24297</b></p> <p>Amount of Each Receipt this Period  22.44</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. CHARLES H. MARTIN</b></p> <p>Mailing Address 707 Russell Avenue N.</p> <p>City State Zip Code  Minneapolis MN 55411</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME MN CN 5/CN14 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  506.49</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 08 / 2013  <b>Transaction ID : SA11AI.25037</b></p> <p>Amount of Each Receipt this Period  72.56</p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. DENISE MARTIN</b></p> <p>Mailing Address 2700 Carroll Street</p> <p>City State Zip Code  North Las Vegas NV 89030</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME NV LOC 4041 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  233.38</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 12 / 2013  <b>Transaction ID : SA11AI.25180</b></p> <p>Amount of Each Receipt this Period  66.68</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>161.68</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 295 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

## **A. ELIZA MARTIN**

Mailing Address 91-208 Kekepania Place E.

City State Zip Code  
Kapolei HI 96707-2721

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME HI LOC 152

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2013

Transaction ID : SA11AI.24614

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. GARY MARTIN**

Mailing Address 255 Trail East

City State Zip Code  
Pataskala OH 43062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ASSOCIATE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25708

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. GARY MARTIN**

Mailing Address 255 Trail East

City State Zip Code  
Pataskala OH 43062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ASSOCIATE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25707

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 296 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

A. LISA G. MARTIN

Mailing Address 5450 Whitley Park Terrace  
#102

City State Zip Code  
Bethesda MD 20814

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 ▼

511.55

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24298

Amount of Each Receipt this Period

39.35

Full Name (Last, First, Middle Initial)

B. LISA G. MARTIN

Mailing Address 5450 Whitley Park Terrace  
#102

City State Zip Code  
Bethesda MD 20814

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 ▼

550.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24299

Amount of Each Receipt this Period

39.35

Full Name (Last, First, Middle Initial)

C. PAULA MARTINEZ

Mailing Address 3963 200th Avenue

City State Zip Code  
Carlisle IA 50047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 12 / 2013

Transaction ID : SA11AI.24716

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

108.70

TOTAL This Period (last page this line number only)..... ►



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 297 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. PAULA MARTINEZ**

Mailing Address 3963 200th Avenue

City	State	Zip Code
Carlisle	IA	50047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	23	/	2013

Transaction ID : SA11AI.24715

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. KIMBERLY A. MASSENGILL-BERNARDIN**

Mailing Address 8000 Brookpoint Place

City	State	Zip Code
Westerville	OH	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 ▼

498.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2013

Transaction ID : SA11AI.25276

Amount of Each Receipt this Period

70.98

Full Name (Last, First, Middle Initial)

**C. ROBERT E. MASTERS**

Mailing Address 3407 4th Street

City	State	Zip Code
Union Gap	WA	98903

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2013

Transaction ID : SA11AI.26084

Amount of Each Receipt this Period

21.00

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 PageFOR LINE NUMBER: PAGE 298 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. ROBERT E. MASTERS**

Mailing Address 3407 4th Street

City

Union Gap

State

WA

Zip Code

98903

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	1	3

Transaction ID : SA11AI.26083

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

**B. JILLIAN P. MATUNDAN**

Mailing Address 134 North Pine Avenue

City

Albany

State

NY

Zip Code

12203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

772.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	3

Transaction ID : SA11AI.24300

Amount of Each Receipt this Period

60.57

Full Name (Last, First, Middle Initial)

**C. JILLIAN P. MATUNDAN**

Mailing Address 134 North Pine Avenue

City

Albany

State

NY

Zip Code

12203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	3

Transaction ID : SA11AI.24301

Amount of Each Receipt this Period

60.57

**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 299 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. MATTHEW MAYERS**

Mailing Address 1833 Ontario Place NW

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

MANAGER, STRATEGIC RESEARCH

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

610.87

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24302

Amount of Each Receipt this Period

46.99

Full Name (Last, First, Middle Initial)

**B. MATTHEW MAYERS**

Mailing Address 1833 Ontario Place NW

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

MANAGER, STRATEGIC RESEARCH

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

657.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24303

Amount of Each Receipt this Period

46.99

Full Name (Last, First, Middle Initial)

**C. RANDALL MAYHEW**

Mailing Address 190 West 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 3/STAFF

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

231.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 01 / 2013

Transaction ID : SA11AI.24817

Amount of Each Receipt this Period

42.08

SUBTOTAL of Receipts This Page (optional)..... ►

136.06

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 300 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. JEFF MAZUR</b></p> <p>Mailing Address 503 Redwing Drive</p> <p>City Ashland State MO Zip Code 65010</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MO CN 72 Occupation COUNCIL DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 460.46</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 02 / 2013  <b>Transaction ID : SA11AI.25139</b></p> <p>Amount of Each Receipt this Period  35.42</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. JEFF MAZUR</b></p> <p>Mailing Address 503 Redwing Drive</p> <p>City Ashland State MO Zip Code 65010</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MO CN 72 Occupation COUNCIL DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 495.88</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 23 / 2013  <b>Transaction ID : SA11AI.25138</b></p> <p>Amount of Each Receipt this Period  35.42</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. ELISSA MCBRIDE</b></p> <p>Mailing Address 9 Sherman Avenue</p> <p>City Takoma Park State MD Zip Code 20912</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation DIRECTOR, EDUCATION</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1433.64</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013  <b>Transaction ID : SA11AI.24304</b></p> <p>Amount of Each Receipt this Period  110.28</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>181.12</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 301 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. 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  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1543.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

Transaction ID : SA11AI.24305

Amount of Each Receipt this Period

110.28

Full Name (Last, First, Middle Initial)

**B. CYNTHIA R. MCCABE**

Mailing Address 4608 Harvard Road

City

College Park

State

MD

Zip Code

20740

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSIST. DIRECTOR, EDITORIAL/PRODUCTI

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

925.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

Transaction ID : SA11AI.24306

Amount of Each Receipt this Period

71.23

Full Name (Last, First, Middle Initial)

**C. CYNTHIA R. MCCABE**

Mailing Address 4608 Harvard Road

City

College Park

State

MD

Zip Code

20740

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSIST. DIRECTOR, EDITORIAL/PRODUCTI

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

997.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

Transaction ID : SA11AI.24307

Amount of Each Receipt this Period

71.23

**SUBTOTAL** of Receipts This Page (optional)..... ►

252.74

**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 302 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. BOYD B. MCCAMISH</b></p> <p>Mailing Address 1004 Woodtown Drive</p> <p>City State Zip Code Gahanna OH 43230</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L FIELD EDUCATION COORDINATOR II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>579.67</b></p>			<p>Date of Receipt M M / D D / Y Y Y Y Y <b>07 / 15 / 2013</b></p> <p><b>Transaction ID : SA11AI.24308</b></p> <p>Amount of Each Receipt this Period <b>44.59</b></p>		
<p>Full Name (Last, First, Middle Initial) <b>B. BOYD B. MCCAMISH</b></p> <p>Mailing Address 1004 Woodtown Drive</p> <p>City State Zip Code Gahanna OH 43230</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L FIELD EDUCATION COORDINATOR II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>624.26</b></p>			<p>Date of Receipt M M / D D / Y Y Y Y Y <b>07 / 31 / 2013</b></p> <p><b>Transaction ID : SA11AI.24309</b></p> <p>Amount of Each Receipt this Period <b>44.59</b></p>		
<p>Full Name (Last, First, Middle Initial) <b>C. MARGARET MCCANN</b></p> <p>Mailing Address 103 Lynnmore Drive</p> <p>City State Zip Code Silver Spring MD 20901</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L ASSOCIATE GENERAL COUNSEL II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>817.61</b></p>			<p>Date of Receipt M M / D D / Y Y Y Y Y <b>07 / 15 / 2013</b></p> <p><b>Transaction ID : SA11AI.24310</b></p> <p>Amount of Each Receipt this Period <b>60.97</b></p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><b>150.15</b></p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p></p>		

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 303 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. MARGARET MCCANN**

Mailing Address 103 Lynnmore Drive

City  
Silver SpringState Zip Code  
MD 20901FEC 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 ▼

878.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

Transaction ID : SA11AI.24311

Amount of Each Receipt this Period

60.97

Full Name (Last, First, Middle Initial)

**B. ANDY MCCANTS**

Mailing Address 1210 195th Street E.

City  
SpanawayState Zip Code  
WA 98387FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2013

Transaction ID : SA11AI.26086

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

**C. ANDY MCCANTS**

Mailing Address 1210 195th Street E.

City  
SpanawayState Zip Code  
WA 98387FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2013

Transaction ID : SA11AI.26085

Amount of Each Receipt this Period

21.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

102.97

**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 304 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. JOSH MCCARROLL**

Mailing Address 3412 Knipp Drive  
Suite 102

City State Zip Code  
Jefferson City MO 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 ▼

249.21

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25141

Amount of Each Receipt this Period

19.17

Full Name (Last, First, Middle Initial)

**B. JOSH MCCARROLL**

Mailing Address 3412 Knipp Drive  
Suite 102

City State Zip Code  
Jefferson City MO 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 ▼

268.38

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 23 / 2013

Transaction ID : SA11AI.25140

Amount of Each Receipt this Period

19.17

Full Name (Last, First, Middle Initial)

**C. SUZANNE MCCORMICK**

Mailing Address 32 Harvest Lane

City State Zip Code  
West Grove PA 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 ▼

473.90

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25887

Amount of Each Receipt this Period

67.70

**SUBTOTAL** of Receipts This Page (optional)..... ►

106.04

**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 305 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. THOMAS F. MCCracken</b></p> <p>Mailing Address 343 East Main Street</p> <p>City State Zip Code          Mahaffey PA 15757-0000</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation          AFSCME PA CN 13/STATE OF PA STATE SUPERVISOR DISTR 2</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">210.00</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 31 / 2013</span>  <b>Transaction ID : SA11AI.25888</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">30.00</span></p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. JENNIFER A. MCCulley</b></p> <p>Mailing Address 509 Ashton Drive</p> <p>City State Zip Code          Fitchburg WI 53593</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation          AFSCME WI CN 40 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">345.00</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 01 / 2013</span>  <b>Transaction ID : SA11AI.26221</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">125.00</span></p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. JENNIFER A. MCCulley</b></p> <p>Mailing Address 509 Ashton Drive</p> <p>City State Zip Code          Fitchburg WI 53593</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation          AFSCME WI CN 40 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">400.00</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 02 / 2013</span>  <b>Transaction ID : SA11AI.26217</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">55.00</span></p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">210.00</span>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;"></span>	

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 306 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. JENNIFER A. MCCULLEY</b></p> <p>Mailing Address 509 Ashton Drive</p> <p>City State Zip Code  Fitchburg WI 53593</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME WI CN 40 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  455.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 30 / 2013  <b>Transaction ID : SA11AI.26220</b></p> <p>Amount of Each Receipt this Period  55.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. BRIAN P. MCDONNELL</b></p> <p>Mailing Address 56 Chestnut Lane</p> <p>City State Zip Code  Niskayuna NY 12309</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME INT'L POLITICAL ACTION COORDINATOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  634.27</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013  <b>Transaction ID : SA11AI.24312</b></p> <p>Amount of Each Receipt this Period  48.79</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. BRIAN P. MCDONNELL</b></p> <p>Mailing Address 56 Chestnut Lane</p> <p>City State Zip Code  Niskayuna NY 12309</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME INT'L POLITICAL ACTION COORDINATOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  683.06</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013  <b>Transaction ID : SA11AI.24313</b></p> <p>Amount of Each Receipt this Period  48.79</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>152.58</p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 307 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. 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/STATE STREETOccupation  
RETIREE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

959.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	08	/	2013

Transaction ID : SA11AI.24314

Amount of Each Receipt this Period

137.05

Full Name (Last, First, Middle Initial)

**B. 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 13Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	22	/	2013

Transaction ID : SA11AI.25890

Amount of Each Receipt this Period

48.66

Full Name (Last, First, Middle Initial)

**C. STEPHEN P. MCGILLIS**

Mailing Address 2131 NE Brook View Drive

City	State	Zip Code
Vancouver	WA	98686

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WA CN 28/STATE OF WAOccupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	17	/	2013

Transaction ID : SA11AI.26087

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

235.71

**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 308 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. NANCY MCGOVERN**

Mailing Address 8 Beacon Street

City  
Boston

State  
MA

Zip Code  
02108-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MA CN 93

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.24786

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. LYNNE E. MCGRAW**

Mailing Address 1258 Smersset 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 OF ACCOUNTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25711

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**C. LYNNE E. MCGRAW**

Mailing Address 1258 Smersset 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 OF ACCOUNTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25710

Amount of Each Receipt this Period

35.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

120.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 309 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. CHAD MCKENNA**

Mailing Address 623 N. 39th Avenue W.

City State Zip Code  
Duluth MN 56817

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.40

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 08 / 2013

Transaction ID : SA11AI.25039

Amount of Each Receipt this Period

43.32

Full Name (Last, First, Middle Initial)

**B. KRISTEN E. MCKINLEY**

Mailing Address 3656 Cannongate Drive

City State Zip Code  
Columbus OH 43228

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

STAFF ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.12

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25713

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

**C. KRISTEN E. MCKINLEY**

Mailing Address 3656 Cannongate Drive

City State Zip Code  
Columbus OH 43228

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

STAFF ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.36

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25712

Amount of Each Receipt this Period

19.24

**SUBTOTAL** of Receipts This Page (optional)..... ►

81.80

**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 310 OF 516

(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**

<p>Full Name (Last, First, Middle Initial) <b>A. PETER M. MCLINDEN</b></p> <p>Mailing Address 935 Pamela Road</p> <p>City State Zip Code Cincinnati OH 45255</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH CN 8 ASSOCIATE COUNSEL</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>607.64</b></p>			<p>Date of Receipt M M / D D / Y Y Y Y Y <b>07 / 01 / 2013</b></p> <p><b>Transaction ID : SA11AI.25277</b></p> <p>Amount of Each Receipt this Period <b>86.42</b></p>		
<p>Full Name (Last, First, Middle Initial) <b>B. MARILYN MCMAHON</b></p> <p>Mailing Address 7717 28th NW</p> <p>City State Zip Code Seattle WA 98117</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WA CN 28/STATE OF WA NURSE CONSULTANT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>210.00</b></p>			<p>Date of Receipt M M / D D / Y Y Y Y Y <b>07 / 25 / 2013</b></p> <p><b>Transaction ID : SA11AI.26089</b></p> <p>Amount of Each Receipt this Period <b>15.00</b></p>		
<p>Full Name (Last, First, Middle Initial) <b>C. BARBARA A. MCMASTER</b></p> <p>Mailing Address 2555-Royal County Dn.</p> <p>City State Zip Code Uniontown OH 44685</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH CN 8 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>293.32</b></p>			<p>Date of Receipt M M / D D / Y Y Y Y Y <b>07 / 01 / 2013</b></p> <p><b>Transaction ID : SA11AI.25278</b></p> <p>Amount of Each Receipt this Period <b>36.26</b></p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><b>137.68</b></p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p></p>		

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 311 OF 516

<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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. EDWARD MCNEIL**

Mailing Address 2546 Edison

City  
DetroitState  
MIZip Code  
48206FEC 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 ▼

533.13

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	3

Transaction ID : SA11AI.24888

Amount of Each Receipt this Period

41.01

Full Name (Last, First, Middle Initial)

**B. EDWARD MCNEIL**

Mailing Address 2546 Edison

City  
DetroitState  
MIZip Code  
48206FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

574.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	3

Transaction ID : SA11AI.24887

Amount of Each Receipt this Period

41.01

Full Name (Last, First, Middle Initial)

**C. BRENDA S. MCTURNER**

Mailing Address 61 Clairdon Drive

City  
LucasvilleState  
OHZip Code  
45648FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

SECRETARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	1	3

Transaction ID : SA11AI.25489

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

97.02

**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 PageFOR LINE NUMBER: PAGE 312 OF 516  
(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**

<b>A. BRENDA S. MCTURNER</b> Full Name (Last, First, Middle Initial) Mailing Address 61 Clairdon Drive City Lucasville State OH Zip Code 45648 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation SECRETARY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 222.00		Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2013 <b>Transaction ID : SA11AI.25488</b> Amount of Each Receipt this Period 15.00
<b>B. GERARD J. MEARA</b> Full Name (Last, First, Middle Initial) Mailing Address 65 Harmony Way City Newton State PA Zip Code 18940 FEC ID number of contributing federal political committee. C Name of Employer AFSCME NJ CN 73 Occupation DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.25169</b> Amount of Each Receipt this Period 15.00
<b>C. GERARD J. MEARA</b> Full Name (Last, First, Middle Initial) Mailing Address 65 Harmony Way City Newton State PA Zip Code 18940 FEC ID number of contributing federal political committee. C Name of Employer AFSCME NJ CN 73 Occupation DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		Date of Receipt M M / D D / Y Y Y Y Y 07 / 30 / 2013 <b>Transaction ID : SA11AI.25167</b> Amount of Each Receipt this Period 15.00
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		45.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶		



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 313 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. SALLY MECKLING**

Mailing Address 390 Worthington Road

City	State	Zip Code
Westerville	OH	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 ▼

505.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2013

Transaction ID : SA11AI.25491

Amount of Each Receipt this Period

67.46

Full Name (Last, First, Middle Initial)

**B. SALLY MECKLING**

Mailing Address 390 Worthington Road

City	State	Zip Code
Westerville	OH	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 ▼

573.41

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	30	/	2013

Transaction ID : SA11AI.25492

Amount of Each Receipt this Period

67.46

Full Name (Last, First, Middle Initial)

**C. RUDO M. MEDA**Mailing Address 7507 Parkwood Court  
Apt #304

City	State	Zip Code
Falls Church	VA	22042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

Transaction ID : SA11AI.24315

Amount of Each Receipt this Period

22.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

156.92

**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 314 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. RUDO M. MEDA**

Mailing Address 7507 Parkwood Court  
Apt #304

City State Zip Code  
Falls Church VA 22042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24316

Amount of Each Receipt this Period

22.44

Full Name (Last, First, Middle Initial)

**B. YOLANDA MEDINA**

Mailing Address 8 Ralph Street  
Apt. 1

City State Zip Code  
Bergenfield NJ 07621-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD EDUCATION COORDINATOR II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24317

Amount of Each Receipt this Period

44.59

Full Name (Last, First, Middle Initial)

**C. YOLANDA MEDINA**

Mailing Address 8 Ralph Street  
Apt. 1

City State Zip Code  
Bergenfield NJ 07621-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD EDUCATION COORDINATOR II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24318

Amount of Each Receipt this Period

44.59

**SUBTOTAL** of Receipts This Page (optional)..... ►

111.62

**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 315 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. DONALD MEHREN</b></p> <p>Mailing Address 6925 Woodland Blvd.</p> <p>City Minnesota City State MN Zip Code 55959</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>340.00</b></p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 05 / 2013  <b>Transaction ID : SA11AI.25040</b></p> <p>Amount of Each Receipt this Period  <b>60.00</b></p>		
<p>Full Name (Last, First, Middle Initial) <b>B. DONALD MEHREN</b></p> <p>Mailing Address 6925 Woodland Blvd.</p> <p>City Minnesota City State MN Zip Code 55959</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>400.00</b></p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013  <b>Transaction ID : SA11AI.25041</b></p> <p>Amount of Each Receipt this Period  <b>60.00</b></p>		
<p>Full Name (Last, First, Middle Initial) <b>C. NANINE MEIKLEJOHN</b></p> <p>Mailing Address 4909 Aurora Drive</p> <p>City Kensington State MD Zip Code 20895</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation LEGISLATIVE AFFAIRS SPECIALIST III</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>541.59</b></p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013  <b>Transaction ID : SA11AI.24319</b></p> <p>Amount of Each Receipt this Period  <b>48.25</b></p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><b>168.25</b></p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 316 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. NANINE MEIKLEJOHN</b></p> <p>Mailing Address 4909 Aurora Drive</p> <p>City State Zip Code  Kensington MD 20895</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME INT'L LEGISLATIVE AFFAIRS SPECIALIST III</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  589.84</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013  <b>Transaction ID : SA11AI.24320</b></p> <p>Amount of Each Receipt this Period  48.25</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. JANICE MELDRUM</b></p> <p>Mailing Address 2904 Sue Drive</p> <p>City State Zip Code  Jefferson City MO 65109</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME MO CN 72 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  205.01</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 02 / 2013  <b>Transaction ID : SA11AI.25143</b></p> <p>Amount of Each Receipt this Period  15.77</p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. JANICE MELDRUM</b></p> <p>Mailing Address 2904 Sue Drive</p> <p>City State Zip Code  Jefferson City MO 65109</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME MO CN 72 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  220.78</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 23 / 2013  <b>Transaction ID : SA11AI.25142</b></p> <p>Amount of Each Receipt this Period  15.77</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>79.79</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 317 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. STEPHEN M MELLO**

Mailing Address 449 High Street #1F

City  
Somerset

State  
MA

Zip Code  
02726

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MA CN 93

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 11 / 2013

Transaction ID : SA11AI.24787

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. DAVID A MENDOZA**

Mailing Address 4301 N. 21st Street  
Unit # 7

City  
Phoenix

State  
AZ

Zip Code  
85016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION REPRESENTATIVE III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

626.79

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24321

Amount of Each Receipt this Period

48.25

Full Name (Last, First, Middle Initial)

**C. DAVID A MENDOZA**

Mailing Address 4301 N. 21st Street  
Unit # 7

City  
Phoenix

State  
AZ

Zip Code  
85016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION REPRESENTATIVE III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.04

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24322

Amount of Each Receipt this Period

48.25

**SUBTOTAL** of Receipts This Page (optional)..... ►

136.50

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 318 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. PAUL MERCATANTI**

Mailing Address 1306 Tarpan Circle

City

New Hope

State

PA

Zip Code

18938

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME NJ CN 73

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  
07 / 15 / 2013

Transaction ID : SA11AI.25171

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. PAUL MERCATANTI**

Mailing Address 1306 Tarpan Circle

City

New Hope

State

PA

Zip Code

18938

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME NJ CN 73

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  
07 / 30 / 2013

Transaction ID : SA11AI.25170

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. MAGGIE MERDLER**

Mailing Address 8033 Excelsior Drive  
Suite C

City

Madison

State

WI

Zip Code

53717

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 ▼

346.36

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 09 / 2013

Transaction ID : SA11AI.26189

Amount of Each Receipt this Period

53.56

**SUBTOTAL** of Receipts This Page (optional)..... ►

83.56

**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 319 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. MICHAEL MEREDITH**

Mailing Address 1415 Ivy Hill Road

City State Zip Code  
 Cockeysville MD 21030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 AFSCME MD CN 982

Occupation  
 ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

373.38

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 01 / 2013

**Transaction ID : SA11AI.24819**

Amount of Each Receipt this Period

53.34

Full Name (Last, First, Middle Initial)

**B. MICHAEL J. MESSINA**

Mailing Address 752 Silver Spring Avenue

City State Zip Code  
 Silver Spring MD 20910

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 AFSCME INT'L

Occupation  
 LABOR ECONOMIST III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 15 / 2013

**Transaction ID : SA11AI.24323**

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**C. MICHAEL J. MESSINA**

Mailing Address 752 Silver Spring Avenue

City State Zip Code  
 Silver Spring MD 20910

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 AFSCME INT'L

Occupation  
 LABOR ECONOMIST III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 31 / 2013

**Transaction ID : SA11AI.24324**

Amount of Each Receipt this Period

35.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

123.34

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 320 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. CINDY A. MICHAEL</b></p> <p>Mailing Address 331 Central Parkway</p> <p>City Warren State OH Zip Code 44483</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ <b>395.26</b></p>			<p>Date of Receipt  <b>07 / 01 / 2013</b>  <b>Transaction ID : SA11AI.25279</b> </p> <p>Amount of Each Receipt this Period  <b>63.58</b> </p>	
<p>Full Name (Last, First, Middle Initial) <b>B. JOHN MICHALEC</b></p> <p>Mailing Address 1544 N. Hickory</p> <p>City Owosso State MI Zip Code 48867</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ <b>273.00</b></p>			<p>Date of Receipt  <b>07 / 02 / 2013</b>  <b>Transaction ID : SA11AI.24890</b> </p> <p>Amount of Each Receipt this Period  <b>21.00</b> </p>	
<p>Full Name (Last, First, Middle Initial) <b>C. JOHN MICHALEC</b></p> <p>Mailing Address 1544 N. Hickory</p> <p>City Owosso State MI Zip Code 48867</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ <b>294.00</b></p>			<p>Date of Receipt  <b>07 / 16 / 2013</b>  <b>Transaction ID : SA11AI.24889</b> </p> <p>Amount of Each Receipt this Period  <b>21.00</b> </p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><b>105.58</b></p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p></p>	



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 321 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<b>A. GLENARD MIDDLETON</b> Full Name (Last, First, Middle Initial) Mailing Address 5108 Yellowwood Ave City Baltimore State MD Zip Code 21209-4611 FEC ID number of contributing federal political committee. C Name of Employer AFSCME MD CN 67 Occupation EXECUTIVE DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1434.00			Date of Receipt M M / D D / Y Y Y Y Y 07 / 09 / 2013 <b>Transaction ID : SA11AI.24840</b> Amount of Each Receipt this Period 180.00
<b>B. GLENARD MIDDLETON</b> Full Name (Last, First, Middle Initial) Mailing Address 5108 Yellowwood Ave City Baltimore State MD Zip Code 21209-4611 FEC ID number of contributing federal political committee. C Name of Employer AFSCME MD CN 67 Occupation EXECUTIVE DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1448.00			Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24841</b> Amount of Each Receipt this Period 14.00
<b>C. ARTHUR MILLER</b> Full Name (Last, First, Middle Initial) Mailing Address 911 White Avenue City Cloquet State MN Zip Code 55720 FEC ID number of contributing federal political committee. C Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 245.00			Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.25042</b> Amount of Each Receipt this Period 30.00
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			224.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 322 OF 516  
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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**

<p>Full Name (Last, First, Middle Initial) <b>A. JOHN E. MILLER</b></p> <p>Mailing Address 3020 94th Avenue E.</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Seattle</td> <td style="width: 33%;">State WA</td> <td style="width: 33%;">Zip Code 98126</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME WA CN 28/UNIV OF WA</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">280.00</span> </p>			City Seattle	State WA	Zip Code 98126	Name of Employer AFSCME WA CN 28/UNIV OF WA	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt</p> <table style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">M M M 07</td> <td style="width: 33%; text-align: center;">D D D 10</td> <td style="width: 33%; text-align: center;">Y Y Y Y Y Y 2013</td> </tr> </table> <p><b>Transaction ID : SA11AI.26092</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">20.00</span> </p>		M M M 07	D D D 10	Y Y Y Y Y Y 2013
City Seattle	State WA	Zip Code 98126										
Name of Employer AFSCME WA CN 28/UNIV OF WA	Occupation STAFF REPRESENTATIVE											
M M M 07	D D D 10	Y Y Y Y Y Y 2013										
<p>Full Name (Last, First, Middle Initial) <b>B. JOHN E. MILLER</b></p> <p>Mailing Address 3020 94th Avenue E.</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Seattle</td> <td style="width: 33%;">State WA</td> <td style="width: 33%;">Zip Code 98126</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME WA CN 28/UNIV OF WA</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">300.00</span> </p>			City Seattle	State WA	Zip Code 98126	Name of Employer AFSCME WA CN 28/UNIV OF WA	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt</p> <table style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">M M M 07</td> <td style="width: 33%; text-align: center;">D D D 25</td> <td style="width: 33%; text-align: center;">Y Y Y Y Y Y 2013</td> </tr> </table> <p><b>Transaction ID : SA11AI.26093</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">20.00</span> </p>		M M M 07	D D D 25	Y Y Y Y Y Y 2013
City Seattle	State WA	Zip Code 98126										
Name of Employer AFSCME WA CN 28/UNIV OF WA	Occupation STAFF REPRESENTATIVE											
M M M 07	D D D 25	Y Y Y Y Y Y 2013										
<p>Full Name (Last, First, Middle Initial) <b>C. MATTHEW A. MILLER</b></p> <p>Mailing Address 207 W Marshall Street</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Marshall</td> <td style="width: 33%;">State MN</td> <td style="width: 33%;">Zip Code 56852</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME MN CN 65</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">461.94</span> </p>			City Marshall	State MN	Zip Code 56852	Name of Employer AFSCME MN CN 65	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt</p> <table style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">M M M 07</td> <td style="width: 33%; text-align: center;">D D D 05</td> <td style="width: 33%; text-align: center;">Y Y Y Y Y Y 2013</td> </tr> </table> <p><b>Transaction ID : SA11AI.25123</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">68.70</span> </p>		M M M 07	D D D 05	Y Y Y Y Y Y 2013
City Marshall	State MN	Zip Code 56852										
Name of Employer AFSCME MN CN 65	Occupation STAFF REPRESENTATIVE											
M M M 07	D D D 05	Y Y Y Y Y Y 2013										
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p> <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p><span style="border: 1px solid black; padding: 2px;">108.70</span></p> <p><span style="border: 1px solid black; padding: 2px;"></span></p>									

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 323 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

## **A. STACEY MILLER**

Mailing Address 917 W 3RD STREET

#1

City

DAVENPORT

State

IA

Zip Code

52802

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25891

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

## **B. TIMOTHY MILLER**

Mailing Address 2724 Pine Avenue

City

Altoona

State

PA

Zip Code

16601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.41

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25894

Amount of Each Receipt this Period

91.45

Full Name (Last, First, Middle Initial)

## **C. HAROLD F. MITCHELL**

Mailing Address 3999 Kensington 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 ▼

792.24

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2013

Transaction ID : SA11AI.25280

Amount of Each Receipt this Period

114.22

SUBTOTAL of Receipts This Page (optional)..... ►

245.67

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 324 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. DEREK M. MIZUNO</b></p> <p>Mailing Address 888 Mililani Street  Suite 601</p> <p>City Honolulu State HI Zip Code 96813-2991</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  350.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 10 / 2013  <b>Transaction ID : SA11AI.24618</b></p> <p>Amount of Each Receipt this Period  80.82</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. AMBER F. MOATS</b></p> <p>Mailing Address 107 Spahr P.O. Box 95</p> <p>City Mount Union State IA Zip Code 52644</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME IA CN 61/STATE OF IA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  215.74</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 12 / 2013  <b>Transaction ID : SA11AI.24719</b></p> <p>Amount of Each Receipt this Period  15.41</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. AMBER F. MOATS</b></p> <p>Mailing Address 107 Spahr P.O. Box 95</p> <p>City Mount Union State IA Zip Code 52644</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME IA CN 61/STATE OF IA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  231.15</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 23 / 2013  <b>Transaction ID : SA11AI.24720</b></p> <p>Amount of Each Receipt this Period  15.41</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p> <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		<p>80.82</p>

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 325 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

## **A. HARRY MOBLEY**

Mailing Address 2635 Cranberry Circle

City State Zip Code  
Harrisburg PA 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 ▼

488.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25895

Amount of Each Receipt this Period

73.16

Full Name (Last, First, Middle Initial)

## **B. KELLY L. MOBLEY**

Mailing Address 3739 Elmlawn Drive

City State Zip Code  
Toledo OH 43614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.94

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25714

Amount of Each Receipt this Period

38.47

Full Name (Last, First, Middle Initial)

## **C. KELLY L. MOBLEY**

Mailing Address 3739 Elmlawn Drive

City State Zip Code  
Toledo OH 43614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.41

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25715

Amount of Each Receipt this Period

38.47

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.10

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:  
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PAGE 326 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<b>A. MATTHEW J. MOLEK</b> Full Name (Last, First, Middle Initial) Mailing Address 29140 Barjode Road City Willowick State OH Zip Code 44095 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4/WICKLIFFE CSD Occupation CUSTODIAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 310.92		Date of Receipt M M / D D / Y Y Y Y Y 07 / 19 / 2013 <b>Transaction ID : SA11AI.25716</b> Amount of Each Receipt this Period 41.68
<b>B. TRINA Molnar</b> Full Name (Last, First, Middle Initial) Mailing Address 14-8 Meadowlawn Drive City Mentor State OH Zip Code 44060 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 341.72		Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.25718</b> Amount of Each Receipt this Period 33.50
<b>C. TRINA Molnar</b> Full Name (Last, First, Middle Initial) Mailing Address 14-8 Meadowlawn Drive City Mentor State OH Zip Code 44060 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 375.22		Date of Receipt M M / D D / Y Y Y Y Y 07 / 19 / 2013 <b>Transaction ID : SA11AI.25717</b> Amount of Each Receipt this Period 33.50
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		108.68
<b>TOTAL</b> This Period (last page this line number only)..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 327 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. KAREN MOMBERGER</b></p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 22 / 2013  <b>Transaction ID : SA11AI.25896</b></p>		
<p>Mailing Address 102 Manor Road</p>			<p>Amount of Each Receipt this Period  91.74</p>		
<p>City New Kensington</p>	<p>State PA</p>	<p>Zip Code 15068</p>			
<p>FEC ID number of contributing federal political committee.  C</p>					
<p>Name of Employer AFSCME PA CN 13</p>		<p>Occupation STAFF REPRESENTATIVE</p>			
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>		<p>Aggregate Year-to-Date ▼  642.18</p>			
<p>Full Name (Last, First, Middle Initial)  <b>B. DOUGLAS MOORE</b></p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 05 / 2013  <b>Transaction ID : SA11AI.24546</b></p>		
<p>Mailing Address 10176 Foothill Court</p>			<p>Amount of Each Receipt this Period  40.00</p>		
<p>City Spring Valley</p>	<p>State CA</p>	<p>Zip Code 91977</p>			
<p>FEC ID number of contributing federal political committee.  C</p>					
<p>Name of Employer AFSCME CA LOC 3930</p>		<p>Occupation INT'L VICE PRESIDENT</p>			
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>		<p>Aggregate Year-to-Date ▼  364.00</p>			
<p>Full Name (Last, First, Middle Initial)  <b>C. DOUGLAS MOORE</b></p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013  <b>Transaction ID : SA11AI.24547</b></p>		
<p>Mailing Address 10176 Foothill Court</p>			<p>Amount of Each Receipt this Period  14.00</p>		
<p>City Spring Valley</p>	<p>State CA</p>	<p>Zip Code 91977</p>			
<p>FEC ID number of contributing federal political committee.  C</p>					
<p>Name of Employer AFSCME CA LOC 3930</p>		<p>Occupation INT'L VICE PRESIDENT</p>			
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>		<p>Aggregate Year-to-Date ▼  378.00</p>			
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>145.74</p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 328 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. ERIC D. MOORE**

Mailing Address 810 Wildwood Drive  
Apt 22

City State Zip Code  
Jefferson City MO 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 ▼

292.50

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25145

Amount of Each Receipt this Period

22.50

Full Name (Last, First, Middle Initial)

**B. ERIC D. MOORE**

Mailing Address 810 Wildwood Drive  
Apt 22

City State Zip Code  
Jefferson City MO 65109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MO CN 72

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 23 / 2013

Transaction ID : SA11AI.25144

Amount of Each Receipt this Period

22.50

Full Name (Last, First, Middle Initial)

**C. GLADYS K. MOORE**

Mailing Address 15104 Joppa Place

City State Zip Code  
Bowie MD 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 ▼

239.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24325

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 329 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. GLADYS K. MOORE</b></p> <p>Mailing Address 15104 Joppa Place</p> <p>City State Zip Code          Bowie MD 20721</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME INT'L LEGAL ASSISTANT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          254.00</p>		<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 31 / 2013  <b>Transaction ID : SA11AI.24326</b></p> <p>Amount of Each Receipt this Period          15.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. JULIANE MOORE</b></p> <p>Mailing Address 304 North Wenas Avenue</p> <p>City State Zip Code          Selah WA 98942</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          210.00</p>		<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 25 / 2013  <b>Transaction ID : SA11AI.26094</b></p> <p>Amount of Each Receipt this Period          15.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. LEONARD T. MOORE</b></p> <p>Mailing Address 5656 Echo Road</p> <p>City State Zip Code          Columbus OH 43230</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME OH LOC 11/STATE OF OH PAROLE &amp; COMM PROCESSING SPEC</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          210.00</p>		<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 12 / 2013  <b>Transaction ID : SA11AI.25495</b></p> <p>Amount of Each Receipt this Period          15.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p> <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		<p>45.00</p>

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 330 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. LEONARD T. MOORE</b></p> <p>Mailing Address 5656 Echo Road</p> <p>City State Zip Code Columbus OH 43230</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH PAROLE &amp; COMM PROCESSING SPEC</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2013 <b>Transaction ID : SA11AI.25494</b></p> <p>Amount of Each Receipt this Period 15.00</p>		
<p>Full Name (Last, First, Middle Initial) <b>B. LINDA E. MORALES</b></p> <p>Mailing Address 5343 Passons Blvd.</p> <p>City State Zip Code Pico Rivera CA 90660</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME CA LOC 1199/COPE NURSE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 205.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 30 / 2013 <b>Transaction ID : SA11AI.24519</b></p> <p>Amount of Each Receipt this Period 10.00</p>		
<p>Full Name (Last, First, Middle Initial) <b>C. PATRICK G. MORAN</b></p> <p>Mailing Address 415 U Street NW</p> <p>City State Zip Code Washington DC 20001</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L AREA ORGANIZING DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 890.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2013 <b>Transaction ID : SA11AI.24820</b></p> <p>Amount of Each Receipt this Period 177.50</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>202.50</p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 331 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. FRANCIS MORONEY**

Mailing Address 14 Jamaica Road

City

Brookline

State

MA

Zip Code

02146-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MA CN 93

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 07 / 02 / 2013

Transaction ID : SA11AI.24790

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

406.20

Date of Receipt

 M M / D D / Y Y Y Y Y  
 07 / 22 / 2013

Transaction ID : SA11AI.25897

Amount of Each Receipt this Period

67.70

Full Name (Last, First, Middle Initial)

**C. RACHEL C. MORROW**

Mailing Address 6221 Ssassafra Lane

City

Toledo

State

OH

Zip Code

43615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

285.50

Date of Receipt

 M M / D D / Y Y Y Y Y  
 07 / 02 / 2013

Transaction ID : SA11AI.25720

Amount of Each Receipt this Period

36.93

**SUBTOTAL** of Receipts This Page (optional)..... ►

144.63

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 332 OF 516

<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**

<b>A. RACHEL C. MORROW</b> Full Name (Last, First, Middle Initial) Mailing Address 6221 Ssassafras Lane City Toledo State OH Zip Code 43615 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation FIELD REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 322.43			Date of Receipt M M / D D / Y Y Y Y Y 07 / 19 / 2013 <b>Transaction ID : SA11AI.25719</b> Amount of Each Receipt this Period 36.93
<b>B. JULIE A. MOUNTS</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 45355 City Tacoma State WA Zip Code 98448 FEC ID number of contributing federal political committee. C Name of Employer AFSCME WA CN 28/SOWA Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2013 <b>Transaction ID : SA11AI.26097</b> Amount of Each Receipt this Period 15.00
<b>C. KATHERINE MOY-SANTOS</b> Full Name (Last, First, Middle Initial) Mailing Address 190 W. Ostend Street Suite 101 City Baltimore State MD Zip Code 21230 FEC ID number of contributing federal political committee. C Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 233.38			Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2013 <b>Transaction ID : SA11AI.24821</b> Amount of Each Receipt this Period 33.34
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			85.27
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 333 OF 516

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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**

<b>A. MICHELLE MULHERIN</b> Full Name (Last, First, Middle Initial) Mailing Address 2462 Cleveland Avenue City Reading State PA Zip Code 19609 FEC ID number of contributing federal political committee. C Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 512.12			Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013 <b>Transaction ID : SA11AI.25898</b> Amount of Each Receipt this Period 73.16	
<b>B. STEVEN C. MULLEN</b> Full Name (Last, First, Middle Initial) Mailing Address 544 Clermont Drive City Harrisburg State PA Zip Code 17112 FEC ID number of contributing federal political committee. C Name of Employer AFSCME PA CN 13 Occupation TRADES LABORER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 761.70			Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013 <b>Transaction ID : SA11AI.25899</b> Amount of Each Receipt this Period 152.34	
<b>C. ELVA MUNOZ</b> Full Name (Last, First, Middle Initial) Mailing Address 624 Larkspur Street City Lompoc State CA Zip Code 93436 FEC ID number of contributing federal political committee. C Name of Employer AFSCME CA LOC 3930 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00			Date of Receipt M M / D D / Y Y Y Y Y 07 / 05 / 2013 <b>Transaction ID : SA11AI.24548</b> Amount of Each Receipt this Period 30.00	
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			255.50	
<b>TOTAL</b> 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

FOR LINE NUMBER: PAGE 334 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. TRACY J MUNTZ</b></p> <p>Mailing Address 3220 Ray Nash Drive NW</p> <p>City State Zip Code Gig Harbor WA 98335</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2013 <b>Transaction ID : SA11AI.26100</b></p> <p>Amount of Each Receipt this Period 15.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. DEBORA A. MURPHY</b></p> <p>Mailing Address 5718 Mayfair Street SW</p> <p>City State Zip Code Cedar Rapids IA 52404</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME IA CN 61/STATE OF IA STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 12 / 2013 <b>Transaction ID : SA11AI.24723</b></p> <p>Amount of Each Receipt this Period 15.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. DEBORA A. MURPHY</b></p> <p>Mailing Address 5718 Mayfair Street SW</p> <p>City State Zip Code Cedar Rapids IA 52404</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME IA CN 61/STATE OF IA STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 23 / 2013 <b>Transaction ID : SA11AI.24724</b></p> <p>Amount of Each Receipt this Period 15.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>45.00</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 335 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. MICHAEL P. MURPHY</b></p> <p>Mailing Address 92 Eddington Avenue</p> <p>City Harrisburg State PA Zip Code 17111</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>574.00</b></p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013  <b>Transaction ID : SA11AI.25900</b></p> <p>Amount of Each Receipt this Period  <b>82.00</b></p>
<p>Full Name (Last, First, Middle Initial) <b>B. RYAN MURPHY</b></p> <p>Mailing Address 190 W. Ostend Street Suite 101</p> <p>City Baltimore State MD Zip Code 21230</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>239.12</b></p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 01 / 2013  <b>Transaction ID : SA11AI.24822</b></p> <p>Amount of Each Receipt this Period  <b>34.16</b></p>
<p>Full Name (Last, First, Middle Initial) <b>C. CATHY MYER</b></p> <p>Mailing Address 3021 S Tacoma</p> <p>City Indianapolis State IN Zip Code 46237</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME IN CN 62 Occupation ORGANIZER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>280.00</b></p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 02 / 2013  <b>Transaction ID : SA11AI.24774</b></p> <p>Amount of Each Receipt this Period  <b>40.00</b></p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p><b>156.16</b></p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 336 OF 516

<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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. STEVEN L. MYERS**

Mailing Address 696 Hull Road

City

Mansfield

State

OH

Zip Code

44907

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		0	2		2	0	1	3		

**Transaction ID : SA11AI.25721**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. STEVEN L. MYERS**

Mailing Address 696 Hull Road

City

Mansfield

State

OH

Zip Code

44907

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	9	2	0	1	3		

**Transaction ID : SA11AI.25722**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. PHYLLIS S. 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

COUNCIL REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

465.82

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	4	2	0	1	3		

**Transaction ID : SA11AI.26103**

Amount of Each Receipt this Period

52.26

**SUBTOTAL** of Receipts This Page (optional)..... ▶

132.26

**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 337 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. KENNY L. NANCE**

Mailing Address 583 Monticello Avenue

City	State	Zip Code
Riverside	OH	45404

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 4/MAD RIVER LS

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2013

Transaction ID : SA11AI.25723

Amount of Each Receipt this Period

62.50

Full Name (Last, First, Middle Initial)

**B. REBECCA NASSARRE**

Mailing Address 1701 S Norfolk Street

City	State	Zip Code
San Mateo	CA	94403

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME CA CN 57/SAN MATEO CNTY

Occupation

SOCIAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	03	/	2013

Transaction ID : SA11AI.24484

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. REBECCA NASSARRE**

Mailing Address 1701 S Norfolk Street

City	State	Zip Code
San Mateo	CA	94403

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME CA CN 57/SAN MATEO CNTY

Occupation

SOCIAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

Transaction ID : SA11AI.24483

Amount of Each Receipt this Period

2.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

114.50

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 338 OF 516

<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**

<b>A. RACHEL E. NAUMAN</b> Full Name (Last, First, Middle Initial) Mailing Address 11021 Horseshoe Drive City State Zip Code Frederick MD 21701-3397 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation AFSCME INT'L SPECIAL ASSISTANT TO SECRETARY TREASURER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 641.55			Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24328</b> Amount of Each Receipt this Period 49.35	
<b>B. RACHEL E. NAUMAN</b> Full Name (Last, First, Middle Initial) Mailing Address 11021 Horseshoe Drive City State Zip Code Frederick MD 21701-3397 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation AFSCME INT'L SPECIAL ASSISTANT TO SECRETARY TREASURER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 690.90			Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24329</b> Amount of Each Receipt this Period 49.35	
<b>C. CHELSA A. NELSON</b> Full Name (Last, First, Middle Initial) Mailing Address 300 Hardman Avenue South City State Zip Code South St. Paul MN 55075 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation AFSCME MN CN 5/CN14 STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 324.84			Date of Receipt M M / D D / Y Y Y Y Y 07 / 08 / 2013 <b>Transaction ID : SA11AI.25045</b> Amount of Each Receipt this Period 48.72	
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			147.42	
<b>TOTAL</b> This Period (last page this line number only)..... ▶				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 339 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. 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  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

541.50

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 08 / 2013

Transaction ID : SA11AI.25047

Amount of Each Receipt this Period

72.56

Full Name (Last, First, Middle Initial)

**B. MATTHEW NELSON**

Mailing Address 909 Carmen Lane

City

Mendota Heights

State

MN

Zip Code

55118

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 08 / 2013

Transaction ID : SA11AI.25050

Amount of Each Receipt this Period

32.00

Full Name (Last, First, Middle Initial)

**C. RICHARD NELSON**

Mailing Address 315 South Park

City

Springfield

State

MN

Zip Code

56087

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 65

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

504.12

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 05 / 2013

Transaction ID : SA11AI.25125

Amount of Each Receipt this Period

69.88

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

174.44

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 340 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. JESSE NEWCOMER IV</b></p> <p>Mailing Address 2109 Circle Road</p> <p>City State Zip Code Carlisle PA 17013</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 688.05</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013</p> <p><b>Transaction ID : SA11AI.25901</b></p> <p>Amount of Each Receipt this Period 137.61</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. CATHY L. NEWTON</b></p> <p>Mailing Address 221 E. Mulberry Street</p> <p>City State Zip Code Bryan OH 43506</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH ODJFS CUSTOMER SERVICES</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 420.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 12 / 2013</p> <p><b>Transaction ID : SA11AI.25499</b></p> <p>Amount of Each Receipt this Period 30.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. CATHY L. NEWTON</b></p> <p>Mailing Address 221 E. Mulberry Street</p> <p>City State Zip Code Bryan OH 43506</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH ODJFS CUSTOMER SERVICES</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 450.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2013</p> <p><b>Transaction ID : SA11AI.25498</b></p> <p>Amount of Each Receipt this Period 30.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>197.61</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p></p>	

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 341 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. MARY L. NICHOL</b></p> <p>Mailing Address 1117 Meridian Street N. Apt. E3</p> <p>City Puyallup State WA Zip Code 98371</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 260.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 10 / 2013</p> <p>Transaction ID : SA11AI.26104</p> <p>Amount of Each Receipt this Period 20.00</p>
<p>Full Name (Last, First, Middle Initial) <b>B. MARY L. NICHOL</b></p> <p>Mailing Address 1117 Meridian Street N. Apt. E3</p> <p>City Puyallup State WA Zip Code 98371</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 280.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2013</p> <p>Transaction ID : SA11AI.26105</p> <p>Amount of Each Receipt this Period 20.00</p>
<p>Full Name (Last, First, Middle Initial) <b>C. SHERYL L. NICHOLS</b></p> <p>Mailing Address 2410 East Fifth Street</p> <p>City Dayton State OH Zip Code 45403</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 289.99</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2013</p> <p>Transaction ID : SA11AI.25282</p> <p>Amount of Each Receipt this Period 36.06</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		76.06
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 342 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. LEROY J. NIDA**

Mailing Address 208 F Place

City

Kalona

State

IA

Zip Code

52247

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

257.04

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 12 / 2013

Transaction ID : SA11AI.24726

Amount of Each Receipt this Period

18.36

Full Name (Last, First, Middle Initial)

**B. LEROY J. NIDA**

Mailing Address 208 F Place

City

Kalona

State

IA

Zip Code

52247

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

275.40

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 23 / 2013

Transaction ID : SA11AI.24725

Amount of Each Receipt this Period

18.36

Full Name (Last, First, Middle Initial)

**C. 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

LEGISLATIVE/POLITICAL ACTION DIRECTOR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1120.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 08 / 2013

Transaction ID : SA11AI.25053

Amount of Each Receipt this Period

160.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

196.72

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 343 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. JOSEPH NILSSON</b></p> <p>Mailing Address 3215 Eastland Circle SE</p> <p>City Olympia State WA Zip Code 98501</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WA CN 28/STATE OF WA Occupation CLERICAL</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 273.00</p>			<p>Date of Receipt  <b>07 / 10 / 2013</b>  <b>Transaction ID : SA11AI.26107</b> </p> <p>Amount of Each Receipt this Period 21.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. JOSEPH NILSSON</b></p> <p>Mailing Address 3215 Eastland Circle SE</p> <p>City Olympia State WA Zip Code 98501</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WA CN 28/STATE OF WA Occupation CLERICAL</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 294.00</p>			<p>Date of Receipt  <b>07 / 25 / 2013</b>  <b>Transaction ID : SA11AI.26106</b> </p> <p>Amount of Each Receipt this Period 21.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. STEVEN S. NORRIS</b></p> <p>Mailing Address 921 Unity Drive</p> <p>City Mansfield State OH Zip Code 44905</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 266.00</p>			<p>Date of Receipt  <b>07 / 12 / 2013</b>  <b>Transaction ID : SA11AI.25502</b> </p> <p>Amount of Each Receipt this Period 20.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			62.00	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 344 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. STEVEN S. NORRIS</b></p> <p>Mailing Address 921 Unity Drive</p> <p>City Mansfield State OH Zip Code 44905</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 286.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 26 / 2013  <b>Transaction ID : SA11AI.25501</b></p> <p>Amount of Each Receipt this Period  20.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. LEE F. NOVAK</b></p> <p>Mailing Address 14010 SE 35th Street</p> <p>City Vancouver State WA Zip Code 98683</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 252.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 10 / 2013  <b>Transaction ID : SA11AI.26109</b></p> <p>Amount of Each Receipt this Period  21.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. LEE F. NOVAK</b></p> <p>Mailing Address 14010 SE 35th Street</p> <p>City Vancouver State WA Zip Code 98683</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 273.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 25 / 2013  <b>Transaction ID : SA11AI.26108</b></p> <p>Amount of Each Receipt this Period  21.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p> <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p>62.00</p>	



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 345 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. MICHAEL NUGENT**

Mailing Address 1953 FREIMUTH ROAD

City

SELAH

State

WA

Zip Code

98942

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 2

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 02 / 2013

Transaction ID : SA11AI.25967

Amount of Each Receipt this Period

210.00

Full Name (Last, First, Middle Initial)

**B. VICTORIA M. NUZZI**

Mailing Address 1005 N. Alabama Street

City

Indianapolis

State

IN

Zip Code

46202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

REGIONAL FIELD ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.08

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2013

Transaction ID : SA11AI.24330

Amount of Each Receipt this Period

30.16

Full Name (Last, First, Middle Initial)

**C. VICTORIA M. NUZZI**

Mailing Address 1005 N. Alabama Street

City

Indianapolis

State

IN

Zip Code

46202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

REGIONAL FIELD ADMINISTRATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.24

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.24331

Amount of Each Receipt this Period

30.16

**SUBTOTAL** of Receipts This Page (optional)..... ►

270.32

**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 346 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. GERARD O'NEIL**

Mailing Address 1179 Charles Street

City State Zip Code  
 North Providence RI 02904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME RI CN 94

Occupation

BUSINESS AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 16 / 2013

Transaction ID : SA11AI.25958

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

**B. ANTHONY A OGUNDIRAN**

Mailing Address P.O. Box 11862

City State Zip Code  
 Minneapolis MN 55411

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.53

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 15 / 2013

Transaction ID : SA11AI.24332

Amount of Each Receipt this Period

26.85

Full Name (Last, First, Middle Initial)

**C. ANTHONY A OGUNDIRAN**

Mailing Address P.O. Box 11862

City State Zip Code  
 Minneapolis MN 55411

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.38

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.24333

Amount of Each Receipt this Period

26.85

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

173.70

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 347 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. 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 ▼

687.26

Date of Receipt

07 / 22 / 2013

Transaction ID : SA11AI.25902

Amount of Each Receipt this Period

98.18

Full Name (Last, First, Middle Initial)

**B. ERIN S. OKANTEY**

Mailing Address 722 Pepper Court

City

Westerville

State

OH

Zip Code

43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

804.08

Date of Receipt

07 / 15 / 2013

Transaction ID : SA11AI.24334

Amount of Each Receipt this Period

69.33

Full Name (Last, First, Middle Initial)

**C. ERIN S. OKANTEY**

Mailing Address 722 Pepper Court

City

Westerville

State

OH

Zip Code

43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

829.08

Date of Receipt

07 / 23 / 2013

Transaction ID : SA11AI.24335

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

192.51

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 348 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<b>A. ERIN S. OKANTEY</b> Full Name (Last, First, Middle Initial) Mailing Address 722 Pepper Court City Westerville State OH Zip Code 43082 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 854.08			Date of Receipt M M / D D / Y Y Y Y Y 07 / 23 / 2013 <b>Transaction ID : SA11AI.24336</b> Amount of Each Receipt this Period 25.00
<b>B. ERIN S. OKANTEY</b> Full Name (Last, First, Middle Initial) Mailing Address 722 Pepper Court City Westerville State OH Zip Code 43082 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 923.41			Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24337</b> Amount of Each Receipt this Period 69.33
<b>C. RUSSELL K. OKATA</b> Full Name (Last, First, Middle Initial) Mailing Address 1015 Wilder Avenue City Honolulu State HI Zip Code 96822 FEC ID number of contributing federal political committee. C Name of Employer AFSCME HI LOC 152 Occupation RETIREE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00			Date of Receipt M M / D D / Y Y Y Y Y 07 / 10 / 2013 <b>Transaction ID : SA11AI.24620</b> Amount of Each Receipt this Period 100.00
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			194.33
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 349 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. SANDRA K. OLESON**

Mailing Address 10009 Rio San Diego Drive  
Apt. #171

City State Zip Code  
San Diego CA 92108-5643

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME CA LOC 1199

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  
07 / 08 / 2013

Transaction ID : SA11AI.24521

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. LATASHA A. OLIVER**

Mailing Address 1610 Oakwood Avenue

City State Zip Code  
Columbus OH 43207

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.44

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2013

Transaction ID : SA11AI.25283

Amount of Each Receipt this Period

29.04

Full Name (Last, First, Middle Initial)

**C. HOLLY OLSON**

Mailing Address 15443 Martins Hundred Drive

City State Zip Code  
Centerville VA 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 ▼

820.04

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24338

Amount of Each Receipt this Period

63.08

**SUBTOTAL** of Receipts This Page (optional)..... ►

342.12

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 350 OF 516

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. HOLLY OLSON**

Mailing Address 15443 Martins Hundred Drive

City	State	Zip Code
Centerville	VA	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 ▼

883.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

Transaction ID : SA11AI.24339

Amount of Each Receipt this Period

63.08

Full Name (Last, First, Middle Initial)

**B. VASTINA OMOSEBI**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 ▼

227.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	01	/	2013

Transaction ID : SA11AI.24823

Amount of Each Receipt this Period

32.50

Full Name (Last, First, Middle Initial)

**C. MARY C. OPENLANDER**

Mailing Address 466 Prospect

City	State	Zip Code
Muir	MI	48860

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2013

Transaction ID : SA11AI.24899

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)..... ▶

116.58

TOTAL This Period (last page this line number only)..... ▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 351 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. MARY C. OPENLANDER</b></p> <p>Mailing Address 466 Prospect</p> <p>City State Zip Code  Muir MI 48860</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME MI CN 25 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  294.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 16 / 2013  <b>Transaction ID : SA11AI.24900</b></p> <p>Amount of Each Receipt this Period  21.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. SUSAN ORRIS</b></p> <p>Mailing Address 536 Second Street</p> <p>City State Zip Code  Steelton PA 17113</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  340.62</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 22 / 2013  <b>Transaction ID : SA11AI.25903</b></p> <p>Amount of Each Receipt this Period  48.66</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. MIGUEL G. ORTIZ</b></p> <p>Mailing Address 143 Washington Avenue</p> <p>City State Zip Code  Albany NY 12210</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME NY LOC 1000 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  211.64</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013  <b>Transaction ID : SA11AI.25227</b></p> <p>Amount of Each Receipt this Period  19.24</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>88.90</p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 352 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. PETER S. OSHIRO**

Mailing Address 95-1076 Pikokea Street

City

Mililani Town

State

HI

Zip Code

96789

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 ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 10 / 2013

Transaction ID : SA11AI.24622

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**B. CURT A. OSTRANDER**

Mailing Address 65 Academy Road

City

New Ipswich

State

NH

Zip Code

03071-0000

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

INT'L UNION BARGAINING REP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

627.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24340

Amount of Each Receipt this Period

48.25

Full Name (Last, First, Middle Initial)

**C. CURT A. OSTRANDER**

Mailing Address 65 Academy Road

City

New Ipswich

State

NH

Zip Code

03071-0000

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

INT'L UNION BARGAINING REP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24341

Amount of Each Receipt this Period

48.25

**SUBTOTAL** of Receipts This Page (optional)..... ►

138.50

**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 353 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. GERALD OTTEN**

Mailing Address 2905 Evergreen Way

City State Zip Code  
 Ellicott City MD 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 ▼

557.05

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 15 / 2013

Transaction ID : SA11AI.24342

Amount of Each Receipt this Period

42.85

Full Name (Last, First, Middle Initial)

**B. GERALD OTTEN**

Mailing Address 2905 Evergreen Way

City State Zip Code  
 Ellicott City MD 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 ▼

599.90

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.24343

Amount of Each Receipt this Period

42.85

Full Name (Last, First, Middle Initial)

**C. ANDREW E. PADILLA**

Mailing Address 4829 GTO Drive

City State Zip Code  
 Albuquerque NM 87105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME NM CN 18/WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 09 / 2013

Transaction ID : SA11AI.25194

Amount of Each Receipt this Period

17.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

102.70

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 354 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. ANDREW E. PADILLA**

Mailing Address 4829 GTO Drive

City

Albuquerque

State

NM

Zip Code

87105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME NM CN 18/WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

255.00

Date of Receipt

07 / 22 / 2013

Transaction ID : SA11AI.25193

Amount of Each Receipt this Period

17.00

Full Name (Last, First, Middle Initial)

**B. 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

FIELD REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

388.60

Date of Receipt

07 / 02 / 2013

Transaction ID : SA11AI.25724

Amount of Each Receipt this Period

34.86

Full Name (Last, First, Middle Initial)

**C. 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

FIELD REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

423.46

Date of Receipt

07 / 19 / 2013

Transaction ID : SA11AI.25725

Amount of Each Receipt this Period

34.86

**SUBTOTAL** of Receipts This Page (optional)..... ►

86.72

**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 355 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. WILLIAM R. PALMQUIST</b></p> <p>Mailing Address 733 37th Avenue</p> <p>City State Zip Code Seattle WA 98122</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WA CN 28 STRATEGIC COORDINATOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 385.56</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 24 / 2013 <b>Transaction ID : SA11AI.26110</b></p> <p>Amount of Each Receipt this Period 55.08</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. RACHEL S. PANCIERA</b></p> <p>Mailing Address 5210 Biddison Avenue</p> <p>City State Zip Code Baltimore MD 21206</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L FIELD COORDINATOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 544.92</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2013 <b>Transaction ID : SA11AI.24824</b></p> <p>Amount of Each Receipt this Period 70.84</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. SHERRY A. PATTERSON</b></p> <p>Mailing Address 404 W. Walnut Street</p> <p>City State Zip Code Mt Vernon OH 43050</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 4/MT VERNON SECRETARY</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 422.46</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.25726</b></p> <p>Amount of Each Receipt this Period 29.42</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>155.34</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 356 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. BARRY PEARCE</b></p> <p>Mailing Address 130 N. Wilson Street</p> <p>City State Zip Code Bellefonte PA 16823</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 532.12</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013 <b>Transaction ID : SA11AI.25904</b></p> <p>Amount of Each Receipt this Period 73.16</p>
<p>Full Name (Last, First, Middle Initial) <b>B. MELINDA PEARSON</b></p> <p>Mailing Address 3908 Hoffman Road Apt. 1B</p> <p>City State Zip Code White Bear Lake MN 55110-4652</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME MN CN 5/STATE OF MN STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 205.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.25059</b></p> <p>Amount of Each Receipt this Period 28.00</p>
<p>Full Name (Last, First, Middle Initial) <b>C. MARIA F PEDERSEN</b></p> <p>Mailing Address 6607 Clearbrook Drive SE</p> <p>City State Zip Code Lacey WA 98503</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 260.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 10 / 2013 <b>Transaction ID : SA11AI.26113</b></p> <p>Amount of Each Receipt this Period 20.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		121.16
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 357 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. MARIA F PEDERSEN**

Mailing Address 6607 Clearbrook Drive SE

City State Zip Code  
Lacey WA 98503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WA CN 28/STATE OF WA

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 25 / 2013

Transaction ID : SA11AI.26112

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. WILLIE L. PELOTE**

Mailing Address 351 Ross Way

City State Zip Code  
Sacramento CA 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 ▼

687.83

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24344

Amount of Each Receipt this Period

52.91

Full Name (Last, First, Middle Initial)

**C. WILLIE L. PELOTE**

Mailing Address 351 Ross Way

City State Zip Code  
Sacramento CA 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 ▼

740.74

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24345

Amount of Each Receipt this Period

52.91

**SUBTOTAL** of Receipts This Page (optional)..... ►

125.82

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 358 OF 516

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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**

Full Name (Last, First, Middle Initial)

**A. JOANNE M. PELS**

Mailing Address 6987 County 38 NW

City State Zip Code  
Walker MN 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 ▼

602.02

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 08 / 2013

Transaction ID : SA11AI.25062

Amount of Each Receipt this Period

93.38

Full Name (Last, First, Middle Initial)

**B. PAMELA PERILLO**

Mailing Address 9270 Billingsley Road

City State Zip Code  
White Plains MD 20695

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.49

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24346

Amount of Each Receipt this Period

35.73

Full Name (Last, First, Middle Initial)

**C. PAMELA PERILLO**

Mailing Address 9270 Billingsley Road

City State Zip Code  
White Plains MD 20695

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.22

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24347

Amount of Each Receipt this Period

35.73

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

164.84

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 359 OF 516  
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial) <b>A. STEPHEN F. PERKINS</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>01</td> <td></td> <td>2013</td> </tr> </table> <b>Transaction ID : SA11AI.25195</b>		M M M	/	D D D	/	Y Y Y Y Y Y	07		01		2013
M M M	/	D D D	/	Y Y Y Y Y Y									
07		01		2013									
Mailing Address 6901 Los Volcano Road #0103		Amount of Each Receipt this Period <table border="1"> <tr> <td>26.22</td> </tr> </table>		26.22									
26.22													
City ALBUQUERQUE	State NM	Zip Code 87121											
FEC ID number of contributing federal political committee. <b>C</b>													
Name of Employer AFSCME NM CN 18/BERNALILLO	Occupation STAFF REPRESENTATIVE												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>314.64</td> </tr> </table>			314.64									
314.64													
Full Name (Last, First, Middle Initial) <b>B. STEPHEN F. PERKINS</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>16</td> <td></td> <td>2013</td> </tr> </table> <b>Transaction ID : SA11AI.25196</b>		M M M	/	D D D	/	Y Y Y Y Y Y	07		16		2013
M M M	/	D D D	/	Y Y Y Y Y Y									
07		16		2013									
Mailing Address 6901 Los Volcano Road #0103		Amount of Each Receipt this Period <table border="1"> <tr> <td>26.22</td> </tr> </table>		26.22									
26.22													
City ALBUQUERQUE	State NM	Zip Code 87121											
FEC ID number of contributing federal political committee. <b>C</b>													
Name of Employer AFSCME NM CN 18/BERNALILLO	Occupation STAFF REPRESENTATIVE												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>340.86</td> </tr> </table>			340.86									
340.86													
Full Name (Last, First, Middle Initial) <b>C. STEPHEN F. PERKINS</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>23</td> <td></td> <td>2013</td> </tr> </table> <b>Transaction ID : SA11AI.25197</b>		M M M	/	D D D	/	Y Y Y Y Y Y	07		23		2013
M M M	/	D D D	/	Y Y Y Y Y Y									
07		23		2013									
Mailing Address 6901 Los Volcano Road #0103		Amount of Each Receipt this Period <table border="1"> <tr> <td>26.22</td> </tr> </table>		26.22									
26.22													
City ALBUQUERQUE	State NM	Zip Code 87121											
FEC ID number of contributing federal political committee. <b>C</b>													
Name of Employer AFSCME NM CN 18/BERNALILLO	Occupation STAFF REPRESENTATIVE												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>367.08</td> </tr> </table>			367.08									
367.08													
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		<table border="1"> <tr> <td>78.66</td> </tr> </table>		78.66									
78.66													
<b>TOTAL</b> This Period (last page this line number only)..... ▶		<table border="1"> <tr> <td></td> </tr> </table>											

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 360 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. RANDOLPH P. PERREIRA</b></p> <p>Mailing Address 1044 Mokuhanoo Street</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Honolulu</td> <td style="width: 33%;">State HI</td> <td style="width: 33%;">Zip Code 96825</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME HI LOC 152</td> <td style="width: 66%;">Occupation EXECUTIVE DIRECTOR</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">784.00</span> </p>			City Honolulu	State HI	Zip Code 96825	Name of Employer AFSCME HI LOC 152	Occupation EXECUTIVE DIRECTOR	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 10 / 2013</span> </p> <p><b>Transaction ID : SA11AI.24623</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span> </p>	
City Honolulu	State HI	Zip Code 96825							
Name of Employer AFSCME HI LOC 152	Occupation EXECUTIVE DIRECTOR								
<p>Full Name (Last, First, Middle Initial) <b>B. RANDOLPH P. PERREIRA</b></p> <p>Mailing Address 1044 Mokuhanoo Street</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Honolulu</td> <td style="width: 33%;">State HI</td> <td style="width: 33%;">Zip Code 96825</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME HI LOC 152</td> <td style="width: 66%;">Occupation EXECUTIVE DIRECTOR</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">798.00</span> </p>			City Honolulu	State HI	Zip Code 96825	Name of Employer AFSCME HI LOC 152	Occupation EXECUTIVE DIRECTOR	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 31 / 2013</span> </p> <p><b>Transaction ID : SA11AI.24624</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">14.00</span> </p>	
City Honolulu	State HI	Zip Code 96825							
Name of Employer AFSCME HI LOC 152	Occupation EXECUTIVE DIRECTOR								
<p>Full Name (Last, First, Middle Initial) <b>C. ELIZABETH PERROW</b></p> <p>Mailing Address 958 N. Harrison Street</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Arlington</td> <td style="width: 33%;">State VA</td> <td style="width: 33%;">Zip Code 22205</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME INT'L</td> <td style="width: 66%;">Occupation ASSISTANT TO JUD. PANEL CHAIRPERSON</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">595.10</span> </p>			City Arlington	State VA	Zip Code 22205	Name of Employer AFSCME INT'L	Occupation ASSISTANT TO JUD. PANEL CHAIRPERSON	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 15 / 2013</span> </p> <p><b>Transaction ID : SA11AI.24348</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">46.22</span> </p>	
City Arlington	State VA	Zip Code 22205							
Name of Employer AFSCME INT'L	Occupation ASSISTANT TO JUD. PANEL CHAIRPERSON								
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">160.22</span>						
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;"></span>						



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 361 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. ELIZABETH PERROW</b></p> <p>Mailing Address 958 N. Harrison Street</p> <p>City State Zip Code Arlington VA 22205</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT TO JUD. PANEL CHAIRPERSON</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 641.32</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24349</b></p> <p>Amount of Each Receipt this Period 46.22</p>
<p>Full Name (Last, First, Middle Initial) <b>B. MARYANN Z. PETERS</b></p> <p>Mailing Address P.O. Box 57037</p> <p>City State Zip Code Los Angeles CA 90057</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME CA CN 36/CITY OF LA STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 19 / 2013 <b>Transaction ID : SA11AI.24471</b></p> <p>Amount of Each Receipt this Period 15.00</p>
<p>Full Name (Last, First, Middle Initial) <b>C. KOLBY PETERSON</b></p> <p>Mailing Address 9326 Halston Court</p> <p>City State Zip Code Fairfax Station VA 22039</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT DIRECTOR, POLLING</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 634.27</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24350</b></p> <p>Amount of Each Receipt this Period 48.79</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		110.01
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 362 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. KOLBY PETERSON</b></p> <p>Mailing Address 9326 Halston Court</p> <p>City State Zip Code          Fairfax Station VA 22039</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME INT'L ASSISTANT DIRECTOR, POLLING</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          683.06</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 31 / 2013  <b>Transaction ID : SA11AI.24351</b></p> <p>Amount of Each Receipt this Period          48.79</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. RONNIE D PETERSON</b></p> <p>Mailing Address 1146 Rue Willette Blvd.</p> <p>City State Zip Code          Ypsilanti MI 48197</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME INT'L POLITICAL ACTION REPRESENTATIVE III</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          1881.88</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 15 / 2013  <b>Transaction ID : SA11AI.24352</b></p> <p>Amount of Each Receipt this Period          144.76</p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. RONNIE D PETERSON</b></p> <p>Mailing Address 1146 Rue Willette Blvd.</p> <p>City State Zip Code          Ypsilanti MI 48197</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME INT'L POLITICAL ACTION REPRESENTATIVE III</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          2026.64</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 31 / 2013  <b>Transaction ID : SA11AI.24353</b></p> <p>Amount of Each Receipt this Period          144.76</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			338.31	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 363 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. URSULA PETTERS</b></p> <p>Mailing Address 1212 Jefferson St., SE  Suite 300</p> <p>City Olympia State WA Zip Code 98501</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  240.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 10 / 2013</p> <p><b>Transaction ID : SA11AI.26115</b></p> <p>Amount of Each Receipt this Period  20.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. URSULA PETTERS</b></p> <p>Mailing Address 1212 Jefferson St., SE  Suite 300</p> <p>City Olympia State WA Zip Code 98501</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  260.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 25 / 2013</p> <p><b>Transaction ID : SA11AI.26114</b></p> <p>Amount of Each Receipt this Period  20.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. RICHARD L. PETTIT</b></p> <p>Mailing Address 1957 Coppermine Road</p> <p>City Buchanan State GA Zip Code 30113</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation AREA ORGANIZING DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  1116.64</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013</p> <p><b>Transaction ID : SA11AI.24354</b></p> <p>Amount of Each Receipt this Period  87.58</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>127.58</p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 364 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. RICHARD L. PETTIT</b></p> <p>Mailing Address 1957 Coppermine Road</p> <p>City Buchanan State GA Zip Code 30113</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation AREA ORGANIZING DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 1204.22</p>			<p>Date of Receipt  <b>07 / 31 / 2013</b>  <b>Transaction ID : SA11AI.24355</b> </p> <p>Amount of Each Receipt this Period 87.58</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. CATHERINE PHILLIPS</b></p> <p>Mailing Address 15707 Manning Street</p> <p>City Detroit State MI Zip Code 48205</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 378.56</p>			<p>Date of Receipt  <b>07 / 02 / 2013</b>  <b>Transaction ID : SA11AI.24902</b> </p> <p>Amount of Each Receipt this Period 29.12</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. CATHERINE PHILLIPS</b></p> <p>Mailing Address 15707 Manning Street</p> <p>City Detroit State MI Zip Code 48205</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MI CN 25 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 407.68</p>			<p>Date of Receipt  <b>07 / 16 / 2013</b>  <b>Transaction ID : SA11AI.24901</b> </p> <p>Amount of Each Receipt this Period 29.12</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			145.82	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 365 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

## **A. KELLY PHILLIPS**

Mailing Address 390 Worthington Road

City State Zip Code  
Westerville OH 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 ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25516

Amount of Each Receipt this Period

66.00

Full Name (Last, First, Middle Initial)

## **B. KELLY PHILLIPS**

Mailing Address 390 Worthington Road

City State Zip Code  
Westerville OH 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 ▼

561.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2013

Transaction ID : SA11AI.25517

Amount of Each Receipt this Period

66.00

Full Name (Last, First, Middle Initial)

## **C. MICHELLE R. PHILLIPS**

Mailing Address 323 N. Warren Avenue

City State Zip Code  
Columbus OH 43204

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/SOUTH-WESTERN

Occupation

CUSTODIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.50

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25727

Amount of Each Receipt this Period

62.50

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

194.50

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 366 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. 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 ▼

446.86

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 01 / 2013

Transaction ID : SA11AI.25284

Amount of Each Receipt this Period

63.58

Full Name (Last, First, Middle Initial)

**B. JEFFREY K. PITTMAN**

Mailing Address 2601 Woodley Place NW  
Apt. 401

City

State

Zip Code

Washington

DC

20008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

SR. STRATEGIC COMM SPECIALIST 3

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 01 / 2013

Transaction ID : SA11AI.24825

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

**C. CLIFFORD T. POEHLER**

Mailing Address 565 Glendale Street

City

State

Zip Code

Minneapolis

MN

55104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/HENNEPIN COUNTY

Occupation

LEGAL ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

341.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25063

Amount of Each Receipt this Period

68.30

**SUBTOTAL** of Receipts This Page (optional)..... ►

211.88

**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 367 OF 516

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. 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 COUNTY

Occupation

LEGAL ASSISTANT

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

409.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	5		2	0	1	3

Transaction ID : SA11AI.25064

Amount of Each Receipt this Period

68.30

Full Name (Last, First, Middle Initial)

**B. 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 COUNTY

Occupation

LEGAL ASSISTANT

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

478.10

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	3

Transaction ID : SA11AI.25065

Amount of Each Receipt this Period

68.30

Full Name (Last, First, Middle Initial)

**C. RENEE POFF**

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  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

269.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	3

Transaction ID : SA11AI.25906

Amount of Each Receipt this Period

38.52

**SUBTOTAL** of Receipts This Page (optional)..... ►

175.12

**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

FOR LINE NUMBER: PAGE 368 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

## **A. STEVE POINTEC**

Mailing Address 1212 Jefferson St., SE  
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WA CN 28/STATE OF WA

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2013

Transaction ID : SA11AI.26117

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **B. STEVE POINTEC**

Mailing Address 1212 Jefferson St., SE  
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WA CN 28/STATE OF WA

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 25 / 2013

Transaction ID : SA11AI.26116

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **C. CHRISTOPHER D. POLICANO**

Mailing Address 2480 16th Street NW  
Apt. 314

City Washington State DC Zip Code 20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, COMMUNICATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

955.76

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24356

Amount of Each Receipt this Period

73.52

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

113.52



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 369 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. CHRISTOPHER D. POLICANO</b></p> <p>Mailing Address 2480 16th Street NW Apt. 314</p> <p>City Washington State DC Zip Code 20009</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation DIRECTOR, COMMUNICATIONS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1029.28</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24357</b></p> <p>Amount of Each Receipt this Period 73.52</p>
<p>Full Name (Last, First, Middle Initial) <b>B. NICOLE R. POLLARD</b></p> <p>Mailing Address 9404 Nicklaus Lane</p> <p>City Laurel State MD Zip Code 20708</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation ASSOCIATE GENERAL COUNSEL II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 792.61</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24358</b></p> <p>Amount of Each Receipt this Period 60.97</p>
<p>Full Name (Last, First, Middle Initial) <b>C. NICOLE R. POLLARD</b></p> <p>Mailing Address 9404 Nicklaus Lane</p> <p>City Laurel State MD Zip Code 20708</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation ASSOCIATE GENERAL COUNSEL II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 853.58</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24359</b></p> <p>Amount of Each Receipt this Period 60.97</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		195.46
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 370 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. EDWARD POTTS**

Mailing Address 240 Bentz Mill Road

City	State	Zip Code
Wellsville	PA	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 ▼

512.12

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		2	2		2	0	1	3		

Transaction ID : SA11AI.25907

Amount of Each Receipt this Period

73.16

Full Name (Last, First, Middle Initial)

**B. 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 1624

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		0	8		2	0	1	3		

Transaction ID : SA11AI.25964

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. 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 1624

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

940.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		3	1		2	0	1	3		

Transaction ID : SA11AI.25965

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ▶

213.16

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 371 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. REBECCA POWELL</b></p> <p>Mailing Address 1212 Jefferson Street SE</p> <p>City Olympia State WA Zip Code 98501</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 260.00</p>			<p>Date of Receipt  <b>07 / 10 / 2013</b>  <b>Transaction ID : SA11AI.26119</b> </p> <p>Amount of Each Receipt this Period            20.00         </p>	
<p>Full Name (Last, First, Middle Initial) <b>B. REBECCA POWELL</b></p> <p>Mailing Address 1212 Jefferson Street SE</p> <p>City Olympia State WA Zip Code 98501</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 280.00</p>			<p>Date of Receipt  <b>07 / 25 / 2013</b>  <b>Transaction ID : SA11AI.26118</b> </p> <p>Amount of Each Receipt this Period            20.00         </p>	
<p>Full Name (Last, First, Middle Initial) <b>C. STEVE PREBLE</b></p> <p>Mailing Address P.O. Box 204</p> <p>City Colerain State MN Zip Code 55722</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MN CN 65 Occupation EXECUTIVE DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 730.72</p>			<p>Date of Receipt  <b>07 / 05 / 2013</b>  <b>Transaction ID : SA11AI.25126</b> </p> <p>Amount of Each Receipt this Period            95.96         </p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			135.96	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 372 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. STEVE PREBLE**

Mailing Address P.O. Box 204

City	State	Zip Code
Colerain	MN	55722

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME MN CN 65

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

Transaction ID : SA11AI.25127

Amount of Each Receipt this Period

14.00

Full Name (Last, First, Middle Initial)

**B. HELEN PRESSLEY**

Mailing Address P.O. Box 7606

City	State	Zip Code
Olympia	WA	98507

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2013

Transaction ID : SA11AI.26121

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

**C. HELEN PRESSLEY**

Mailing Address P.O. Box 7606

City	State	Zip Code
Olympia	WA	98507

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2013

Transaction ID : SA11AI.26120

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)..... ▶

56.00

TOTAL This Period (last page this line number only)..... ▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 373 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. DELBERT G G PRICE**

Mailing Address 885 Haverhill Drive

City State Zip Code  
Hamilton OH 45013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INTL

Occupation

International Union Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.67

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24360

Amount of Each Receipt this Period

44.59

Full Name (Last, First, Middle Initial)

**B. DELBERT G G PRICE**

Mailing Address 885 Haverhill Drive

City State Zip Code  
Hamilton OH 45013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INTL

Occupation

International Union Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.26

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24361

Amount of Each Receipt this Period

44.59

Full Name (Last, First, Middle Initial)

**C. ROBYN PRICE**

Mailing Address 1034 N. Washington Avenue

City State Zip Code  
Lansing MI 48906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MI CN 25

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  
07 / 02 / 2013

Transaction ID : SA11AI.24904

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

114.18

**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 374 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

## **A. ROBYN PRICE**

Mailing Address 1034 N. Washington Avenue

City State Zip Code  
Lansing MI 48906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MI CN 25

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  
07 / 16 / 2013

Transaction ID : SA11AI.24903

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. ERWIN D. PRIM**

Mailing Address 729 1/2 Fourth Street

City State Zip Code  
Marietta OH 45750

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/MARIETTA CSD

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.92

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25728

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

## **C. ERWIN D. PRIM**

Mailing Address 729 1/2 Fourth Street

City State Zip Code  
Marietta OH 45750

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/MARIETTA CSD

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.76

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25729

Amount of Each Receipt this Period

20.84

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

66.68

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 375 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. AMANDA M. PRINCE**

Mailing Address 4894 Birchview Drive

City

Moose Lake

State

MN

Zip Code

55767

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

217.00

Date of Receipt

07 / 08 / 2013

Transaction ID : SA11AI.25068

Amount of Each Receipt this Period

31.00

Full Name (Last, First, Middle Initial)

**B. 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/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

312.00

Date of Receipt

07 / 05 / 2013

Transaction ID : SA11AI.25069

Amount of Each Receipt this Period

48.00

Full Name (Last, First, Middle Initial)

**C. 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/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

07 / 31 / 2013

Transaction ID : SA11AI.25070

Amount of Each Receipt this Period

48.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

127.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 376 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. EDWARD M. PRUITT**

Mailing Address 514 Quail Hollow Avenue NE

City State Zip Code  
 Canton OH 44704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

07 / 12 / 2013

Transaction ID : SA11AI.25519

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. EDWARD M. PRUITT**

Mailing Address 514 Quail Hollow Avenue NE

City State Zip Code  
 Canton OH 44704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

JUVENILE CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

07 / 26 / 2013

Transaction ID : SA11AI.25518

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. DEVORRUS PRYOR**

Mailing Address 514 Shatto Place  
 3rd Floor

City State Zip Code  
 Los Angeles CA 90020

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME CA CN 36/LOCAL 685

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

07 / 16 / 2013

Transaction ID : SA11AI.24472

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

130.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 377 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. CARY R. QUICK JR.**

Mailing Address 910 Campground Road

City State Zip Code  
Anna IL 62906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IL CN 31/STATE OF IL

Occupation  
MENTAL HEALTH TECH I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24768

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**B. PHEDRA C. QUINCEY**

Mailing Address 802 N 40th Avenue  
SP #82

City State Zip Code  
Yakima WA 98908

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WA CN 28

Occupation  
COUNCIL 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  
07 / 24 / 2013

Transaction ID : SA11AI.26122

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. LLOYD L. RAINS**

Mailing Address 15829 Narraganset Oval

City State Zip Code  
Middleburg Hts OH 44130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4

Occupation  
REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25731

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 378 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. LLOYD L. RAINS**

Mailing Address 15829 Narraganset Oval

City State Zip Code  
 Middleburg Hts OH 44130

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 19 / 2013

Transaction ID : SA11AI.25730

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. HECTOR RAMOS**

Mailing Address 1001 Anclothe Drive

City State Zip Code  
 Tarpons Springs FL 34689

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME FL CN 79

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  
 07 / 08 / 2013

Transaction ID : SA11AI.24592

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. SUSIE ANN RATHKE**

Mailing Address 1212 Jefferson Street SE

City State Zip Code  
 Olympia WA 98501

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 10 / 2013

Transaction ID : SA11AI.26125

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

105.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 379 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. SUSIE ANN RATHKE**

Mailing Address 1212 Jefferson Street SE

City State Zip Code  
 Olympia WA 98501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 25 / 2013

Transaction ID : SA11AI.26124

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. AMYLEE RAY**

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 ▼

440.37

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 01 / 2013

Transaction ID : SA11AI.24826

Amount of Each Receipt this Period

64.16

Full Name (Last, First, Middle Initial)

**C. ZOLLIE RAYNER**

Mailing Address P.O. Box 51

City State Zip Code  
 Albion PA 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 ▼

512.12

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 22 / 2013

Transaction ID : SA11AI.25908

Amount of Each Receipt this Period

73.16

**SUBTOTAL** of Receipts This Page (optional)..... ►

162.32

**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 380 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. TERRY M. REED</b></p> <p>Mailing Address 2737 Yellowoak Place</p> <p>City State Zip Code          Hilliard OH 43026</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME OH CN 8 AREA FIELD SERVICES DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          685.90</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 01 / 2013  <b>Transaction ID : SA11AI.25285</b></p> <p>Amount of Each Receipt this Period          97.60</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. MICHELLE L. REESE</b></p> <p>Mailing Address 4320 NW Second Avenue</p> <p>City State Zip Code          Des Moines IA 50313</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME IA CN 61/DOCS STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          210.00</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 03 / 2013  <b>Transaction ID : SA11AI.24730</b></p> <p>Amount of Each Receipt this Period          15.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. MICHELLE L. REESE</b></p> <p>Mailing Address 4320 NW Second Avenue</p> <p>City State Zip Code          Des Moines IA 50313</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation          AFSCME IA CN 61/DOCS STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼          225.00</p>			<p>Date of Receipt          M M / D D / Y Y Y Y Y          07 / 15 / 2013  <b>Transaction ID : SA11AI.24731</b></p> <p>Amount of Each Receipt this Period          15.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			127.60	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 381 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. MICHELLE L. REESE**

Mailing Address 4320 NW Second Avenue

City State Zip Code  
Des Moines IA 50313

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/DOCS

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  
07 / 30 / 2013

Transaction ID : SA11AI.24732

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. STEVEN C. REEVES**

Mailing Address 2566 Stillwater Road

City State Zip Code  
Maplewood Road MN 55119

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/RAMSEY COUNTY

Occupation

MAINTENANCE WORKER I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.25074

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. LAURA J. REISDORPH**

Mailing Address 915 F Street

City State Zip Code  
Centralia WA 98531

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

PUBLIC AFFAIRS ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 24 / 2013

Transaction ID : SA11AI.26126

Amount of Each Receipt this Period

21.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

76.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 382 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. LAURA REYES**

Mailing Address 5706 Colorado Avenue NW

City State Zip Code  
Washington DC 20011

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 ▼

1368.77

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

**Transaction ID : SA11AI.24363**

Amount of Each Receipt this Period

105.29

Full Name (Last, First, Middle Initial)

**B. LAURA REYES**

Mailing Address 5706 Colorado Avenue NW

City State Zip Code  
Washington DC 20011

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 ▼

1474.06

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

**Transaction ID : SA11AI.24364**

Amount of Each Receipt this Period

105.29

Full Name (Last, First, Middle Initial)

**C. HARRY RHODES**

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 ▼

407.26

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

**Transaction ID : SA11AI.25909**

Amount of Each Receipt this Period

58.18

**SUBTOTAL** of Receipts This Page (optional)..... ►

268.76

**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 383 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. LISA E. RICE**

Mailing Address 1456 Greenmont Court

City State Zip Code  
 Reston VA 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 ▼

750.63

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 15 / 2013

Transaction ID : SA11AI.24365

Amount of Each Receipt this Period

59.26

Full Name (Last, First, Middle Initial)

**B. LISA E. RICE**

Mailing Address 1456 Greenmont Court

City State Zip Code  
 Reston VA 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 ▼

809.89

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.24366

Amount of Each Receipt this Period

59.26

Full Name (Last, First, Middle Initial)

**C. PATTY RICH**

Mailing Address 2867 W. 10545 So.

City State Zip Code  
 South Jordan UT 84102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME UT LOC 1004

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 16 / 2013

Transaction ID : SA11AI.25966

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

168.52

**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 384 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<b>A. SHAWN E. RICHARDSON</b> Full Name (Last, First, Middle Initial) Mailing Address 6688 Markwood Street City State Zip Code Worthington OH 43085 FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span> Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH TRANSPORTATION TECHN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">560.00</span>			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>07</span> <span>12</span> <span>2013</span> </div> <b>Transaction ID : SA11AI.25531</b> Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>40.00</span> </span>	
<b>B. SHAWN E. RICHARDSON</b> Full Name (Last, First, Middle Initial) Mailing Address 6688 Markwood Street City State Zip Code Worthington OH 43085 FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span> Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH TRANSPORTATION TECHN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">600.00</span>			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>07</span> <span>26</span> <span>2013</span> </div> <b>Transaction ID : SA11AI.25530</b> Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>40.00</span> </span>	
<b>C. MICHELLE RIDER</b> Full Name (Last, First, Middle Initial) Mailing Address 4031 Executive Park Drive City State Zip Code Harrisburg PA 17111 FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span> Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">814.52</span>			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>07</span> <span>22</span> <span>2013</span> </div> <b>Transaction ID : SA11AI.25910</b> Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>116.36</span> </span>	
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			<span style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>196.36</span> </span>	
<b>TOTAL</b> This Period (last page this line number only)..... ▶			<span style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span></span> </span>	



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 385 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

## **A. CRYSTAL RILEY**

Mailing Address 4031 EXECUTIVE PARK DR

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 ▼

213.24

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25911

Amount of Each Receipt this Period

35.54

Full Name (Last, First, Middle Initial)

## **B. JOY L. RING**

Mailing Address 1334 Haloa Drive

City State Zip Code  
Honolulu HI 96818

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME HI LOC 152

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2013

Transaction ID : SA11AI.24627

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

## **C. EVA RIPPETEAU**

Mailing Address 7208 N Mowawk

City State Zip Code  
Portland OR 97203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OR CN 75

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.25798

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

105.54

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 386 OF 516  
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial) <b>A. THOMAS J. RITCHIE Sr.</b>			Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2013 <b>Transaction ID : SA11AI.25287</b>		
Mailing Address 1644 Spaulding Road			Amount of Each Receipt this Period 99.76		
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 698.32			
Full Name (Last, First, Middle Initial) <b>B. DALE C. ROBERTS</b>			Date of Receipt M M / D D / Y Y Y Y Y 07 / 24 / 2013 <b>Transaction ID : SA11AI.26127</b>		
Mailing Address P.O. Box 338			Amount of Each Receipt this Period 50.00		
City Medical Lake	State WA	Zip Code 99022			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME WA CN 28		Occupation COUNCIL REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00			
Full Name (Last, First, Middle Initial) <b>C. DEANNA L. ROBERTS</b>			Date of Receipt M M / D D / Y Y Y Y Y 07 / 12 / 2013 <b>Transaction ID : SA11AI.24733</b>		
Mailing Address 4320 NW Second Avenue			Amount of Each Receipt this Period 20.00		
City Des Moines	State IA	Zip Code 50313			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME IA CN 61/STATE OF IA		Occupation STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00			
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			169.76		
<b>TOTAL</b> This Period (last page this line number only)..... ▶					

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 387 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. DEANNA L. ROBERTS**

Mailing Address 4320 NW Second Avenue

City State Zip Code  
Des Moines IA 50313

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IA CN 61/STATE OF IA

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  
07 / 23 / 2013

Transaction ID : SA11AI.24734

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. 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 ▼

456.88

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2013

Transaction ID : SA11AI.25288

Amount of Each Receipt this Period

65.14

Full Name (Last, First, Middle Initial)

**C. TIMOTHY W. ROBERTS**

Mailing Address 5033 Ridgewood Road E.

City State Zip Code  
Springfield OH 45503

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 11

Occupation  
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25533

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

185.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 388 OF 516  
(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**

<b>A. TIMOTHY W. ROBERTS</b> Full Name (Last, First, Middle Initial) Mailing Address 5033 Ridgewood Road E. City Springfield State OH Zip Code 45503 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 11 Occupation CORRECTION OFFICER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 850.00			Date of Receipt M M / D D / Y Y Y Y Y 07 / 30 / 2013 <b>Transaction ID : SA11AI.25532</b> Amount of Each Receipt this Period 100.00
<b>B. JESSICA R. ROBINSON</b> Full Name (Last, First, Middle Initial) Mailing Address 7901 Chicago Avenue City Silver Spring State MD Zip Code 20910 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation ASSOCIATE GENERAL COUNSEL II Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1078.35			Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24367</b> Amount of Each Receipt this Period 82.95
<b>C. JESSICA R. ROBINSON</b> Full Name (Last, First, Middle Initial) Mailing Address 7901 Chicago Avenue City Silver Spring State MD Zip Code 20910 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation ASSOCIATE GENERAL COUNSEL II Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1161.30			Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24368</b> Amount of Each Receipt this Period 82.95
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			265.90
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 389 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. SUSAN ROBINSON</b></p> <p>Mailing Address 34816 Swan Creek Blvd</p> <p>City State Zip Code  Richmond MI 48062</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME MI CN 25 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  240.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 22 / 2013  <b>Transaction ID : SA11AI.24905</b></p> <p>Amount of Each Receipt this Period  40.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. LYNN ANN RODENHUIS</b></p> <p>Mailing Address 406 Thayer Avenue</p> <p>City State Zip Code  Silver Spring MD 20910</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME INT'L ASSOC. DIRECTOR, ORGNZNG &amp; FLD SVCS</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  745.94</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013  <b>Transaction ID : SA11AI.24369</b></p> <p>Amount of Each Receipt this Period  57.38</p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. LYNN ANN RODENHUIS</b></p> <p>Mailing Address 406 Thayer Avenue</p> <p>City State Zip Code  Silver Spring MD 20910</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME INT'L ASSOC. DIRECTOR, ORGNZNG &amp; FLD SVCS</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  803.32</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013  <b>Transaction ID : SA11AI.24370</b></p> <p>Amount of Each Receipt this Period  57.38</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>154.76</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 390 OF 516  
(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**

<b>A. CHRISTINA D. RODMAN</b> Full Name (Last, First, Middle Initial) Mailing Address 1011 Piedmont Road City Columbus State OH Zip Code 43224 FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span> Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation UTILITIES TECHNICIAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">220.00</span>			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>07 / 26 / 2013</span> </div> <b>Transaction ID : SA11AI.25534</b> Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>20.00</span> </div>
<b>B. LAWRENCE ROEHRIG</b> Full Name (Last, First, Middle Initial) Mailing Address 13084 Lia Court City London State MI Zip Code 48451 FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span> Name of Employer AFSCME MI CN 25 Occupation EXECUTIVE DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1809.44</span>			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>07 / 02 / 2013</span> </div> <b>Transaction ID : SA11AI.24906</b> Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>106.88</span> </div>
<b>C. LAWRENCE ROEHRIG</b> Full Name (Last, First, Middle Initial) Mailing Address 13084 Lia Court City London State MI Zip Code 48451 FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span> Name of Employer AFSCME MI CN 25 Occupation EXECUTIVE DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1834.44</span>			Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>M M / D D / Y Y Y Y</span> </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> <span>07 / 15 / 2013</span> </div> <b>Transaction ID : SA11AI.24907</b> Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>25.00</span> </div>
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>151.88</span> </div>
<b>TOTAL</b> This Period (last page this line number only)..... ▶			<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span></span> </div>

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 391 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. LAWRENCE ROEHRIG</b></p> <p>Mailing Address 13084 Lia Court</p> <p>City State Zip Code London MI 48451</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME MI CN 25 EXECUTIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1941.32</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 16 / 2013 <b>Transaction ID : SA11AI.24908</b></p> <p>Amount of Each Receipt this Period 106.88</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. LAWRENCE ROEHRIG</b></p> <p>Mailing Address 13084 Lia Court</p> <p>City State Zip Code London MI 48451</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME MI CN 25 EXECUTIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 2011.32</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24909</b></p> <p>Amount of Each Receipt this Period 70.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. ALICE M ROGERS</b></p> <p>Mailing Address 1111 Sturm Avenue</p> <p>City State Zip Code Walla Walla WA 99362</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 273.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 10 / 2013 <b>Transaction ID : SA11AI.26129</b></p> <p>Amount of Each Receipt this Period 21.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>197.88</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p></p>	

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 392 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. ALICE M ROGERS</b></p> <p>Mailing Address 1111 Sturm Avenue</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Walla Walla</td> <td style="width: 33%;">State WA</td> <td style="width: 33%;">Zip Code 99362</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME WA CN 28/STATE OF WA</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">294.00</span></p>			City Walla Walla	State WA	Zip Code 99362	Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 25 / 2013</span>  <b>Transaction ID : SA11AI.26128</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">21.00</span></p>	
City Walla Walla	State WA	Zip Code 99362							
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE								
<p>Full Name (Last, First, Middle Initial)  <b>B. STEVE ROTH</b></p> <p>Mailing Address 4320 NW Second Avenue</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Des Moines</td> <td style="width: 33%;">State IA</td> <td style="width: 33%;">Zip Code 50313</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME IA CN 61</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">350.00</span></p>			City Des Moines	State IA	Zip Code 50313	Name of Employer AFSCME IA CN 61	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 08 / 2013</span>  <b>Transaction ID : SA11AI.24735</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">50.00</span></p>	
City Des Moines	State IA	Zip Code 50313							
Name of Employer AFSCME IA CN 61	Occupation STAFF REPRESENTATIVE								
<p>Full Name (Last, First, Middle Initial)  <b>C. JOE ROWE</b></p> <p>Mailing Address 4031 Executive Park Drive</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Harrisburg</td> <td style="width: 33%;">State PA</td> <td style="width: 33%;">Zip Code 17111</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME PA CN 13</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">311.25</span></p>			City Harrisburg	State PA	Zip Code 17111	Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 22 / 2013</span>  <b>Transaction ID : SA11AI.25914</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">17.08</span></p>	
City Harrisburg	State PA	Zip Code 17111							
Name of Employer AFSCME PA CN 13	Occupation STAFF REPRESENTATIVE								
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p> <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p style="text-align: right;"><span style="border: 1px solid black; padding: 2px;">88.08</span></p>						



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 393 OF 516

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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**

Full Name (Last, First, Middle Initial)

A. SUSAN L. ROWE

Mailing Address 207 9th Avenue

City State Zip Code  
 Slater IA 50244

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

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  
 07 / 12 / 2013

Transaction ID : SA11AI.24736

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. SUSAN L. ROWE

Mailing Address 207 9th Avenue

City State Zip Code  
 Slater IA 50244

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 23 / 2013

Transaction ID : SA11AI.24737

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. JOSEPH P. RUGOLA

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

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1444.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 02 / 2013

Transaction ID : SA11AI.25733

Amount of Each Receipt this Period

110.00

SUBTOTAL of Receipts This Page (optional)..... ►

210.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER:  
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PAGE 394 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. JOSEPH P. RUGOLA</b></p> <p>Mailing Address 6805 Oak Creek Drive</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Columbus</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43229</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH LOC 4</td> <td style="width: 66%;">Occupation EXECUTIVE DIRECTOR</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1554.00</span></p>			City Columbus	State OH	Zip Code 43229	Name of Employer AFSCME OH LOC 4	Occupation EXECUTIVE DIRECTOR	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">19</span> / <span style="border: 1px solid black; padding: 2px;">2013</span></p> <p><b>Transaction ID : SA11AI.25732</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">110.00</span></p>	
City Columbus	State OH	Zip Code 43229							
Name of Employer AFSCME OH LOC 4	Occupation EXECUTIVE DIRECTOR								
<p>Full Name (Last, First, Middle Initial)  <b>B. JOSEPH P. RUGOLA</b></p> <p>Mailing Address 6805 Oak Creek Drive</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Columbus</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43229</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH LOC 4</td> <td style="width: 66%;">Occupation EXECUTIVE DIRECTOR</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1568.00</span></p>			City Columbus	State OH	Zip Code 43229	Name of Employer AFSCME OH LOC 4	Occupation EXECUTIVE DIRECTOR	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">31</span> / <span style="border: 1px solid black; padding: 2px;">2013</span></p> <p><b>Transaction ID : SA11AI.25734</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">14.00</span></p>	
City Columbus	State OH	Zip Code 43229							
Name of Employer AFSCME OH LOC 4	Occupation EXECUTIVE DIRECTOR								
<p>Full Name (Last, First, Middle Initial)  <b>C. IDA L. RUKAVINA</b></p> <p>Mailing Address 5385 Twin Lakes Loop</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Aurora</td> <td style="width: 33%;">State MN</td> <td style="width: 33%;">Zip Code 55705</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME MN CN 65</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">210.00</span></p>			City Aurora	State MN	Zip Code 55705	Name of Employer AFSCME MN CN 65	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">05</span> / <span style="border: 1px solid black; padding: 2px;">2013</span></p> <p><b>Transaction ID : SA11AI.25128</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">20.00</span></p>	
City Aurora	State MN	Zip Code 55705							
Name of Employer AFSCME MN CN 65	Occupation STAFF REPRESENTATIVE								
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">144.00</span>						
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;"></span>						

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 395 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. BLAINE J RUMMEL</b></p> <p>Mailing Address 5 E. Glebe Road  Apt. D</p> <p>City Alexandria State VA Zip Code 22305</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation ASSOCIATE DIRECT, COMMUNICATIONS</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  773.91</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013  <b>Transaction ID : SA11AI.24372</b></p> <p>Amount of Each Receipt this Period  55.85</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. BLAINE J RUMMEL</b></p> <p>Mailing Address 5 E. Glebe Road  Apt. D</p> <p>City Alexandria State VA Zip Code 22305</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation ASSOCIATE DIRECT, COMMUNICATIONS</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  829.76</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013  <b>Transaction ID : SA11AI.24373</b></p> <p>Amount of Each Receipt this Period  55.85</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. VICKY S. RUPPERT</b></p> <p>Mailing Address 1016 W Main Street</p> <p>City Watertown State WI Zip Code 53098</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WI CN 24/STATE OF WI Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  280.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 12 / 2013  <b>Transaction ID : SA11AI.26190</b></p> <p>Amount of Each Receipt this Period  20.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>131.70</p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 396 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. VICKY S. RUPPERT</b></p> <p>Mailing Address 1016 W Main Street</p> <p>City State Zip Code Watertown WI 53098</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WI CN 24/STATE OF WI STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2013 <b>Transaction ID : SA11AI.26191</b></p> <p>Amount of Each Receipt this Period 20.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. MARSHA RUSS</b></p> <p>Mailing Address 1224 GRAND AVE</p> <p>City State Zip Code DAYTON OH 45402</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH CN 8 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 230.76</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 23 / 2013 <b>Transaction ID : SA11AI.25289</b></p> <p>Amount of Each Receipt this Period 19.23</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. DAVIDA RUSSELL</b></p> <p>Mailing Address 3691 Fenley Road</p> <p>City State Zip Code Cleveland Hts. OH 44121</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 4/CUYAHOGA CNTY BUS DRIVER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 274.70</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.25736</b></p> <p>Amount of Each Receipt this Period 17.70</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>56.93</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 397 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. DAVIDA RUSSELL</b></p> <p>Mailing Address 3691 Fenley Road</p> <p>City State Zip Code Cleveland Hts. OH 44121</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 4/CUYAHOGA CNTY BUS DRIVER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 282.40</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 19 / 2013 <b>Transaction ID : SA11AI.25737</b></p> <p>Amount of Each Receipt this Period 7.70</p>		
<p>Full Name (Last, First, Middle Initial) <b>B. VERA SAADE</b></p> <p>Mailing Address 1309 Vine Street</p> <p>City State Zip Code Lansing MI 48912</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME MI CN 25 ASSISTANT DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 321.75</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.24910</b></p> <p>Amount of Each Receipt this Period 24.75</p>		
<p>Full Name (Last, First, Middle Initial) <b>C. VERA SAADE</b></p> <p>Mailing Address 1309 Vine Street</p> <p>City State Zip Code Lansing MI 48912</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME MI CN 25 ASSISTANT DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 346.50</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 16 / 2013 <b>Transaction ID : SA11AI.24911</b></p> <p>Amount of Each Receipt this Period 24.75</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>57.20</p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 398 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. JEFFREY C. SABIN</b></p> <p>Mailing Address 624 Celevland Street</p> <p>City State Zip Code Eveleth MN 55734</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME MN CN 5/CN14 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 349.58</p>		<p>Date of Receipt  <b>07 / 08 / 2013</b>  <b>Transaction ID : SA11AI.25076</b> </p> <p>Amount of Each Receipt this Period 49.94</p>
<p>Full Name (Last, First, Middle Initial) <b>B. GEORGE SACHARIAN</b></p> <p>Mailing Address 126 S. Lynn Blvd.</p> <p>City State Zip Code Upper Darby PA 19082</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 512.12</p>		<p>Date of Receipt  <b>07 / 22 / 2013</b>  <b>Transaction ID : SA11AI.25915</b> </p> <p>Amount of Each Receipt this Period 73.16</p>
<p>Full Name (Last, First, Middle Initial) <b>C. CARRIE B. SACHSE</b></p> <p>Mailing Address 3506 Hershey Road</p> <p>City State Zip Code Erie PA 16506</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L ORGANIZER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 417.56</p>		<p>Date of Receipt  <b>07 / 15 / 2013</b>  <b>Transaction ID : SA11AI.24374</b> </p> <p>Amount of Each Receipt this Period 32.76</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		155.86
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 399 OF 516

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. CARRIE B. SACHSE**

Mailing Address 3506 Hershey Road

City	State	Zip Code
Erie	PA	16506

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

Transaction ID : SA11AI.24375

Amount of Each Receipt this Period

32.76

Full Name (Last, First, Middle Initial)

**B. CURTIS C. SALOW**

Mailing Address 317 4th Avenue S E

City	State	Zip Code
Independence	IA	50644

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2013

Transaction ID : SA11AI.24739

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. CURTIS C. SALOW**

Mailing Address 317 4th Avenue S E

City	State	Zip Code
Independence	IA	50644

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	23	/	2013

Transaction ID : SA11AI.24738

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

82.76

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

FOR LINE NUMBER:  
(check only one)

PAGE 400 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. KYM S. SALOW**

Mailing Address 317 4th Avenue S E

City

State

Zip Code

Independence

IA

50644

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

AFSCME IA CN 61/STATE OF IA

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

07 / 12 / 2013

Transaction ID : SA11AI.24741

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. KYM S. SALOW**

Mailing Address 317 4th Avenue S E

City

State

Zip Code

Independence

IA

50644

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

AFSCME IA CN 61/STATE OF IA

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

07 / 23 / 2013

Transaction ID : SA11AI.24740

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. PATRIA L. SAMPSON**

Mailing Address 2700 Maple Street  
Unit C121

City

State

Zip Code

Bremerton

WA

98310

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

AFSCME WA CN 28/STATE OF WA

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

07 / 10 / 2013

Transaction ID : SA11AI.26131

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

50.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 401 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. PATRIA L. SAMPSON</b></p> <p>Mailing Address 2700 Maple Street  Unit C121</p> <p>City State Zip Code  Bremerton WA 98310</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  280.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 25 / 2013  <b>Transaction ID : SA11AI.26130</b></p> <p>Amount of Each Receipt this Period  20.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. JUNE E. SANDERSON</b></p> <p>Mailing Address 4304 Independence Road</p> <p>City State Zip Code  Sunnyside WA 98944</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  210.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 25 / 2013  <b>Transaction ID : SA11AI.26132</b></p> <p>Amount of Each Receipt this Period  15.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. HAIG SARAFIAN</b></p> <p>Mailing Address 1212 Jefferson Street SE</p> <p>City State Zip Code  Olympia WA 98501</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME WA CN 28/STATE OF WA STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  325.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 10 / 2013  <b>Transaction ID : SA11AI.26135</b></p> <p>Amount of Each Receipt this Period  25.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>60.00</p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 402 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. WILBERT R. SATTLER</b></p> <p>Mailing Address 73981 Morgan Hill Road</p> <p>City Adena State OH Zip Code 43901</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  280.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 12 / 2013  <b>Transaction ID : SA11AI.25540</b></p> <p>Amount of Each Receipt this Period  20.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. WILBERT R. SATTLER</b></p> <p>Mailing Address 73981 Morgan Hill Road</p> <p>City Adena State OH Zip Code 43901</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CORRECTION OFFICER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  300.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 26 / 2013  <b>Transaction ID : SA11AI.25539</b></p> <p>Amount of Each Receipt this Period  20.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. LEE A. SAUNDERS</b></p> <p>Mailing Address 7510 Alaska Avenue NW</p> <p>City Washington State DC Zip Code 20012</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation PRESIDENT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  1610.31</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013  <b>Transaction ID : SA11AI.24376</b></p> <p>Amount of Each Receipt this Period  123.87</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		163.87
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 403 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. LEE A. SAUNDERS</b></p> <p>Mailing Address 7510 Alaska Avenue NW</p> <p>City Washington State DC Zip Code 20012</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation PRESIDENT</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <b>1734.18</b></p>			<p>Date of Receipt  <b>07 / 31 / 2013</b>  <b>Transaction ID : SA11AI.24377</b></p> <p>Amount of Each Receipt this Period  <b>123.87</b></p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. MARIANNE SAUNDERS</b></p> <p>Mailing Address 48 Mullen Street</p> <p>City Uniontown State PA Zip Code 15401-4060</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <b>512.12</b></p>			<p>Date of Receipt  <b>07 / 22 / 2013</b>  <b>Transaction ID : SA11AI.25916</b></p> <p>Amount of Each Receipt this Period  <b>73.16</b></p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. SHELLIE A. SAVAGE</b></p> <p>Mailing Address 11540 Waddell Creek Rd. SW</p> <p>City Olympia State WA Zip Code 98512</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <b>390.00</b></p>			<p>Date of Receipt  <b>07 / 10 / 2013</b>  <b>Transaction ID : SA11AI.26136</b></p> <p>Amount of Each Receipt this Period  <b>30.00</b></p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><b>227.03</b></p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 404 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. SHELLIE A. SAVAGE**

Mailing Address 11540 Waddell Creek Rd. SW

City Olympia State WA Zip Code 98512

FEC ID number of contributing federal political committee.

C

Name of Employer  
AFSCME WA CN 28/STATE OF WA

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

07 / 25 / 2013

Transaction ID : SA11AI.26137

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. RICHARD SAWRANSKY**

Mailing Address 800 Innes Avenue  
#8

City San Francisco State CA Zip Code 94124

FEC ID number of contributing federal political committee.

C

Name of Employer  
AFSCME CA LOC 3299/UNIV OF CA

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 02 / 2013

Transaction ID : SA11AI.24533

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. RICHARD SAWRANSKY**

Mailing Address 800 Innes Avenue  
#8

City San Francisco State CA Zip Code 94124

FEC ID number of contributing federal political committee.

C

Name of Employer  
AFSCME CA LOC 3299/UNIV OF CA

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

07 / 12 / 2013

Transaction ID : SA11AI.24535

Amount of Each Receipt this Period

50.00

**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 PageFOR LINE NUMBER: PAGE 405 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. MARY ANN SAYTAR**

Mailing Address 609 Penn Street

City	State	Zip Code
Steelton	PA	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 ▼

352.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	22	/	2013

Transaction ID : SA11AI.25917

Amount of Each Receipt this Period

60.83

Full Name (Last, First, Middle Initial)

**B. LAWRENCE SCANLON**

Mailing Address 1108 Duke Street

City	State	Zip Code
Alexandria	VA	22314-3514

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L/STATE STREET

Occupation

RETIREE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	08	/	2013

Transaction ID : SA11AI.24378

Amount of Each Receipt this Period

48.41

Full Name (Last, First, Middle Initial)

**C. JAMES SCHMITZ**Mailing Address 6437 Rock Forest Drive  
#305

City	State	Zip Code
Bethesda	MD	20817

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L/STATE STREET

Occupation

RETIREE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	08	/	2013

Transaction ID : SA11AI.24379

Amount of Each Receipt this Period

62.95

SUBTOTAL of Receipts This Page (optional)..... ▶

172.19

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:  
(check only one)

PAGE 406 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

## **A. TAMMY SCHOLL**

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 ▼

340.62

Date of Receipt

MM / DD / YYYY  
07 / 22 / 2013

Transaction ID : SA11AI.25918

Amount of Each Receipt this Period

48.66

Full Name (Last, First, Middle Initial)

## **B. DARL D. SCHOSSOW**

Mailing Address 1910 2nd Avenue  
P.O. Box 189

City

Newport

State

MN

Zip Code

55055-0189

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

MM / DD / YYYY  
07 / 05 / 2013

Transaction ID : SA11AI.25080

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

## **C. DARL D. SCHOSSOW**

Mailing Address 1910 2nd Avenue  
P.O. Box 189

City

Newport

State

MN

Zip Code

55055-0189

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

MM / DD / YYYY  
07 / 31 / 2013

Transaction ID : SA11AI.25079

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

448.66

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 407 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. DAWN M. SCHOTT</b></p> <p>Mailing Address 405 E Holum Street</p> <p>City State Zip Code De Forest WI 53532</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WI CN 24/STATE OF WI STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 280.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2013 <b>Transaction ID : SA11AI.26192</b></p> <p>Amount of Each Receipt this Period 20.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. DAWN M. SCHOTT</b></p> <p>Mailing Address 405 E Holum Street</p> <p>City State Zip Code De Forest WI 53532</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WI CN 24/STATE OF WI STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 16 / 2013 <b>Transaction ID : SA11AI.26193</b></p> <p>Amount of Each Receipt this Period 20.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. DAWN M. SCHOTT</b></p> <p>Mailing Address 405 E Holum Street</p> <p>City State Zip Code De Forest WI 53532</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WI CN 24/STATE OF WI STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 320.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 29 / 2013 <b>Transaction ID : SA11AI.26194</b></p> <p>Amount of Each Receipt this Period 20.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>60.00</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 408 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. PAUL SCHROEDER</b></p> <p>Mailing Address 14 Gaskill Avenue</p> <p>City State Zip Code  Trenton NJ 08610</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME NJ CN 73 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  210.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013  <b>Transaction ID : SA11AI.25176</b></p> <p>Amount of Each Receipt this Period  15.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. PAUL SCHROEDER</b></p> <p>Mailing Address 14 Gaskill Avenue</p> <p>City State Zip Code  Trenton NJ 08610</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME NJ CN 73 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  225.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 30 / 2013  <b>Transaction ID : SA11AI.25174</b></p> <p>Amount of Each Receipt this Period  15.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. ERIC SCHUBERT</b></p> <p>Mailing Address 132 College Avenue</p> <p>City State Zip Code  Elmhurst PA 18416</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  473.90</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 22 / 2013  <b>Transaction ID : SA11AI.25919</b></p> <p>Amount of Each Receipt this Period  67.70</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>97.70</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 409 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

A. JULIE SCHULTZ

Mailing Address 1325 Meadowview

Apt. #1

City

Marioun

State

IA

Zip Code

52302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/DOCS

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.70

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24744

Amount of Each Receipt this Period

14.18

Full Name (Last, First, Middle Initial)

B. JULIE SCHULTZ

Mailing Address 1325 Meadowview

Apt. #1

City

Marioun

State

IA

Zip Code

52302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61/DOCS

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.88

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2013

Transaction ID : SA11AI.24745

Amount of Each Receipt this Period

14.18

Full Name (Last, First, Middle Initial)

C. 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 ▼

809.76

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25920

Amount of Each Receipt this Period

115.68

SUBTOTAL of Receipts This Page (optional)..... ►

144.04

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

FOR LINE NUMBER: PAGE 410 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. FRAN SCHWEIGERT</b></p> <p>Mailing Address P.O. Box 5356</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Helena</td> <td style="width: 33%;">State MT</td> <td style="width: 33%;">Zip Code 59604</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME MT CN 9</td> <td style="width: 33%;">Occupation PRESIDENT</td> <td style="width: 33%;"></td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">280.00</span></p>			City Helena	State MT	Zip Code 59604	Name of Employer AFSCME MT CN 9	Occupation PRESIDENT		<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 10 / 2013</span>  <b>Transaction ID : SA11AI.25148</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">40.00</span></p>	
City Helena	State MT	Zip Code 59604								
Name of Employer AFSCME MT CN 9	Occupation PRESIDENT									
<p>Full Name (Last, First, Middle Initial)  <b>B. CATHERINE SCOTT</b></p> <p>Mailing Address 1005 Chandler Street</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Philadelphia</td> <td style="width: 33%;">State PA</td> <td style="width: 33%;">Zip Code 19111</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME PA CN 47</td> <td style="width: 33%;">Occupation PRESIDENT</td> <td style="width: 33%;"></td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">225.00</span></p>			City Philadelphia	State PA	Zip Code 19111	Name of Employer AFSCME PA CN 47	Occupation PRESIDENT		<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 16 / 2013</span>  <b>Transaction ID : SA11AI.25953</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">30.00</span></p>	
City Philadelphia	State PA	Zip Code 19111								
Name of Employer AFSCME PA CN 47	Occupation PRESIDENT									
<p>Full Name (Last, First, Middle Initial)  <b>C. GAIL M. SCOTT</b></p> <p>Mailing Address 751 Bulen Avenue</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Columbus</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43205</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH CN 8</td> <td style="width: 33%;">Occupation STAFF REPRESENTATIVE</td> <td style="width: 33%;"></td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">274.35</span></p>			City Columbus	State OH	Zip Code 43205	Name of Employer AFSCME OH CN 8	Occupation STAFF REPRESENTATIVE		<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07 / 01 / 2013</span>  <b>Transaction ID : SA11AI.25290</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">36.06</span></p>	
City Columbus	State OH	Zip Code 43205								
Name of Employer AFSCME OH CN 8	Occupation STAFF REPRESENTATIVE									
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">106.06</span>							
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;"></span>							

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 411 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. JESSIE M. SCOTT</b></p> <p>Mailing Address P.O. Box 13886</p> <p>City State Zip Code Columbus OH 43213</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH ACCOUNT CLERK I</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 490.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 12 / 2013 <b>Transaction ID : SA11AI.25543</b></p> <p>Amount of Each Receipt this Period 35.00</p>		
<p>Full Name (Last, First, Middle Initial) <b>B. JESSIE M. SCOTT</b></p> <p>Mailing Address P.O. Box 13886</p> <p>City State Zip Code Columbus OH 43213</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH ACCOUNT CLERK I</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 525.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2013 <b>Transaction ID : SA11AI.25542</b></p> <p>Amount of Each Receipt this Period 35.00</p>		
<p>Full Name (Last, First, Middle Initial) <b>C. VIRGINIA L. SCOTT</b></p> <p>Mailing Address 513 Navaho Drive</p> <p>City State Zip Code Loveland OH 45140</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 4/SYCAMORE CCSD BUS DRIVER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 330.12</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.25739</b></p> <p>Amount of Each Receipt this Period 19.24</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>89.24</p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 412 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. VIRGINIA L. SCOTT**

Mailing Address 513 Navaho Drive

City

Loveland

State

OH

Zip Code

45140

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/SYCAMORE CCSD

Occupation

BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.36

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25738

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

**B. SHARON ANN SCROGGINS**

Mailing Address 3900 E. Sunset Road  
#1134

City

Las Vegas

State

NV

Zip Code

89120

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

409.54

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24380

Amount of Each Receipt this Period

31.83

Full Name (Last, First, Middle Initial)

**C. SHARON ANN SCROGGINS**

Mailing Address 3900 E. Sunset Road  
#1134

City

Las Vegas

State

NV

Zip Code

89120

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.37

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24381

Amount of Each Receipt this Period

31.83

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

82.90

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 413 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

A. CHARLES SCUDDER

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 ▼

394.13

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 01 / 2013

Transaction ID : SA11AI.24827

Amount of Each Receipt this Period

56.66

Full Name (Last, First, Middle Initial)

B. 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

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

784.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24382

Amount of Each Receipt this Period

64.23

Full Name (Last, First, Middle Initial)

C. 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

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

848.80

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24383

Amount of Each Receipt this Period

64.23

SUBTOTAL of Receipts This Page (optional)..... ►

185.12

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 414 OF 516  
(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**

<p>Full Name (Last, First, Middle Initial) <b>A. ELIOT A. SEIDE</b></p> <p>Mailing Address 300 Hardman Avenue South</p> <p>City State Zip Code South St. Paul MN 55075</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME MN CN 5/CN14 EXECUTIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 756.30</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 08 / 2013  <b>Transaction ID : SA11AI.25082</b></p> <p>Amount of Each Receipt this Period  96.58</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. ELIOT A. SEIDE</b></p> <p>Mailing Address 300 Hardman Avenue South</p> <p>City State Zip Code South St. Paul MN 55075</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME MN CN 5/CN14 EXECUTIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 770.30</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013  <b>Transaction ID : SA11AI.25081</b></p> <p>Amount of Each Receipt this Period  14.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. NICHOLAS A SERRANO</b></p> <p>Mailing Address 3003 Van Ness Street NW, Apt. S217</p> <p>City State Zip Code WASHINGTON DC 20008</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L ASSOCIATE GENERAL COUNSEL</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 389.92</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013  <b>Transaction ID : SA11AI.24385</b></p> <p>Amount of Each Receipt this Period  30.79</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>141.37</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 415 OF 516

<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**

<b>A. NICHOLAS A SERRANO</b> Full Name (Last, First, Middle Initial) Mailing Address 3003 Van Ness Street NW, Apt. S217 City WASHINGTON State DC Zip Code 20008 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME INT'L Occupation ASSOCIATE GENERAL COUNSEL Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 420.71			Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24386</b> Amount of Each Receipt this Period 30.79	
<b>B. TANYA C. SERRELL</b> Full Name (Last, First, Middle Initial) Mailing Address 2327 Dunkirk Drive City Columbus State OH Zip Code 43219 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 415.00			Date of Receipt M M / D D / Y Y Y Y Y 07 / 12 / 2013 <b>Transaction ID : SA11AI.25545</b> Amount of Each Receipt this Period 30.00	
<b>C. TANYA C. SERRELL</b> Full Name (Last, First, Middle Initial) Mailing Address 2327 Dunkirk Drive City Columbus State OH Zip Code 43219 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation JUVENILE CORRECTION OFFICER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 445.00			Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2013 <b>Transaction ID : SA11AI.25544</b> Amount of Each Receipt this Period 30.00	
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			90.79	
<b>TOTAL</b> This Period (last page this line number only)..... ▶				

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 416 OF 516  
(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**

Full Name (Last, First, Middle Initial)

**A. DOMINIC SGRO**

Mailing Address 144 Stormer Road

City	State	Zip Code
Indiana	PA	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 ▼

838.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	22	/	2013

Transaction ID : SA11AI.25921

Amount of Each Receipt this Period

144.60

Full Name (Last, First, Middle Initial)

**B. 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 ▼

525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2013

Transaction ID : SA11AI.25548

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

**C. 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 ▼

595.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	30	/	2013

Transaction ID : SA11AI.25547

Amount of Each Receipt this Period

70.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

284.60

**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 417 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

A. DIANE SHANNON

Mailing Address 8 Beacon Street

City

Boston

State

MA

Zip Code

02108-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MA CN 93

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.24791

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. JOE E. SHANNON III

Mailing Address 1614 Omar Drive

City

Columbus

State

OH

Zip Code

43207

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

ODJFS CUSTOMER SERVICE REP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 12 / 2013

Transaction ID : SA11AI.25550

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. JOE E. SHANNON III

Mailing Address 1614 Omar Drive

City

Columbus

State

OH

Zip Code

43207

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

ODJFS CUSTOMER SERVICE REP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 26 / 2013

Transaction ID : SA11AI.25549

Amount of Each Receipt this Period

25.00

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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 418 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. JENNIFER L. SHAW**

Mailing Address 4346 25th St.

City

San Francisco

State

CA

Zip Code

94114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

STRATEGIC ANALYST III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24387

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. JENNIFER L. SHAW**

Mailing Address 4346 25th St.

City

San Francisco

State

CA

Zip Code

94114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

STRATEGIC ANALYST III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24388

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. BETHANY D. SHEETS**

Mailing Address 570 Friendly Ridge Road

City

Crown City

State

OH

Zip Code

45623

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

THERAPUTIC PROGRAM TECH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 12 / 2013

Transaction ID : SA11AI.25552

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

65.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 419 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. BETHANY D. SHEETS**

Mailing Address 570 Friendly Ridge Road

City	State	Zip Code
Crown City	OH	45623

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

THERAPUTIC PROGRAM TECH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2013

Transaction ID : SA11AI.25551

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. PAMELA S. SHELTON**

Mailing Address 4471 North Leavitt Road NW

City	State	Zip Code
Warren	OH	44485

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	22	/	2013

Transaction ID : SA11AI.25293

Amount of Each Receipt this Period

9.62

Full Name (Last, First, Middle Initial)

**C. LISA A. SHILLING**

Mailing Address 521 E Church Street

City	State	Zip Code
Galion	OH	44833

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

ODJFS CUSTOMER REP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2013

Transaction ID : SA11AI.25553

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

49.62

**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 420 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

A. GARY SHIMER

Mailing Address 5421 Marcy Street

City

Warren

State

MI

Zip Code

48091

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.56

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.24913

Amount of Each Receipt this Period

29.12

Full Name (Last, First, Middle Initial)

B. GARY SHIMER

Mailing Address 5421 Marcy Street

City

Warren

State

MI

Zip Code

48091

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.68

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2013

Transaction ID : SA11AI.24912

Amount of Each Receipt this Period

29.12

Full Name (Last, First, Middle Initial)

C. SANDRA S. SHONBORN

Mailing Address P.O. Box 123

City

Jacksonville

State

OH

Zip Code

45740

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 ▼

609.24

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2013

Transaction ID : SA11AI.25295

Amount of Each Receipt this Period

86.82

SUBTOTAL of Receipts This Page (optional)..... ►

145.06

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 421 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. JASON T. SIDENER</b></p> <p>Mailing Address 219 Mittlan Street  #3</p> <p>City Madison State WI Zip Code 53703</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WI CN 11 Occupation PROJECT ORGANIZER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  410.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 02 / 2013</p> <p><b>Transaction ID : SA11AI.26222</b></p> <p>Amount of Each Receipt this Period  60.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. JASON T. SIDENER</b></p> <p>Mailing Address 219 Mittlan Street  #3</p> <p>City Madison State WI Zip Code 53703</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WI CN 11 Occupation PROJECT ORGANIZER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  470.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 30 / 2013</p> <p><b>Transaction ID : SA11AI.26223</b></p> <p>Amount of Each Receipt this Period  60.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. STEVE SIEGEL</b></p> <p>Mailing Address 411 North Court</p> <p>City Ottumwa State IA Zip Code 52501</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME IA CN 61 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  280.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 08 / 2013</p> <p><b>Transaction ID : SA11AI.24746</b></p> <p>Amount of Each Receipt this Period  40.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>160.00</p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 422 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. ISSA J. SIMPSON</b></p> <p>Mailing Address 1139 S.E. 16th Avenue</p> <p>City Portland State OR Zip Code 97214-3705</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OR CN 75 Occupation OFFICE SPECIALIST</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 420.00</p>		<p>Date of Receipt            M M / D D / Y Y Y Y Y            07 / 31 / 2013  <b>Transaction ID : SA11AI.25799</b> </p> <p>Amount of Each Receipt this Period            60.00         </p>
<p>Full Name (Last, First, Middle Initial) <b>B. APRIL SIMS</b></p> <p>Mailing Address 631 110th Street S</p> <p>City Tacoma State WA Zip Code 98444</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WA CN 28 Occupation LPA FIELD COORDINATOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 350.00</p>		<p>Date of Receipt            M M / D D / Y Y Y Y Y            07 / 24 / 2013  <b>Transaction ID : SA11AI.26138</b> </p> <p>Amount of Each Receipt this Period            50.00         </p>
<p>Full Name (Last, First, Middle Initial) <b>C. TODD L. SINGER</b></p> <p>Mailing Address 1030 6th Avenue</p> <p>City Steelton State PA Zip Code 17113</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME PA CN 13/STATE OF PA Occupation ADMINISTRATIVE/CLERICAL</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 320.00</p>		<p>Date of Receipt            M M / D D / Y Y Y Y Y            07 / 31 / 2013  <b>Transaction ID : SA11AI.25922</b> </p> <p>Amount of Each Receipt this Period            40.00         </p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>150.00</p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 423 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. ROBERT M. SKEES</b></p> <p>Mailing Address 643 Grandview Avenue</p> <p>City State Zip Code Pittsburgh PA 15202</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation AFSCME PA CN 13/STATE OF PA STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">320.00</span> </p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 31 / 2013</span> </p> <p><b>Transaction ID : SA11AI.25923</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">40.00</span> </p>	
<p>Full Name (Last, First, Middle Initial) <b>B. ROBERTA J. SKOK</b></p> <p>Mailing Address 775 Township Road #2204</p> <p>City State Zip Code Perrysville OH 44864</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation AFSCME OH CN 8 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">607.64</span> </p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 01 / 2013</span> </p> <p><b>Transaction ID : SA11AI.25296</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">86.42</span> </p>	
<p>Full Name (Last, First, Middle Initial) <b>C. TERRY SKULTETY</b></p> <p>Mailing Address 222 Meade Street</p> <p>City State Zip Code Homer City PA 15748</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">507.75</span> </p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 22 / 2013</span> </p> <p><b>Transaction ID : SA11AI.25924</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">101.55</span> </p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">227.97</span>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;"></span>	

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 424 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. 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 25

Occupation

ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.48

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 02 / 2013

Transaction ID : SA11AI.24915

Amount of Each Receipt this Period

33.26

Full Name (Last, First, Middle Initial)

**B. 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 25

Occupation

ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.74

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 16 / 2013

Transaction ID : SA11AI.24914

Amount of Each Receipt this Period

33.26

Full Name (Last, First, Middle Initial)

**C. CONNIE SMITH**

Mailing Address 1739 E 24th Street

City State Zip Code  
 Capitol Heights IA 50317

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.62

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 08 / 2013

Transaction ID : SA11AI.24747

Amount of Each Receipt this Period

58.66

**SUBTOTAL** of Receipts This Page (optional)..... ►

125.18

**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 425 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. DEREK L. SMITH**

Mailing Address 4306 Broken Arrow Court

City State Zip Code  
 Clinton MD 20735

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, GENERAL SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

634.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 15 2013

**Transaction ID : SA11AI.24389**

Amount of Each Receipt this Period

46.99

Full Name (Last, First, Middle Initial)

**B. DEREK L. SMITH**

Mailing Address 4306 Broken Arrow Court

City State Zip Code  
 Clinton MD 20735

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, GENERAL SERVICE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

681.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 31 2013

**Transaction ID : SA11AI.24390**

Amount of Each Receipt this Period

46.99

Full Name (Last, First, Middle Initial)

**C. KRISTIN SMITH**

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 ▼

340.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 22 2013

**Transaction ID : SA11AI.25925**

Amount of Each Receipt this Period

48.66

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

142.64

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 426 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. MICHELLE SMITH**

Mailing Address 1212 JEFFERSON ST SE STE 300

City State Zip Code  
 OLYMPIA WA 98201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 10 / 2013

Transaction ID : SA11AI.26142

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. MICHELLE SMITH**

Mailing Address 1212 JEFFERSON ST SE STE 300

City State Zip Code  
 OLYMPIA WA 98201

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  
 07 / 25 / 2013

Transaction ID : SA11AI.26140

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. BESSIE SNIDER**

Mailing Address 1034 N Washington Avenue

City State Zip Code  
 Lansing MI 48906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 02 / 2013

Transaction ID : SA11AI.24917

Amount of Each Receipt this Period

21.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

81.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 427 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

## **A. BESSIE SNIDER**

Mailing Address 1034 N Washington Avenue

City State Zip Code  
 Lansing MI 48906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 16 / 2013

Transaction ID : SA11AI.24916

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

## **B. ANN M. SNYDER**

Mailing Address 5392 Aspen Lane

City State Zip Code  
 Silver bay MN 55614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.25083

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

## **C. ANN M. SNYDER**

Mailing Address 5392 Aspen Lane

City State Zip Code  
 Silver bay MN 55614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.25084

Amount of Each Receipt this Period

12.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

103.00

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 428 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. DOUGLAS SOLLITTO**

Mailing Address 210 Robins Avenue

City	State	Zip Code
Niles	OH	44446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11

Occupation

CORRECTIONAL LAUNDRY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2013

Transaction ID : SA11AI.25556

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. DOUGLAS SOLLITTO**

Mailing Address 210 Robins Avenue

City	State	Zip Code
Niles	OH	44446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11

Occupation

CORRECTIONAL LAUNDRY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	30	/	2013

Transaction ID : SA11AI.25557

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. 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 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.19

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

Transaction ID : SA11AI.24391

Amount of Each Receipt this Period

52.91

**SUBTOTAL** of Receipts This Page (optional)..... ►

132.91

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 429 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

## **A. 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 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.10

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24392

Amount of Each Receipt this Period

52.91

Full Name (Last, First, Middle Initial)

## **B. ELIZABETH M. SPARKS**

Mailing Address 817 220th St.

City State Zip Code  
Baldwin WI 54002

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 ▼

239.03

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24393

Amount of Each Receipt this Period

19.30

Full Name (Last, First, Middle Initial)

## **C. ELIZABETH M. SPARKS**

Mailing Address 817 220th St.

City State Zip Code  
Baldwin WI 54002

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 ▼

258.33

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24394

Amount of Each Receipt this Period

19.30

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

91.51

X	11a		11b		11c		12		
	13		14		15		16		17

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

[illegible]

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 431 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. MARY SPELTZ**

Mailing Address W364 Palubicki Road

City

Fountain City

State

WI

Zip Code

54629

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WI CN 40/LOCAL 2484

Occupation

SOCIAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2013

Transaction ID : SA11AI.26224

Amount of Each Receipt this Period

37.00

Full Name (Last, First, Middle Initial)

**B. TAMMI SPENCE**

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 ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2013

Transaction ID : SA11AI.24828

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

**C. HARRIETT SPENCER**

Mailing Address 49 Fulliam Circle

City

Allentown

State

NH

Zip Code

03275-0000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MA CN 93

Occupation

COORDINATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.24792

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

112.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 432 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. BEVERLY J. SPETZ**

Mailing Address 112 Elmwood Street

City	State	Zip Code
Delta	OH	43515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

857.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2013

Transaction ID : SA11AI.25745

Amount of Each Receipt this Period

68.10

Full Name (Last, First, Middle Initial)

**B. BEVERLY J. SPETZ**

Mailing Address 112 Elmwood Street

City	State	Zip Code
Delta	OH	43515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

926.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2013

Transaction ID : SA11AI.25744

Amount of Each Receipt this Period

68.10

Full Name (Last, First, Middle Initial)

**C. KAMALA B. SRIKAR**

Mailing Address 9908 Colebrook Avenue

City	State	Zip Code
Potomac	MD	20854

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOC. DIRECTOR, CONF &amp; TRAVEL SVCS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

Transaction ID : SA11AI.24397

Amount of Each Receipt this Period

52.91

**SUBTOTAL** of Receipts This Page (optional)..... ►

189.11

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 433 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. KAMALA B. SRIKAR**

Mailing Address 9908 Colebrook Avenue

City State Zip Code  
 Potomac MD 20854

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOC. DIRECTOR, CONF & TRAVEL SVCS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

765.74

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.24398

Amount of Each Receipt this Period

52.91

Full Name (Last, First, Middle Initial)

**B. THERESA A. ST. AORO**

Mailing Address 1545 Hamline Avenue N  
 West Unit

City State Zip Code  
 St. Paul MN 55108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 05 / 2013

Transaction ID : SA11AI.25089

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. THERESA A. ST. AORO**

Mailing Address 1545 Hamline Avenue N  
 West Unit

City State Zip Code  
 St. Paul MN 55108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MN CN 5/STATE OF MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.25090

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

152.91

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 434 OF 516  
 (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**

Full Name (Last, First, Middle Initial)

**A. JAMES A STANLEY**

Mailing Address 2939 Graham Rd

City

Falls Church

State

VA

Zip Code

22842

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

413.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

Transaction ID : SA11AI.24399

Amount of Each Receipt this Period

32.71

Full Name (Last, First, Middle Initial)

**B. JAMES A STANLEY**

Mailing Address 2939 Graham Rd

City

Falls Church

State

VA

Zip Code

22842

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

446.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

Transaction ID : SA11AI.24400

Amount of Each Receipt this Period

32.71

Full Name (Last, First, Middle Initial)

**C. RUTH M STEINMETZ**

Mailing Address 6 Tegner Court

City

Rockville

State

MD

Zip Code

20850

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSIST. DIRECTOR, CONF. &amp; TRVL SVCS

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

528.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

Transaction ID : SA11AI.24403

Amount of Each Receipt this Period

41.48

**SUBTOTAL** of Receipts This Page (optional)..... ►

106.90

**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 435 OF 516

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. RUTH M STEINMETZ**

Mailing Address 6 Tegner Court

City	State	Zip Code
Rockville	MD	20850

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSIST. DIRECTOR, CONF. &amp; TRVL SVCS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

569.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2013

Transaction ID : SA11AI.24402

Amount of Each Receipt this Period

41.48

Full Name (Last, First, Middle Initial)

**B. CAROL STEMLER**
Mailing Address 891 Park Street  
#201

City	State	Zip Code
Oregon	WI	53575

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME WI CN 40/DANE COUNTY

Occupation

LPN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2013

Transaction ID : SA11AI.26225

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. CAROL STEMLER**
Mailing Address 891 Park Street  
#201

City	State	Zip Code
Oregon	WI	53575

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME WI CN 40/DANE COUNTY

Occupation

LPN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2013

Transaction ID : SA11AI.26227

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

71.48

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 436 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. VICKIE R. STEPHENS</b></p> <p>Mailing Address 4320 NW Second Avenue</p> <p>City State Zip Code  Des Moines IA 50313</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME IA CN 61/STATE OF IA STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  210.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 12 / 2013</p> <p><b>Transaction ID : SA11AI.24748</b></p> <p>Amount of Each Receipt this Period  15.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. VICKIE R. STEPHENS</b></p> <p>Mailing Address 4320 NW Second Avenue</p> <p>City State Zip Code  Des Moines IA 50313</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME IA CN 61/STATE OF IA STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  225.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 23 / 2013</p> <p><b>Transaction ID : SA11AI.24749</b></p> <p>Amount of Each Receipt this Period  15.00</p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. JUDY R STEVENS</b></p> <p>Mailing Address 7240 Fairchild Drive  #201</p> <p>City State Zip Code  Alexandria VA 22306</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME INT'L STRATEGIC ANALYST III</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  614.45</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013</p> <p><b>Transaction ID : SA11AI.24404</b></p> <p>Amount of Each Receipt this Period  48.25</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>78.25</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 437 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. JUDY R STEVENS</b></p> <p>Mailing Address 7240 Fairchild Drive  #201</p> <p>City State Zip Code  Alexandria VA 22306</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME INT'L STRATEGIC ANALYST III</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  662.70</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013</p> <p><b>Transaction ID : SA11AI.24405</b></p> <p>Amount of Each Receipt this Period  48.25</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. KATHLEEN M. STEWART</b></p> <p>Mailing Address 7326 State Route 19</p> <p>City State Zip Code  Mount Gilead OH 43338</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME OH LOC 11/STATE OF OH ACCOUNTANT/EXAMINER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  280.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 12 / 2013</p> <p><b>Transaction ID : SA11AI.25559</b></p> <p>Amount of Each Receipt this Period  20.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. KATHLEEN M. STEWART</b></p> <p>Mailing Address 7326 State Route 19</p> <p>City State Zip Code  Mount Gilead OH 43338</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME OH LOC 11/STATE OF OH ACCOUNTANT/EXAMINER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  300.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 26 / 2013</p> <p><b>Transaction ID : SA11AI.25558</b></p> <p>Amount of Each Receipt this Period  20.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>88.25</p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 438 OF 516

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. GREGORY S. STIGER**

Mailing Address 3320 Plank Road

City

New Castle

State

PA

Zip Code

16105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

294.91

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	2		2	0	1	3

Transaction ID : SA11AI.25926

Amount of Each Receipt this Period

44.59

Full Name (Last, First, Middle Initial)

**B. ANDREA STRADER**Mailing Address 1234 Massachusetts Avenue NW  
#524

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION REPRESENTATIVE III

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

646.10

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	3

Transaction ID : SA11AI.24408

Amount of Each Receipt this Period

49.70

Full Name (Last, First, Middle Initial)

**C. ANDREA STRADER**Mailing Address 1234 Massachusetts Avenue NW  
#524

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION REPRESENTATIVE III

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

706.10

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	9		2	0	1	3

Transaction ID : SA11AI.24409

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

154.29

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 439 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

## **A. ANDREA STRADER**

Mailing Address 1234 Massachusetts Avenue NW  
#524

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION REPRESENTATIVE III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.80

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24410

Amount of Each Receipt this Period

49.70

Full Name (Last, First, Middle Initial)

## **B. TRACY STRAUSSER**

Mailing Address 217 Driftwood Drive

City State Zip Code  
Canonsburg PA 15317

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.49

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24411

Amount of Each Receipt this Period

27.73

Full Name (Last, First, Middle Initial)

## **C. TRACY STRAUSSER**

Mailing Address 217 Driftwood Drive

City State Zip Code  
Canonsburg PA 15317

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.22

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24412

Amount of Each Receipt this Period

27.73

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

105.16

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
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 Detailed Summary Page

FOR LINE NUMBER: PAGE 440 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. TIMOTHY J. STRECKER**

 Mailing Address 70 I Street SE  
 Apt. 1230

 City State Zip Code  
 Washington DC 20003

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, INFORMATION SYS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

738.29

Date of Receipt

 M M / D D / Y Y Y Y Y  
 07 / 15 / 2013

Transaction ID : SA11AI.24413

Amount of Each Receipt this Period

57.38

Full Name (Last, First, Middle Initial)

**B. TIMOTHY J. STRECKER**

 Mailing Address 70 I Street SE  
 Apt. 1230

 City State Zip Code  
 Washington DC 20003

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, INFORMATION SYS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

795.67

Date of Receipt

 M M / D D / Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.24414

Amount of Each Receipt this Period

57.38

Full Name (Last, First, Middle Initial)

**C. MARY J. STUCKERT**

Mailing Address 814 S. Spring Street

 City State Zip Code  
 Bucyrus OH 44820

 FEC ID number of contributing  
 federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

ODJFS CUSTOMER SERVICE REP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 07 / 12 / 2013

Transaction ID : SA11AI.25562

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

134.76

**TOTAL** This Period (last page this line number only)..... ►

134.76



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 441 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. MARY J. STUCKERT**

Mailing Address 814 S. Spring Street

City State Zip Code  
Bucyrus OH 44820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

ODJFS CUSTOMER SERVICE REP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 26 / 2013

Transaction ID : SA11AI.25561

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. ARLENE STURDIVANT**

Mailing Address 6113 Kolb Street

City State Zip Code  
Fairmont Heights MD 20743

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ADMINISTRATIVE ASSISTANT I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24415

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. ARLENE STURDIVANT**

Mailing Address 6113 Kolb Street

City State Zip Code  
Fairmont Heights MD 20743

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ADMINISTRATIVE ASSISTANT I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24416

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 442 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. RENATA L. STURTEVANT**

Mailing Address W9695 Lake Drive

City

Edgerton

State

WI

Zip Code

53534

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WI CN 24/STATE OF WI

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		0	2		2	0	1	3		

**Transaction ID : SA11AI.26195**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. RENATA L. STURTEVANT**

Mailing Address W9695 Lake Drive

City

Edgerton

State

WI

Zip Code

53534

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WI CN 24/STATE OF WI

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		1	6		2	0	1	3		

**Transaction ID : SA11AI.26196**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. RENATA L. STURTEVANT**

Mailing Address W9695 Lake Drive

City

Edgerton

State

WI

Zip Code

53534

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WI CN 24/STATE OF WI

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		3	0		2	0	1	3		

**Transaction ID : SA11AI.26198**

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

60.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 443 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. WANDA M. SUBER</b></p> <p>Mailing Address 805 Broderick Dr.</p> <p>City Oxon Hill State MD Zip Code 20745</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation STAFF SPECIALIST, HUMAN RESOURCES</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <b>481.00</b></p>			<p>Date of Receipt  <b>07 / 15 / 2013</b>  <b>Transaction ID : SA11AI.24417</b></p> <p>Amount of Each Receipt this Period  <b>37.00</b></p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. WANDA M. SUBER</b></p> <p>Mailing Address 805 Broderick Dr.</p> <p>City Oxon Hill State MD Zip Code 20745</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation STAFF SPECIALIST, HUMAN RESOURCES</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <b>518.00</b></p>			<p>Date of Receipt  <b>07 / 31 / 2013</b>  <b>Transaction ID : SA11AI.24418</b></p> <p>Amount of Each Receipt this Period  <b>37.00</b></p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. MICHAEL E. SUKAL</b></p> <p>Mailing Address 526 Clemson Drive</p> <p>City Pittsburgh State PA Zip Code 15243</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation DIRECTOR, ORGANIZING &amp; FIELD SVCS</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <b>1019.33</b></p>			<p>Date of Receipt  <b>07 / 15 / 2013</b>  <b>Transaction ID : SA11AI.24419</b></p> <p>Amount of Each Receipt this Period  <b>78.41</b></p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><b>152.41</b></p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p></p>	

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 444 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. MICHAEL E. SUKAL</b></p> <p>Mailing Address 526 Clemson Drive</p> <p>City State Zip Code Pittsburgh PA 15243</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L DIRECTOR, ORGANIZING &amp; FIELD SVCS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1044.33</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 16 / 2013 <b>Transaction ID : SA11AI.24421</b></p> <p>Amount of Each Receipt this Period 25.00</p>		
<p>Full Name (Last, First, Middle Initial) <b>B. MICHAEL E. SUKAL</b></p> <p>Mailing Address 526 Clemson Drive</p> <p>City State Zip Code Pittsburgh PA 15243</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L DIRECTOR, ORGANIZING &amp; FIELD SVCS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1122.74</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24420</b></p> <p>Amount of Each Receipt this Period 78.41</p>		
<p>Full Name (Last, First, Middle Initial) <b>C. MARY E. SULLIVAN</b></p> <p>Mailing Address 1880 9th Avenue</p> <p>City State Zip Code Watervliet NY 12189</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME NY LOC 1000 EXECUTIVE VICE PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1080.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 03 / 2013 <b>Transaction ID : SA11AI.25233</b></p> <p>Amount of Each Receipt this Period 25.00</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>128.41</p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 445 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. MARY E. SULLIVAN</b></p> <p>Mailing Address 1880 9th Avenue</p> <p>City State Zip Code          Watervliet NY 12189</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation          AFSCME NY LOC 1000 EXECUTIVE VICE PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1105.00</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 10 / 2013</span></p> <p><b>Transaction ID : SA11AI.25230</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">25.00</span></p>		
<p>Full Name (Last, First, Middle Initial)  <b>B. MARY E. SULLIVAN</b></p> <p>Mailing Address 1880 9th Avenue</p> <p>City State Zip Code          Watervliet NY 12189</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation          AFSCME NY LOC 1000 EXECUTIVE VICE PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1205.00</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 31 / 2013</span></p> <p><b>Transaction ID : SA11AI.25231</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p>		
<p>Full Name (Last, First, Middle Initial)  <b>C. MARY E. SULLIVAN</b></p> <p>Mailing Address 1880 9th Avenue</p> <p>City State Zip Code          Watervliet NY 12189</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation          AFSCME NY LOC 1000 EXECUTIVE VICE PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1230.00</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 31 / 2013</span></p> <p><b>Transaction ID : SA11AI.25232</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">25.00</span></p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">150.00</span>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;"></span>		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 446 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

## **A. SHIRLEY SUNDY**

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 ▼

269.64

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25927

Amount of Each Receipt this Period

38.52

Full Name (Last, First, Middle Initial)

## **B. MICHAEL SVEDA**

Mailing Address 439 Willow Circle

City State Zip Code  
Allentown PA 18102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.26

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25928

Amount of Each Receipt this Period

58.18

Full Name (Last, First, Middle Initial)

## **C. ADAM SWIHART**

Mailing Address 4320 NW Second Avenue

City State Zip Code  
Des Moines IA 50313

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.74

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 08 / 2013

Transaction ID : SA11AI.24750

Amount of Each Receipt this Period

30.82

**SUBTOTAL** of Receipts This Page (optional)..... ►

127.52

**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 PageFOR LINE NUMBER: PAGE 447 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. JAMES R. TACKETT**

Mailing Address 517 S. High Street

City

Yellow Springs

State

OH

Zip Code

45387

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

403.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2013

Transaction ID : SA11AI.25747

Amount of Each Receipt this Period

34.62

Full Name (Last, First, Middle Initial)

**B. JAMES R. TACKETT**

Mailing Address 517 S. High Street

City

Yellow Springs

State

OH

Zip Code

45387

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

438.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2013

Transaction ID : SA11AI.25746

Amount of Each Receipt this Period

34.62

Full Name (Last, First, Middle Initial)

**C. 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  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1596.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2013

Transaction ID : SA11AI.24422

Amount of Each Receipt this Period

122.80

**SUBTOTAL** of Receipts This Page (optional)..... ►

192.04

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 448 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. JEFFREY M. TAGGART</b></p> <p>Mailing Address 12001 Market Street  Unit 450</p> <p>City Reston State VA Zip Code 20190</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation ASSOCIATE DIRECTOR, ACCOUNTING</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  1719.20</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013  <b>Transaction ID : SA11AI.24423</b></p> <p>Amount of Each Receipt this Period  122.80</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. ANN M. TANNER</b></p> <p>Mailing Address 816 Wilder Avenue</p> <p>City Elyria State OH Zip Code 44035</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  283.60</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 02 / 2013  <b>Transaction ID : SA11AI.25749</b></p> <p>Amount of Each Receipt this Period  29.20</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. ANN M. TANNER</b></p> <p>Mailing Address 816 Wilder Avenue</p> <p>City Elyria State OH Zip Code 44035</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  312.80</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 19 / 2013  <b>Transaction ID : SA11AI.25748</b></p> <p>Amount of Each Receipt this Period  29.20</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>181.20</p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 449 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. JANEEN D. TAYLOR**

Mailing Address 1428 Hartford Avenue

City State Zip Code  
Akron OH 44320

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2013

Transaction ID : SA11AI.25300

Amount of Each Receipt this Period

29.04

Full Name (Last, First, Middle Initial)

**B. TODD TAYLOR**

Mailing Address P.O. Box 9457

City State Zip Code  
Cedar Rapids IA 52409-9457

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME IA CN 61

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 08 / 2013

Transaction ID : SA11AI.24755

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**C. MOHAMMED TEHRANI**

Mailing Address 22110 Castleton Court

City State Zip Code  
Boys MD 20841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, OPERATIONS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

647.67

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24424

Amount of Each Receipt this Period

50.13

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

114.17

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 450 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<b>A. MOHAMMED TEHRANI</b> Full Name (Last, First, Middle Initial) Mailing Address 22110 Castleton Court City Boyds State MD Zip Code 20841 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, OPERATIONS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 697.80			Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24425</b> Amount of Each Receipt this Period 50.13
<b>B. DAVID TESTER</b> Full Name (Last, First, Middle Initial) Mailing Address 6955 H New Oxford Road City Harrisburg State PA Zip Code 17112 FEC ID number of contributing federal political committee. C Name of Employer AFSCME PA CN 13 Occupation TRANSPORTATION TECHNICIAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 473.90			Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013 <b>Transaction ID : SA11AI.25929</b> Amount of Each Receipt this Period 67.70
<b>C. BARBARA A. Thomas</b> Full Name (Last, First, Middle Initial) Mailing Address 3185 Elmreeb Drive City Columbus State OH Zip Code 43219 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation COMPUTER OPERATOR III Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00			Date of Receipt M M / D D / Y Y Y Y Y 07 / 12 / 2013 <b>Transaction ID : SA11AI.25567</b> Amount of Each Receipt this Period 15.00
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			132.83
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 451 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. BARBARA A. Thomas**

Mailing Address 3185 Elmreeb Drive

City State Zip Code  
Columbus OH 43219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

COMPUTER OPERATOR III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 26 / 2013

Transaction ID : SA11AI.25566

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. BETTY A. THOMAS**

Mailing Address 2006 Faycrest Drive

City State Zip Code  
Cincinnati OH 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 ▼

316.62

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2013

Transaction ID : SA11AI.25301

Amount of Each Receipt this Period

45.06

Full Name (Last, First, Middle Initial)

**C. JOHN THOMAS**

Mailing Address 1034 N Washington Avenue

City State Zip Code  
Lansing MI 48906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.56

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.24920

Amount of Each Receipt this Period

29.12

**SUBTOTAL** of Receipts This Page (optional)..... ►

89.18

**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 452 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. JOHN THOMAS**

Mailing Address 1034 N Washington Avenue

City State Zip Code  
 Lansing MI 48906

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.68

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 16 / 2013

Transaction ID : SA11AI.24919

Amount of Each Receipt this Period

29.12

Full Name (Last, First, Middle Initial)

**B. PATRICK S. THOMASSON**

Mailing Address 1347 Marot Drive

City State Zip Code  
 Trotwood OH 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 ▼

446.86

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 01 / 2013

Transaction ID : SA11AI.25302

Amount of Each Receipt this Period

63.58

Full Name (Last, First, Middle Initial)

**C. EUNICE C. THOMPSON**

Mailing Address P.O. Box 267

City State Zip Code  
 Malvern OH 44644

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

ACCOUNT CLERK II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 12 / 2013

Transaction ID : SA11AI.25570

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

107.70

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 453 OF 516

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. EUNICE C. THOMPSON**

Mailing Address P.O. Box 267

City	State	Zip Code
Malvern	OH	44644

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

ACCOUNT CLERK II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	1	3

Transaction ID : SA11AI.25569

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. LAWRENCE W. THOMPSON**Mailing Address 3662 Bridgeport Way W.  
Apt. D1

City	State	Zip Code
University Place	WA	98466

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	1	3

Transaction ID : SA11AI.26146

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. PAULETTE E. THOMPSON**

Mailing Address 3902 154th Street E.

City	State	Zip Code
Tacoma	WA	98446

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	1	3

Transaction ID : SA11AI.26150

Amount of Each Receipt this Period

23.00

SUBTOTAL of Receipts This Page (optional)..... ►

53.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 454 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. PAULETTE E. THOMPSON</b></p> <p>Mailing Address 3902 154th Street E.</p> <p>City Tacoma State WA Zip Code 98446</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>322.00</b></p>			<p>Date of Receipt  <b>07 / 25 / 2013</b>  <b>Transaction ID : SA11AI.26149</b></p> <p>Amount of Each Receipt this Period  <b>23.00</b></p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. ROBERT L. THOMPSON</b></p> <p>Mailing Address 927 Gibbs Avenue, NE</p> <p>City Canton State OH Zip Code 44705-1074</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH CN 8 Occupation REGIONAL DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>607.64</b></p>			<p>Date of Receipt  <b>07 / 01 / 2013</b>  <b>Transaction ID : SA11AI.25303</b></p> <p>Amount of Each Receipt this Period  <b>86.42</b></p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. PETER THOR</b></p> <p>Mailing Address 4 Betts Place</p> <p>City East Norwalk State CT Zip Code 06855-0000</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME CT CN 4 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>336.05</b></p>			<p>Date of Receipt  <b>07 / 11 / 2013</b>  <b>Transaction ID : SA11AI.24582</b></p> <p>Amount of Each Receipt this Period  <b>45.00</b></p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><b>154.42</b></p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p></p>	

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 455 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. FRANK THORNTON JR.</b></p> <p>Mailing Address 190 W. Ostend Street  Suite 101</p> <p>City Baltimore State MD Zip Code 21230</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MD CN 982 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  373.38</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 01 / 2013</p> <p><b>Transaction ID : SA11AI.24829</b></p> <p>Amount of Each Receipt this Period  53.34</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. JOHN THORSON</b></p> <p>Mailing Address 555 Selby Avenue</p> <p>City Saint Paul State MN Zip Code 55102</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MN CN 5/CN14 Occupation POLITICAL ACTION REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  506.50</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 08 / 2013</p> <p><b>Transaction ID : SA11AI.25096</b></p> <p>Amount of Each Receipt this Period  72.56</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. GINGER THRASHER</b></p> <p>Mailing Address 13807 Oink Joint Road</p> <p>City Wadena State MN Zip Code 56482</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MN CN 65 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  340.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 05 / 2013</p> <p><b>Transaction ID : SA11AI.25131</b></p> <p>Amount of Each Receipt this Period  50.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>175.90</p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 456 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. MATTHEW K. TINAY</b></p> <p>Mailing Address 1544 Kewalo Street Unit 203</p> <p>City Honolulu State HI Zip Code 96822-4248</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 294.00</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 10 / 2013 <b>Transaction ID : SA11AI.24631</b></p> <p>Amount of Each Receipt this Period 42.00</p>
<p>Full Name (Last, First, Middle Initial) <b>B. PAUL E. TOALSTON</b></p> <p>Mailing Address 1750 Miday Avenue NE</p> <p>City East Canton State OH Zip Code 44730</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 4/OSNABURG LSD Occupation CUSTODIAN</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 202.56</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 19 / 2013 <b>Transaction ID : SA11AI.25750</b></p> <p>Amount of Each Receipt this Period 19.24</p>
<p>Full Name (Last, First, Middle Initial) <b>C. TAMARA L. TOCHER</b></p> <p>Mailing Address 321 SE 19th Street</p> <p>City Olympia State WA Zip Code 98501</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 612.56</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24426</b></p> <p>Amount of Each Receipt this Period 47.12</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		108.36
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 457 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. TAMARA L. TOCHER</b></p> <p>Mailing Address 321 SE 19th Street</p> <p>City Olympia State WA Zip Code 98501</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>659.68</b></p>			<p>Date of Receipt  <b>07 / 31 / 2013</b>  <b>Transaction ID : SA11AI.24427</b></p> <p>Amount of Each Receipt this Period  <b>47.12</b></p>		
<p>Full Name (Last, First, Middle Initial)  <b>B. LEIGH TOMLINSON</b></p> <p>Mailing Address 930 Stag Thicket Lane</p> <p>City Mason State MI Zip Code 48854-1400</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MI CN 25 Occupation ACCTG. /HUMAN RESOURCE DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>497.38</b></p>			<p>Date of Receipt  <b>07 / 02 / 2013</b>  <b>Transaction ID : SA11AI.24922</b></p> <p>Amount of Each Receipt this Period  <b>38.26</b></p>		
<p>Full Name (Last, First, Middle Initial)  <b>C. LEIGH TOMLINSON</b></p> <p>Mailing Address 930 Stag Thicket Lane</p> <p>City Mason State MI Zip Code 48854-1400</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MI CN 25 Occupation ACCTG. /HUMAN RESOURCE DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>535.64</b></p>			<p>Date of Receipt  <b>07 / 16 / 2013</b>  <b>Transaction ID : SA11AI.24921</b></p> <p>Amount of Each Receipt this Period  <b>38.26</b></p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><b>123.64</b></p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 458 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. ROSELLA P. TOPE**

Mailing Address 9839 Oaklane Drive SE

City

Waynesburg

State

OH

Zip Code

44688

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/SANDY VALLEY

Occupation

TEACHER AIDE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25751

Amount of Each Receipt this Period

38.46

Full Name (Last, First, Middle Initial)

**B. 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  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

809.76

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

Transaction ID : SA11AI.25930

Amount of Each Receipt this Period

115.68

Full Name (Last, First, Middle Initial)

**C. ALEXANDRA TOWNSEND**

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  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

243.75

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.25147

Amount of Each Receipt this Period

18.75

**SUBTOTAL** of Receipts This Page (optional)..... ►

172.89

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 459 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. ALEXANDRA TOWNSEND</b></p> <p>Mailing Address 3412 Knipp Drive Suite 102</p> <p>City Jefferson City State MO Zip Code 65109</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME MO CN 72 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 262.50</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 23 / 2013 <b>Transaction ID : SA11AI.25146</b></p> <p>Amount of Each Receipt this Period 18.75</p>
<p>Full Name (Last, First, Middle Initial) <b>B. DOROTHY TOWNSEND</b></p> <p>Mailing Address 2418 Central Avenue</p> <p>City Indianapolis State IN Zip Code 46205</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation REGIONAL DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 865.93</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24428</b></p> <p>Amount of Each Receipt this Period 67.80</p>
<p>Full Name (Last, First, Middle Initial) <b>C. DOROTHY TOWNSEND</b></p> <p>Mailing Address 2418 Central Avenue</p> <p>City Indianapolis State IN Zip Code 46205</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation REGIONAL DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 933.73</p>		<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24429</b></p> <p>Amount of Each Receipt this Period 67.80</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		154.35
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 460 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

## **A. ROYCE TREADAWAY**

Mailing Address 38 Shipway

City State Zip Code  
 Baltimore MD 21222

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME MD CN 982

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.38

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 01 / 2013

Transaction ID : SA11AI.24830

Amount of Each Receipt this Period

48.34

Full Name (Last, First, Middle Initial)

## **B. VON TREAS**

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 ▼

421.81

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 22 / 2013

Transaction ID : SA11AI.25931

Amount of Each Receipt this Period

72.73

Full Name (Last, First, Middle Initial)

## **C. BONITA J. TUCKER-MERCADO**

Mailing Address 12106 Leeila Avenue

City State Zip Code  
 Cleveland OH 44135

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/CUYAHOGA COUNTY

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.64

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 02 / 2013

Transaction ID : SA11AI.25752

Amount of Each Receipt this Period

19.24

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

140.31

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 461 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<b>A. BONITA J. TUCKER-MERCADO</b> Full Name (Last, First, Middle Initial) Mailing Address 12106 Leeila Avenue City Cleveland State OH Zip Code 44135 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME OH LOC 4/CUYAHOGA COUNTY Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.88			Date of Receipt M M / D D / Y Y Y Y Y 07 / 19 / 2013 <b>Transaction ID : SA11AI.25753</b> Amount of Each Receipt this Period 19.24
<b>B. ELIZABETH A. TURNBOW</b> Full Name (Last, First, Middle Initial) Mailing Address 4443 Libby Road NE City Olympia State WA Zip Code 98506 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME WA CN 28 Occupation LEAD ORGANIZER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 294.00			Date of Receipt M M / D D / Y Y Y Y Y 07 / 24 / 2013 <b>Transaction ID : SA11AI.26152</b> Amount of Each Receipt this Period 42.00
<b>C. JOHN TWIFORD</b> Full Name (Last, First, Middle Initial) Mailing Address 4031 Executive Park Drive City Harrisburg State PA Zip Code 17111 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 437.92			Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013 <b>Transaction ID : SA11AI.25932</b> Amount of Each Receipt this Period 62.56
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			123.80
<b>TOTAL</b> 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

FOR LINE NUMBER: PAGE 462 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. KAREN J TYLER</b></p> <p>Mailing Address 15 Milmarson Pl, Nw</p> <p>City Washington State DC Zip Code 20011</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME Occupation ASSISTANT DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>668.01</b></p>			<p>Date of Receipt  <b>07 / 15 / 2013</b>  <b>Transaction ID : SA11AI.24430</b></p> <p>Amount of Each Receipt this Period  <b>51.50</b></p>	
<p>Full Name (Last, First, Middle Initial) <b>B. KAREN J TYLER</b></p> <p>Mailing Address 15 Milmarson Pl, Nw</p> <p>City Washington State DC Zip Code 20011</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME Occupation ASSISTANT DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>719.51</b></p>			<p>Date of Receipt  <b>07 / 31 / 2013</b>  <b>Transaction ID : SA11AI.24431</b></p> <p>Amount of Each Receipt this Period  <b>51.50</b></p>	
<p>Full Name (Last, First, Middle Initial) <b>C. JOSE URIBE</b></p> <p>Mailing Address 1707 Lindig Street Apt. 7</p> <p>City St. Paul State MN Zip Code 55113</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation ORGANIZER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>250.90</b></p>			<p>Date of Receipt  <b>07 / 15 / 2013</b>  <b>Transaction ID : SA11AI.24432</b></p> <p>Amount of Each Receipt this Period  <b>19.30</b></p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><b>122.30</b></p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p></p>	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 463 OF 516  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. JOSE URIBE**Mailing Address 1707 Lindig Street  
Apt. 7

City	State	Zip Code
St. Paul	MN	55113

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

Transaction ID : SA11AI.24433

Amount of Each Receipt this Period

19.30

Full Name (Last, First, Middle Initial)

**B. KAREN VALENTINE**

Mailing Address 702 Ponderosa Road

City	State	Zip Code
Magnolia	DE	19962

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 ▼

612.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2013

Transaction ID : SA11AI.24589

Amount of Each Receipt this Period

65.34

Full Name (Last, First, Middle Initial)

**C. DONALD L. VAUGHAN**

Mailing Address 7614 187th Avenue SW

City	State	Zip Code
Rochester	WA	98579

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

WORKERS COMPENSATION TECH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	10	/	2013

Transaction ID : SA11AI.26153

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

104.64

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 464 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. DONALD L. VAUGHAN</b></p> <p>Mailing Address 7614 187th Avenue SW</p> <p>City State Zip Code Rochester WA 98579</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME WA CN 28 WORKERS COMPENSATION TECH</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 280.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 25 / 2013 <b>Transaction ID : SA11AI.26154</b></p> <p>Amount of Each Receipt this Period 20.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. ALDO E. VENNETTILLI</b></p> <p>Mailing Address 1087 Country Coach Drive</p> <p>City State Zip Code Henderson NV 89002</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L AREA FIELD SERVICES DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1288.56</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24434</b></p> <p>Amount of Each Receipt this Period 93.24</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. ALDO E. VENNETTILLI</b></p> <p>Mailing Address 1087 Country Coach Drive</p> <p>City State Zip Code Henderson NV 89002</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME INT'L AREA FIELD SERVICES DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1381.80</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.24435</b></p> <p>Amount of Each Receipt this Period 93.24</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>206.48</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 465 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. ANTHONY VERNELL</b></p> <p>Mailing Address 14 Meadow Lane</p> <p>City State Zip Code  Athens OH 45701</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME OH LOC 4 REGIONAL DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  470.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 02 / 2013  <b>Transaction ID : SA11AI.25754</b></p> <p>Amount of Each Receipt this Period  30.00</p>		
<p>Full Name (Last, First, Middle Initial)  <b>B. ANTHONY VERNELL</b></p> <p>Mailing Address 14 Meadow Lane</p> <p>City State Zip Code  Athens OH 45701</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME OH LOC 4 REGIONAL DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  500.00</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 19 / 2013  <b>Transaction ID : SA11AI.25755</b></p> <p>Amount of Each Receipt this Period  30.00</p>		
<p>Full Name (Last, First, Middle Initial)  <b>C. SUSAN VOGEL</b></p> <p>Mailing Address 4320 NW Second Avenue</p> <p>City State Zip Code  Des Moines IA 50313</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME IA CN 61/STATE OF IA STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  207.48</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 12 / 2013  <b>Transaction ID : SA11AI.24757</b></p> <p>Amount of Each Receipt this Period  14.82</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>74.82</p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 466 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

## **A. SUSAN VOGEL**

Mailing Address 4320 NW Second Avenue

City State Zip Code  
Des Moines IA 50313

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IA CN 61/STATE OF IA

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.30

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 23 / 2013

Transaction ID : SA11AI.24758

Amount of Each Receipt this Period

14.82

Full Name (Last, First, Middle Initial)

## **B. SUSAN L. WAGONER**

Mailing Address 5434 Briardale Lane  
Apt. E

City State Zip Code  
Dublin OH 43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH CN 8

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.52

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 01 / 2013

Transaction ID : SA11AI.25304

Amount of Each Receipt this Period

74.50

Full Name (Last, First, Middle Initial)

## **C. JUDITH VIOLA WAHLBERG**

Mailing Address 5069 County Road

City State Zip Code  
Mountain Iron MN 55768

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME MN CN 5/ST LOUIS COUNTY

Occupation  
CHILDCARE PROVIDER REP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 23 / 2013

Transaction ID : SA11AI.25102

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

104.32

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 467 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. NAOMI A. WALKER**

Mailing Address 1625 L Street NW

City  
Washington

State Zip Code  
DC 20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1230.06

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24436

Amount of Each Receipt this Period

94.62

Full Name (Last, First, Middle Initial)

**B. NAOMI A. WALKER**

Mailing Address 1625 L Street NW

City  
Washington

State Zip Code  
DC 20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1255.06

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24438

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. NAOMI A. WALKER**

Mailing Address 1625 L Street NW

City  
Washington

State Zip Code  
DC 20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1349.68

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24437

Amount of Each Receipt this Period

94.62

**SUBTOTAL** of Receipts This Page (optional)..... ►

214.24

**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 468 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. TRUDY M. WALKER**

Mailing Address 4814 Meese Road

City

Louisville

State

OH

Zip Code

44641

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/MBR

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

07 / 16 / 2013

Transaction ID : SA11AI.25756

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. KATHLEEN M. WALPOLE**

Mailing Address 139 East Cayuga Street

City

Oswego

State

NY

Zip Code

13126

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 ▼

250.12

Date of Receipt

07 / 03 / 2013

Transaction ID : SA11AI.25236

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

**C. KATHLEEN M. WALPOLE**

Mailing Address 139 East Cayuga Street

City

Oswego

State

NY

Zip Code

13126

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 ▼

269.36

Date of Receipt

07 / 17 / 2013

Transaction ID : SA11AI.25235

Amount of Each Receipt this Period

19.24

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

63.48

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 469 OF 516

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. KATHLEEN M. WALPOLE**

Mailing Address 139 East Cayuga Street

City	State	Zip Code
Oswego	NY	13126

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 ▼

288.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

Transaction ID : SA11AI.25234

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

**B. BARBARA J. WARD**

Mailing Address 13975 State Route 7

City	State	Zip Code
Proctorville	OH	45669-9739

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/FAIRLAND LSD

Occupation

BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2013

Transaction ID : SA11AI.25758

Amount of Each Receipt this Period

20.84

Full Name (Last, First, Middle Initial)

**C. BARBARA J. WARD**

Mailing Address 13975 State Route 7

City	State	Zip Code
Proctorville	OH	45669-9739

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/FAIRLAND LSD

Occupation

BUS DRIVER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2013

Transaction ID : SA11AI.25757

Amount of Each Receipt this Period

20.84

SUBTOTAL of Receipts This Page (optional)..... ►

60.92

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 470 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. JAMES A. WARD</b></p> <p>Mailing Address 5692 Northpointe Parkway</p> <p>City Lorain State OH Zip Code 44053</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 4/LORAIN COUNTY Occupation SOCIAL SERVICE AIDE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 294.00</p>			<p>Date of Receipt  <b>07 / 19 / 2013</b>  <b>Transaction ID : SA11AI.25759</b> </p> <p>Amount of Each Receipt this Period 42.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. DAVID WARRICK</b></p> <p>Mailing Address 2638 Jay Court</p> <p>City Indianapolis State IN Zip Code 46229</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME IN CN 62 Occupation EXECUTIVE DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 860.00</p>			<p>Date of Receipt  <b>07 / 02 / 2013</b>  <b>Transaction ID : SA11AI.24775</b> </p> <p>Amount of Each Receipt this Period 60.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. DAVID WARRICK</b></p> <p>Mailing Address 2638 Jay Court</p> <p>City Indianapolis State IN Zip Code 46229</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME IN CN 62 Occupation EXECUTIVE DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 930.00</p>			<p>Date of Receipt  <b>07 / 31 / 2013</b>  <b>Transaction ID : SA11AI.24776</b> </p> <p>Amount of Each Receipt this Period 70.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			172.00	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 471 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. ANDRE' J. WASHINGTON</b></p> <p>Mailing Address 45 Knollwood Drive</p> <p>City State Zip Code Perrysburg OH 43551</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 340.77</p>			<p>Date of Receipt  <b>07 / 02 / 2013</b>  <b>Transaction ID : SA11AI.25761</b> </p> <p>Amount of Each Receipt this Period 37.37</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. ANDRE' J. WASHINGTON</b></p> <p>Mailing Address 45 Knollwood Drive</p> <p>City State Zip Code Perrysburg OH 43551</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 378.14</p>			<p>Date of Receipt  <b>07 / 19 / 2013</b>  <b>Transaction ID : SA11AI.25760</b> </p> <p>Amount of Each Receipt this Period 37.37</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. TIMOTHY WATSON</b></p> <p>Mailing Address 10723 KILBURN LN</p> <p>City State Zip Code CAMBRIDGE OH 43725</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 11 THERAPUTIC PROGRAM W</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 255.00</p>			<p>Date of Receipt  <b>07 / 02 / 2013</b>  <b>Transaction ID : SA11AI.25577</b> </p> <p>Amount of Each Receipt this Period 34.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			108.74	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 472 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. TIMOTHY WATSON</b></p> <p>Mailing Address 10723 KILBURN LN</p> <p>City State Zip Code  CAMBRIDGE OH 43725</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME OH LOC 11 THERAPUTIC PROGRAM W</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  289.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 30 / 2013</p> <p><b>Transaction ID : SA11AI.25578</b></p> <p>Amount of Each Receipt this Period  34.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. JO ANN WAUGH</b></p> <p>Mailing Address 4031 Executive Park Drive</p> <p>City State Zip Code  Harrisburg PA 17111</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME PA CN 13 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  437.92</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 22 / 2013</p> <p><b>Transaction ID : SA11AI.25933</b></p> <p>Amount of Each Receipt this Period  62.56</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. LONITA M. WAYBRIGHT</b></p> <p>Mailing Address 3929 Whitemarsh Lane</p> <p>City State Zip Code  Edgewater MD 21037</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME INT'L ASSOCIATE DIRECTOR, BENEFITS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  745.94</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013</p> <p><b>Transaction ID : SA11AI.24439</b></p> <p>Amount of Each Receipt this Period  57.38</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>153.94</p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 473 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. LONITA M. WAYBRIGHT</b></p> <p>Mailing Address 3929 Whitemarsh Lane</p> <p>City State Zip Code            Edgewater MD 21037</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation            AFSCME INT'L ASSOCIATE DIRECTOR, BENEFITS</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">803.32</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>            07 / 31 / 2013</p> <p><b>Transaction ID : SA11AI.24440</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">95.86</span></p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. BRENDA S. WEAVER</b></p> <p>Mailing Address 114 West Drive</p> <p>City State Zip Code            Gallipolis OH 45631</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation            AFSCME OH LOC 4/GALLIPOLIS CITY SECRETARY</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">390.12</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>            07 / 02 / 2013</p> <p><b>Transaction ID : SA11AI.25763</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">19.24</span></p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. BRENDA S. WEAVER</b></p> <p>Mailing Address 114 West Drive</p> <p>City State Zip Code            Gallipolis OH 45631</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation            AFSCME OH LOC 4/GALLIPOLIS CITY SECRETARY</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">409.36</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span>            07 / 19 / 2013</p> <p><b>Transaction ID : SA11AI.25764</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">19.24</span></p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p> <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p><span style="border: 1px solid black; padding: 2px;">95.86</span></p> <p><span style="border: 1px solid black; padding: 2px;"></span></p>	

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 474 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. JANA WEAVER**

Mailing Address 451 London Road

City State Zip Code  
Deerfield WI 53531

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WI CN 24

Occupation

ASSISTANT DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.08

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 09 / 2013

Transaction ID : SA11AI.26199

Amount of Each Receipt this Period

73.68

Full Name (Last, First, Middle Initial)

**B. KENNETH E. WEAVER**

Mailing Address 451 London Road

City State Zip Code  
Deerfield WI 53531

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WI CN 24/STATE OF WI

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 12 / 2013

Transaction ID : SA11AI.26200

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. KENNETH E. WEAVER**

Mailing Address 451 London Road

City State Zip Code  
Deerfield WI 53531

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WI CN 24/STATE OF WI

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 26 / 2013

Transaction ID : SA11AI.26201

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

123.68

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 475 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

## **A. BRENDA WEBB**

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 ▼

255.80

Date of Receipt

07 / 22 / 2013

Transaction ID : SA11AI.25934

Amount of Each Receipt this Period

38.54

Full Name (Last, First, Middle Initial)

## **B. BRIAN V. WEEKS**

Mailing Address 1522 A Street NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

834.99

Date of Receipt

07 / 15 / 2013

Transaction ID : SA11AI.24441

Amount of Each Receipt this Period

64.23

Full Name (Last, First, Middle Initial)

## **C. BRIAN V. WEEKS**

Mailing Address 1522 A Street NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

899.22

Date of Receipt

07 / 31 / 2013

Transaction ID : SA11AI.24442

Amount of Each Receipt this Period

64.23

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

167.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 476 OF 516  
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial) <b>A. CINDY L. WEIBLE</b>			Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.25766</b>		
Mailing Address 5849 Rambo Lane			Amount of Each Receipt this Period 19.24		
City Toledo	State OH	Zip Code 43623			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME OH LOC 4/WASHINGTON LS		Occupation CUSTODIAN			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.12			
Full Name (Last, First, Middle Initial) <b>B. CINDY L. WEIBLE</b>			Date of Receipt M M / D D / Y Y Y Y Y 07 / 19 / 2013 <b>Transaction ID : SA11AI.25765</b>		
Mailing Address 5849 Rambo Lane			Amount of Each Receipt this Period 38.48		
City Toledo	State OH	Zip Code 43623			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME OH LOC 4/WASHINGTON LS		Occupation CUSTODIAN			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 288.60			
Full Name (Last, First, Middle Initial) <b>C. JOSEPH W. WEIDNER</b>			Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2013 <b>Transaction ID : SA11AI.25306</b>		
Mailing Address 255 Binns Boulevard			Amount of Each Receipt this Period 64.84		
City Columbus	State OH	Zip Code 43204-2515			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME OH CN 8		Occupation EDITOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 455.68			
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			122.56		
<b>TOTAL</b> This Period (last page this line number only)..... ▶					

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 477 OF 516  
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. CHRISTINE WEINARD**

Mailing Address 175 S WESTMINSTER ST

City	State	Zip Code
Iowa City	IA	52245

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME IA CN 61

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	3

Transaction ID : SA11AI.26233

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. JESSICA WEINSTEIN**Mailing Address 2112 New Hampshire Avenue NW  
Apt #405

City	State	Zip Code
Washington	DC	20009

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1556.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	3

Transaction ID : SA11AI.24443

Amount of Each Receipt this Period

76.55

Full Name (Last, First, Middle Initial)

**C. JESSICA WEINSTEIN**Mailing Address 2112 New Hampshire Avenue NW  
Apt #405

City	State	Zip Code
Washington	DC	20009

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1606.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	3

Transaction ID : SA11AI.24445

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ▶

156.55

TOTAL This Period (last page this line number only)..... ▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 478 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. JESSICA WEINSTEIN**

Mailing Address 2112 New Hampshire Avenue NW  
Apt #405

City State Zip Code  
Washington DC 20009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1682.55

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24444

Amount of Each Receipt this Period

76.55

Full Name (Last, First, Middle Initial)

**B. LINDA K. WELCH**

Mailing Address 1446 E. Gates Street

City State Zip Code  
Columbus OH 43206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

CRIMINAL JUSTICE CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 12 / 2013

Transaction ID : SA11AI.25582

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. LINDA K. WELCH**

Mailing Address 1446 E. Gates Street

City State Zip Code  
Columbus OH 43206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

CRIMINAL JUSTICE CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 26 / 2013

Transaction ID : SA11AI.25581

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

106.55

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 479 OF 516

<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**

<b>A. SUSAN WELDON</b> Full Name (Last, First, Middle Initial) Mailing Address 16 Fairfield Street City Harrisburg State PA Zip Code 17109-4405 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME PA CN 13/NSP/LOCAL 521 Occupation CONTROL ROOM OPERATOR II Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 465.00		Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013 <b>Transaction ID : SA11AI.25935</b> Amount of Each Receipt this Period 60.00
<b>B. CHRISTOPHER RYAN WELLES</b> Full Name (Last, First, Middle Initial) Mailing Address 300 Hardman Avenue South City South St. Paul State MN Zip Code 55075 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME MN CN 5/CN14 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 368.02		Date of Receipt M M / D D / Y Y Y Y Y 07 / 08 / 2013 <b>Transaction ID : SA11AI.25105</b> Amount of Each Receipt this Period 52.72
<b>C. KELLY WELLS</b> Full Name (Last, First, Middle Initial) Mailing Address 4650 Beard Road City Sunbury State OH Zip Code 43074 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME OH LOC 4 Occupation ACCOUNT CLERK Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 255.00		Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.25768</b> Amount of Each Receipt this Period 25.00
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		137.72
<b>TOTAL</b> This Period (last page this line number only)..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 480 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

## **A. KELLY WELLS**

Mailing Address 4650 Beard Road

City State Zip Code  
Sunbury OH 43074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ACCOUNT CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 19 / 2013

Transaction ID : SA11AI.25767

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **B. ROSETTA WELLS**

Mailing Address 5065 Hannan Trace Road

City State Zip Code  
Patriot OH 45658

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

THERAPUTIC PROGRAM TECH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 12 / 2013

Transaction ID : SA11AI.25584

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

## **C. ROSETTA WELLS**

Mailing Address 5065 Hannan Trace Road

City State Zip Code  
Patriot OH 45658

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

THERAPUTIC PROGRAM TECH

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 26 / 2013

Transaction ID : SA11AI.25583

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 481 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. JOHN P. WESTMORELAND</b></p> <p>Mailing Address 4678 West Road</p> <p>City State Zip Code Moose Lake MN 55767</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME MN CN 5/CN14 BUSINESS AGENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 529.48</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 08 / 2013 <b>Transaction ID : SA11AI.25106</b></p> <p>Amount of Each Receipt this Period 76.20</p>	
<p>Full Name (Last, First, Middle Initial) <b>B. James Randal Weston</b></p> <p>Mailing Address 1495 Irvin - Shoots Road</p> <p>City State Zip Code MORRAL OH 43337</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 4 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 710.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.25770</b></p> <p>Amount of Each Receipt this Period 60.00</p>	
<p>Full Name (Last, First, Middle Initial) <b>C. James Randal Weston</b></p> <p>Mailing Address 1495 Irvin - Shoots Road</p> <p>City State Zip Code MORRAL OH 43337</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 4 STAFF REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 770.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 19 / 2013 <b>Transaction ID : SA11AI.25769</b></p> <p>Amount of Each Receipt this Period 60.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>196.20</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 482 OF 516  
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial) <b>A. SANDRA L. WHEELER</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 19 / 2013 <b>Transaction ID : SA11AI.25771</b>	
Mailing Address W Hazel Avenue		Amount of Each Receipt this Period 38.48	
City Lima	State OH	Zip Code 45801	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME OH LOC 4/LIMA CSD	Occupation SECRETARY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 328.60		
Full Name (Last, First, Middle Initial) <b>B. LACHEZ WHITE</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2013 <b>Transaction ID : SA11AI.24831</b>	
Mailing Address 190 W. Ostend Street Suite 101		Amount of Each Receipt this Period 32.50	
City Baltimore	State MD	Zip Code 21230	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MD CN 982	Occupation STAFF REPRESENTATIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 227.50		
Full Name (Last, First, Middle Initial) <b>C. TAMARA V. WHITE</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 15 / 2013 <b>Transaction ID : SA11AI.24446</b>	
Mailing Address 3355 Alden Place NE		Amount of Each Receipt this Period 35.73	
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 464.49		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		106.71	
<b>TOTAL</b> 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

FOR LINE NUMBER:  
(check only one)

PAGE 483 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. TAMARA V. WHITE**

Mailing Address 3355 Alden Place NE

City  
Washington

State Zip Code  
DC 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 ▼

500.22

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24447

Amount of Each Receipt this Period

35.73

Full Name (Last, First, Middle Initial)

**B. DIANE WHITE-HARRIS**

Mailing Address 1142 Wolf Run Drive

City  
Lansing

State Zip Code  
MI 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 ▼

383.11

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2013

Transaction ID : SA11AI.24926

Amount of Each Receipt this Period

29.47

Full Name (Last, First, Middle Initial)

**C. DIANE WHITE-HARRIS**

Mailing Address 1142 Wolf Run Drive

City  
Lansing

State Zip Code  
MI 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 ▼

412.58

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2013

Transaction ID : SA11AI.24925

Amount of Each Receipt this Period

29.47

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

94.67

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

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 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER: PAGE 484 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. 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/STATE OF MN

Occupation

RECORDING SECRETARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 07 / 05 / 2013

Transaction ID : SA11AI.25107

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. 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/STATE OF MN

Occupation

RECORDING SECRETARY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1025.00

Date of Receipt

 M M / D D / Y Y Y Y Y  
 07 / 31 / 2013

Transaction ID : SA11AI.25108

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. ANN E WIDGER**

Mailing Address 433 3rd Street, NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

RETIREE COORDINATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.89

Date of Receipt

 M M / D D / Y Y Y Y Y  
 07 / 15 / 2013

Transaction ID : SA11AI.24448

Amount of Each Receipt this Period

58.17

**SUBTOTAL** of Receipts This Page (optional)..... ►

358.17

**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:  
(check only one)

PAGE 485 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. ANN E WIDGER**

Mailing Address 433 3rd Street, NE

City

Washington

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

RETIREE COORDINATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

809.06

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24449

Amount of Each Receipt this Period

58.17

Full Name (Last, First, Middle Initial)

**B. JEAN M. WIGLE**

Mailing Address P.O. Box 2314

City

Renton

State

WA

Zip Code

98056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/UNIV OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 10 / 2013

Transaction ID : SA11AI.26157

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. JEAN M. WIGLE**

Mailing Address P.O. Box 2314

City

Renton

State

WA

Zip Code

98056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME WA CN 28/UNIV OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 25 / 2013

Transaction ID : SA11AI.26156

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

88.17

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 486 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. JOANN WILK**

Mailing Address 305 W. Grace Street

City

Old Forge

State

PA

Zip Code

18518

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME PA CN 13/STATE OF PA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.25936

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. 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  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

687.83

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24450

Amount of Each Receipt this Period

52.91

Full Name (Last, First, Middle Initial)

**C. 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  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

740.74

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24451

Amount of Each Receipt this Period

52.91

**SUBTOTAL** of Receipts This Page (optional)..... ►

135.82

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 487 OF 516

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. ADRIAN M. WILLIAMS</b></p> <p>Mailing Address 65 Tallulah Avenue</p> <p>City Jacksonville State FL Zip Code 32208</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation ORGANIZER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  218.05</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013  <b>Transaction ID : SA11AI.24452</b></p> <p>Amount of Each Receipt this Period  17.06</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. ADRIAN M. WILLIAMS</b></p> <p>Mailing Address 65 Tallulah Avenue</p> <p>City Jacksonville State FL Zip Code 32208</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation ORGANIZER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  237.55</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013  <b>Transaction ID : SA11AI.24453</b></p> <p>Amount of Each Receipt this Period  19.50</p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. STEVEN WILLIAMS</b></p> <p>Mailing Address 18241 Icicle Road</p> <p>City Sparta State WI Zip Code 54656</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME WI CN 24 Occupation FIELD REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  287.80</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 01 / 2013  <b>Transaction ID : SA11AI.26203</b></p> <p>Amount of Each Receipt this Period  20.00</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			56.56	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 488 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. STEVEN WILLIAMS</b></p> <p>Mailing Address 18241 Icicle Road</p> <p>City State Zip Code  Sparta WI 54656</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME WI CN 24 FIELD REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  341.36</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 09 / 2013  <b>Transaction ID : SA11AI.26202</b></p> <p>Amount of Each Receipt this Period  53.56</p>
<p>Full Name (Last, First, Middle Initial)  <b>B. CHARLES H. WILLIAMSON</b></p> <p>Mailing Address 162 South Street</p> <p>City State Zip Code  Minford OH 45653</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME OH LOC 11/STATE OF OH CORRECTION OFFICER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  350.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 12 / 2013  <b>Transaction ID : SA11AI.25587</b></p> <p>Amount of Each Receipt this Period  25.00</p>
<p>Full Name (Last, First, Middle Initial)  <b>C. CHARLES H. WILLIAMSON</b></p> <p>Mailing Address 162 South Street</p> <p>City State Zip Code  Minford OH 45653</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation  AFSCME OH LOC 11/STATE OF OH CORRECTION OFFICER</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  375.00</p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 26 / 2013  <b>Transaction ID : SA11AI.25586</b></p> <p>Amount of Each Receipt this Period  25.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>103.56</p>
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 489 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. SARAH C. WILSON</b></p> <p>Mailing Address 3609 Apollo Street, SE</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Lacey</td> <td style="width: 33%;">State WA</td> <td style="width: 33%;">Zip Code 98503</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME WA CN 28/STATE OF WA</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">243.50</span></p>			City Lacey	State WA	Zip Code 98503	Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">10</span> / <span style="border: 1px solid black; padding: 2px;">2013</span></p> <p><b>Transaction ID : SA11AI.26160</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">19.50</span></p>		
City Lacey	State WA	Zip Code 98503								
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE									
<p>Full Name (Last, First, Middle Initial)  <b>B. SARAH C. WILSON</b></p> <p>Mailing Address 3609 Apollo Street, SE</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Lacey</td> <td style="width: 33%;">State WA</td> <td style="width: 33%;">Zip Code 98503</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME WA CN 28/STATE OF WA</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">263.00</span></p>			City Lacey	State WA	Zip Code 98503	Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">25</span> / <span style="border: 1px solid black; padding: 2px;">2013</span></p> <p><b>Transaction ID : SA11AI.26159</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">19.50</span></p>		
City Lacey	State WA	Zip Code 98503								
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE									
<p>Full Name (Last, First, Middle Initial)  <b>C. TRACY WILSON</b></p> <p>Mailing Address 1212 Jefferson St., SE Suite 300</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Olympia</td> <td style="width: 33%;">State WA</td> <td style="width: 33%;">Zip Code 98501</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME WA CN 28/STATE OF WA</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">215.00</span></p>			City Olympia	State WA	Zip Code 98501	Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">07</span> / <span style="border: 1px solid black; padding: 2px;">10</span> / <span style="border: 1px solid black; padding: 2px;">2013</span></p> <p><b>Transaction ID : SA11AI.26162</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">17.50</span></p>		
City Olympia	State WA	Zip Code 98501								
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE									
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><span style="border: 1px solid black; padding: 2px;">56.50</span></p>							
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p><span style="border: 1px solid black; padding: 2px;"></span></p>							

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 490 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

## **A. TRACY WILSON**

Mailing Address 1212 Jefferson St., SE  
Suite 300

City Olympia State WA Zip Code 98501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME WA CN 28/STATE OF WA

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.50

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 25 / 2013

Transaction ID : SA11AI.26161

Amount of Each Receipt this Period

17.50

Full Name (Last, First, Middle Initial)

## **B. 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/STATE OF WA

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  
07 / 10 / 2013

Transaction ID : SA11AI.26165

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

## **C. 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/STATE OF WA

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  
07 / 25 / 2013

Transaction ID : SA11AI.26164

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

77.50

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 491 OF 516  
(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**

<b>A. KRISTIE WOLF-MALONEY</b> Full Name (Last, First, Middle Initial) Mailing Address 4923C Haverford Road City Harrisburg State PA Zip Code 17109 FEC ID number of contributing federal political committee. C Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 642.18		Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013 <b>Transaction ID : SA11AI.25937</b> Amount of Each Receipt this Period 91.74
<b>B. TIMOTHY J. WOLFE</b> Full Name (Last, First, Middle Initial) Mailing Address 57 E. Main Street P.O. Box 30 City Newville State PA Zip Code 17241 FEC ID number of contributing federal political committee. C Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 640.00		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2013 <b>Transaction ID : SA11AI.25938</b> Amount of Each Receipt this Period 80.00
<b>C. DIANNE J. WOMACK</b> Full Name (Last, First, Middle Initial) Mailing Address 1310 S. Central Road City Medical Lake State WA Zip Code 99022 FEC ID number of contributing federal political committee. C Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 364.00		Date of Receipt M M / D D / Y Y Y Y Y 07 / 10 / 2013 <b>Transaction ID : SA11AI.26167</b> Amount of Each Receipt this Period 28.00
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		199.74
<b>TOTAL</b> This Period (last page this line number only)..... ▶		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 492 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. DIANNE J. WOMACK</b></p> <p>Mailing Address 1310 S. Central Road</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Medical Lake</td> <td style="width: 33%;">State WA</td> <td style="width: 33%;">Zip Code 99022</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME WA CN 28/STATE OF WA</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">392.00</span></p>			City Medical Lake	State WA	Zip Code 99022	Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt</p> <table style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">M M M 07</td> <td style="width: 33%; text-align: center;">D D D 25</td> <td style="width: 33%; text-align: center;">Y Y Y Y Y Y 2013</td> </tr> </table> <p><b>Transaction ID : SA11AI.26166</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">28.00</span></p>		M M M 07	D D D 25	Y Y Y Y Y Y 2013
City Medical Lake	State WA	Zip Code 99022										
Name of Employer AFSCME WA CN 28/STATE OF WA	Occupation STAFF REPRESENTATIVE											
M M M 07	D D D 25	Y Y Y Y Y Y 2013										
<p>Full Name (Last, First, Middle Initial)  <b>B. ARTHUR WOOD</b></p> <p>Mailing Address 31062 Birchwood</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Westland</td> <td style="width: 33%;">State MI</td> <td style="width: 33%;">Zip Code 48185</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME MI CN 25</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">416.39</span></p>			City Westland	State MI	Zip Code 48185	Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt</p> <table style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">M M M 07</td> <td style="width: 33%; text-align: center;">D D D 02</td> <td style="width: 33%; text-align: center;">Y Y Y Y Y Y 2013</td> </tr> </table> <p><b>Transaction ID : SA11AI.24928</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">32.03</span></p>		M M M 07	D D D 02	Y Y Y Y Y Y 2013
City Westland	State MI	Zip Code 48185										
Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE											
M M M 07	D D D 02	Y Y Y Y Y Y 2013										
<p>Full Name (Last, First, Middle Initial)  <b>C. ARTHUR WOOD</b></p> <p>Mailing Address 31062 Birchwood</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Westland</td> <td style="width: 33%;">State MI</td> <td style="width: 33%;">Zip Code 48185</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME MI CN 25</td> <td style="width: 66%;">Occupation STAFF REPRESENTATIVE</td> </tr> </table> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">448.42</span></p>			City Westland	State MI	Zip Code 48185	Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE	<p>Date of Receipt</p> <table style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">M M M 07</td> <td style="width: 33%; text-align: center;">D D D 16</td> <td style="width: 33%; text-align: center;">Y Y Y Y Y Y 2013</td> </tr> </table> <p><b>Transaction ID : SA11AI.24927</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">32.03</span></p>		M M M 07	D D D 16	Y Y Y Y Y Y 2013
City Westland	State MI	Zip Code 48185										
Name of Employer AFSCME MI CN 25	Occupation STAFF REPRESENTATIVE											
M M M 07	D D D 16	Y Y Y Y Y Y 2013										
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">92.06</span>									
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;"></span>									

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 493 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. SHELBY L. WOODALL</b></p> <p>Mailing Address 1006 Ironwood Circle</p> <p>City Akron State OH Zip Code 44312</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH CN 8 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ <b>419.24</b></p>			<p>Date of Receipt  <b>07 / 01 / 2013</b>  <b>Transaction ID : SA11AI.25307</b> </p> <p>Amount of Each Receipt this Period  <b>59.72</b> </p>		
<p>Full Name (Last, First, Middle Initial) <b>B. A DUFF WOODSIDE</b></p> <p>Mailing Address 5051 Sandman Drive Apt. 86</p> <p>City Taylor Mill State KY Zip Code 41015</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CUSTOMER SERVICE REP</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ <b>327.04</b></p>			<p>Date of Receipt  <b>07 / 12 / 2013</b>  <b>Transaction ID : SA11AI.25591</b> </p> <p>Amount of Each Receipt this Period  <b>23.36</b> </p>		
<p>Full Name (Last, First, Middle Initial) <b>C. A DUFF WOODSIDE</b></p> <p>Mailing Address 5051 Sandman Drive Apt. 86</p> <p>City Taylor Mill State KY Zip Code 41015</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 11/STATE OF OH Occupation CUSTOMER SERVICE REP</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ <b>350.40</b></p>			<p>Date of Receipt  <b>07 / 26 / 2013</b>  <b>Transaction ID : SA11AI.25592</b> </p> <p>Amount of Each Receipt this Period  <b>23.36</b> </p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><b>106.44</b></p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 494 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. PAMELA WOOLUM</b></p> <p>Mailing Address 2068 Entrada Drive</p> <p>City State Zip Code Beavercreek OH 45431</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.25773</b></p> <p>Amount of Each Receipt this Period 10.00</p>		
<p>Full Name (Last, First, Middle Initial) <b>B. PAMELA WOOLUM</b></p> <p>Mailing Address 2068 Entrada Drive</p> <p>City State Zip Code Beavercreek OH 45431</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME OH LOC 4 FIELD REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 230.00</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 19 / 2013 <b>Transaction ID : SA11AI.25772</b></p> <p>Amount of Each Receipt this Period 10.00</p>		
<p>Full Name (Last, First, Middle Initial) <b>C. PETER WRIGHT</b></p> <p>Mailing Address 28 Washington Street</p> <p>City State Zip Code Marblehead MA 01945-0000</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation AFSCME MA CN 93 DIRECTOR POLITICAL ACTION &amp; LEGIS.</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 518.98</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y 07 / 02 / 2013 <b>Transaction ID : SA11AI.24793</b></p> <p>Amount of Each Receipt this Period 74.14</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p>94.14</p>		
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>					

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 495 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial)  <b>A. SHERRY L. WRIGHT</b></p> <p>Mailing Address 1229 Jasmine Drive</p> <p>City Madison State WI Zip Code 53719</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation ORGANIZING COORDINATOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  556.92</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 15 / 2013  <b>Transaction ID : SA11AI.24454</b></p> <p>Amount of Each Receipt this Period  42.84</p>	
<p>Full Name (Last, First, Middle Initial)  <b>B. SHERRY L. WRIGHT</b></p> <p>Mailing Address 1229 Jasmine Drive</p> <p>City Madison State WI Zip Code 53719</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation ORGANIZING COORDINATOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  599.76</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 31 / 2013  <b>Transaction ID : SA11AI.24455</b></p> <p>Amount of Each Receipt this Period  42.84</p>	
<p>Full Name (Last, First, Middle Initial)  <b>C. STELLA WYMER</b></p> <p>Mailing Address 7130 Yawberg Road</p> <p>City Whitehouse State OH Zip Code 43571</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 4/SYLVANIA Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  250.12</p>			<p>Date of Receipt  M M / D D / Y Y Y Y Y  07 / 02 / 2013  <b>Transaction ID : SA11AI.25775</b></p> <p>Amount of Each Receipt this Period  19.24</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			104.92	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>				

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 496 OF 516  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

## **A. STELLA WYMER**

Mailing Address 7130 Yawberg Road

City State Zip Code  
Whitehouse OH 43571

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME OH LOC 4/SYLVANIA

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  
07 / 19 / 2013

Transaction ID : SA11AI.25774

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

## **B. JEANETTE WYNN**

Mailing Address 3064 Highland Oak Terrace

City State Zip Code  
Tallahassee FL 32301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME FL CN 79

Occupation  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

626.92

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 08 / 2013

Transaction ID : SA11AI.24590

Amount of Each Receipt this Period

77.56

Full Name (Last, First, Middle Initial)

## **C. JEANETTE WYNN**

Mailing Address 3064 Highland Oak Terrace

City State Zip Code  
Tallahassee FL 32301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME FL CN 79

Occupation  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.92

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : SA11AI.24591

Amount of Each Receipt this Period

14.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

110.80



**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 497 OF 516  
(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**

<b>A. WAYNE J. YAMASAKI</b> Full Name (Last, First, Middle Initial) Mailing Address 1185 Kaeleku Street City Honolulu State HI Zip Code 96825-3007 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME HI LOC 152 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00			Date of Receipt M M / D D / Y Y Y Y Y 07 / 10 / 2013 <b>Transaction ID : SA11AI.24637</b> Amount of Each Receipt this Period 50.00
<b>B. GERALD A. YORK</b> Full Name (Last, First, Middle Initial) Mailing Address 126 Ashton Road City Potsdam State NY Zip Code 13676 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME NY LOC 1000/ST.LAWRENCE Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 236.69			Date of Receipt M M / D D / Y Y Y Y Y 07 / 10 / 2013 <b>Transaction ID : SA11AI.25237</b> Amount of Each Receipt this Period 19.24
<b>C. GERALD A. YORK</b> Full Name (Last, First, Middle Initial) Mailing Address 126 Ashton Road City Potsdam State NY Zip Code 13676 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AFSCME NY LOC 1000/ST.LAWRENCE Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 255.93			Date of Receipt M M / D D / Y Y Y Y Y 07 / 23 / 2013 <b>Transaction ID : SA11AI.25238</b> Amount of Each Receipt this Period 19.24
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			88.48
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 498 OF 516

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

A. SARAH ZARUBA

Mailing Address 500 E. 17 Street S.  
#8

City State Zip Code  
Newton IA 50208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IA CN 61/STATE OF IA

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.22

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 12 / 2013

Transaction ID : SA11AI.24762

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

B. SARAH ZARUBA

Mailing Address 500 E. 17 Street S.  
#8

City State Zip Code  
Newton IA 50208

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME IA CN 61/STATE OF IA

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.45

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 23 / 2013

Transaction ID : SA11AI.24763

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

C. DON ZAVODNY

Mailing Address 9801 West O Street

City State Zip Code  
Lincoln NE 68528

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.06

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 15 / 2013

Transaction ID : SA11AI.24456

Amount of Each Receipt this Period

46.62

SUBTOTAL of Receipts This Page (optional)..... ►

85.08

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 499 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

<p>Full Name (Last, First, Middle Initial) <b>A. DON ZAVODNY</b></p> <p>Mailing Address 9801 West O Street</p> <p>City Lincoln State NE Zip Code 68528</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES DIRECTOR</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 652.68</p>		<p>Date of Receipt            M M / D D / Y Y Y Y Y            07 / 31 / 2013  <b>Transaction ID : SA11AI.24457</b> </p> <p>Amount of Each Receipt this Period 46.62</p>
<p>Full Name (Last, First, Middle Initial) <b>B. THOMAS ZEBAR</b></p> <p>Mailing Address 390 Worthington Road</p> <p>City Westerville State OH Zip Code 43082</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 11 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 465.30</p>		<p>Date of Receipt            M M / D D / Y Y Y Y Y            07 / 02 / 2013  <b>Transaction ID : SA11AI.25593</b> </p> <p>Amount of Each Receipt this Period 62.04</p>
<p>Full Name (Last, First, Middle Initial) <b>C. THOMAS ZEBAR</b></p> <p>Mailing Address 390 Worthington Road</p> <p>City Westerville State OH Zip Code 43082</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer AFSCME OH LOC 11 Occupation STAFF REPRESENTATIVE</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ 527.34</p>		<p>Date of Receipt            M M / D D / Y Y Y Y Y            07 / 30 / 2013  <b>Transaction ID : SA11AI.25594</b> </p> <p>Amount of Each Receipt this Period 62.04</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		170.70
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 500 OF 516

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. JANE ZIMMER**

Mailing Address 1212 Jefferson Street SE

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee.

C

Name of Employer  
AFSCME WA CN 28/STATE OF WA

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.50

Date of Receipt

07 / 10 / 2013

Transaction ID : SA11AI.26169

Amount of Each Receipt this Period

22.50

Full Name (Last, First, Middle Initial)

**B. JANE ZIMMER**

Mailing Address 1212 Jefferson Street SE

City Olympia State WA Zip Code 98501

FEC ID number of contributing federal political committee.

C

Name of Employer  
AFSCME WA CN 28/STATE OF WA

Occupation  
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

07 / 25 / 2013

Transaction ID : SA11AI.26168

Amount of Each Receipt this Period

22.50

Full Name (Last, First, Middle Initial)

**C. MATTHEW D. ZUVICH**

Mailing Address 720 Mox-Chehalis Road

City McCleary State WA Zip Code 98557

FEC ID number of contributing federal political committee.

C

Name of Employer  
AFSCME WA CN 28

Occupation  
LOBBYIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

07 / 24 / 2013

Transaction ID : SA11AI.26171

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

70.00

66197.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 501 OF 516  
(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**

Full Name (Last, First, Middle Initial)

**A. AMALGAMATED BANK**

Mailing Address 275 7th Avenue

City  
New YorkState Zip Code  
NY 10001FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2436.25

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	31	/	2013

Transaction ID : SA17.25680

Amount of Each Receipt this Period

425.07

Interest Income 7/31/2013

Full Name (Last, First, Middle Initial)

**B. JAMES CENERINI**

Mailing Address 1179 Charles Street

City  
North ProvidenceState Zip Code  
RI 02904-3594FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AFSCME RI CN 94Occupation  
POLITICAL COORDINATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	08	/	2013

Transaction ID : SA17.25955

Amount of Each Receipt this Period

20.00

Interest Income 7/31/2013

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

445.07

**TOTAL** This Period (last page this line number only)..... ►

445.07

**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 502 OF 516

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. AMALGAMATED BANK**

Mailing Address 275 7th Avenue

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement  
Bank Fee

Candidate Name

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		17		2013

**Transaction ID : SB21B.26240**

Amount of Each Disbursement this Period

5.00
------

Full Name (Last, First, Middle Initial)

**B. AMALGAMATED BANK LOANS**

Mailing Address P.O. Box 5660

City	State	Zip Code
Hicksville	NY	11802-5660

Purpose of Disbursement  
Interest payment 6/30/2013

Candidate Name

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2013

**Transaction ID : SB21B.24034**

Amount of Each Disbursement this Period

8641.50
---------

Full Name (Last, First, Middle Initial)

**C. AMALGAMATED BANK LOANS**

Mailing Address P.O. Box 5660

City	State	Zip Code
Hicksville	NY	11802-5660

Purpose of Disbursement  
Interest payment 7/31/2013

Candidate Name

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2013

**Transaction ID : SB21B.25673**

Amount of Each Disbursement this Period

7543.95
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

16190.45
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<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

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

### A. AMERICAN EXPRESS

Date of Disbursement

Transaction ID : SB21B.24031

00:

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

3.50

## B. AMERICAN EXPRESS

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.24032

00

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

Country	Percentage
USA	100%
Israel	95%
Spain	90%
France	85%
Germany	80%
UK	75%
Canada	70%
Italy	65%
Japan	60%
South Korea	55%
Australia	50%
Brazil	45%
India	40%
Russia	35%
China	30%
Mexico	25%
Argentina	20%
Netherlands	15%
Sweden	10%
Denmark	5%
Norway	0%

### C. AMERICAN EXPRESS

Date of Disbursement

Transaction ID : SB21B.24033

00-

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

0.88

Age Group	Percentage
18-24	18.83
25-34	15.21
35-44	12.45
45-54	10.78
55-64	9.32
65-74	8.15
75-84	7.01
85+	6.25

<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

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

### A. BART GROUP

Three digital displays are shown side-by-side, separated by slashes. The first display shows '07' with two small squares above it. The second display shows '05' with two small squares above it. The third display shows '2013' with four small squares above it.

001

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

District:

62.84

## B. BART GROUP

07 / 05 / 2013

001

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

District:

50.55

### C. FIS MERCHANT SERVICES-LL

Three digital displays are shown side-by-side, separated by slashes. The first display shows '07' with two small squares above the '0'. The second display shows '11' with two small squares above the first '1'. The third display shows '2013' with four small squares above the '2', '0', '1', and '3' respectively.

001

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

District:

266.62

380.01



**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 505 OF 516

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. PAYPAL INC.**

Mailing Address 2211 North First Street

City	State	Zip Code
San Jose	CA	95131

Purpose of Disbursement  
Online Service Charges

Candidate Name

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		05		2013

**Transaction ID : SB21B.24027**

Amount of Each Disbursement this Period

139.85
--------

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

139.85
--------

16729.14
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**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 506 OF 516

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. AFSCME PEOPLE-Non Federal Account**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		02		2013

Mailing Address 1625 L Street NW

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement  
Trf non-fed acct to non-fed activity

008

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID : SB22.25668**

Amount of Each Disbursement this Period

60000.00

Full Name (Last, First, Middle Initial)

**B. AFSCME PEOPLE-Non Federal Account**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		12		2013

Mailing Address 1625 L Street NW

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement  
Trf non-fed acct to non-fed activity

008

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID : SB22.25669**

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

**C. AFSCME PEOPLE-Non Federal Account**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		18		2013

Mailing Address 1625 L Street NW

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement  
Trf non-fed acct to non-fed activity

008

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID : SB22.25671**

Amount of Each Disbursement this Period

39000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

114000.00

**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 507 OF 516

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. AFSCME PEOPLE-Non Federal Account**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2013

Mailing Address 1625 L Street NW

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement  
Trf non-fed acct to non-fed activity

008

Candidate Name

Category/  
Type**Transaction ID : SB22.25670**

Amount of Each Disbursement this Period

5000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Amount of Each Disbursement this Period

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Amount of Each Disbursement this Period

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00

119000.00

	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

### A. AMERICA'S LEADERSHIP PAC

Date of Disbursement

Transaction ID : SB23.24008

011

Category/  
Type

Disbursement For: 2013

☐ Primary ☐ General

☒ Other (specify) ▼

PAC

Amount of Each Disbursement this Period

2500.00

## B. AMERICA'S LEADERSHIP PAC

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB23.24009

011

Category/  
Type

Disbursement For: 2013  
☐ Primary ☐ General  
☒ Other (specify) ▼ PAC

Amount of Each Disbursement this Period

-2500.00

### C. APPEL FOR IOWA INC

Date of Disbursement

Transaction ID : SB23.24023

011

Category/  
Type

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

5000.00

5000.00

**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 509 OF 516

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. BOB BRADY FOR CONGRESS**

Mailing Address P.O. Box 22471

City	State	Zip Code
Philadelphia	PA	19110-2471

Purpose of Disbursement  
Contribution

Candidate Name

**ROBERT A BRADY**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		10		2013

**Transaction ID : SB23.24002**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. BOB BRADY FOR CONGRESS**

Mailing Address P.O. Box 22471

City	State	Zip Code
Philadelphia	PA	19110-2471

Purpose of Disbursement  
Contribution

Candidate Name

**ROBERT A BRADY**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		10		2013

**Transaction ID : SB23.24005**

Amount of Each Disbursement this Period

-1000.00
----------

Full Name (Last, First, Middle Initial)

**C. COMMITTEE TO ELECT MARTHA ROBERTSON**

Mailing Address PO Box 54

City	State	Zip Code
Dryden	NY	13053

Purpose of Disbursement  
Contribution

Candidate Name

**MARTHA ROBERTSON**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2013

**Transaction ID : SB23.24019**

Amount of Each Disbursement this Period

2000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00
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**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 510 OF 516

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE**

Mailing Address 120 Maryland Avenue NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2013

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		30		2013

**Transaction ID : SB23.24013**

Amount of Each Disbursement this Period

15000.00
----------

Full Name (Last, First, Middle Initial)

**B. DOGGETT FOR U.S. CONGRESS**

Mailing Address P.O. Box 5843

City	State	Zip Code
Austin	TX	78763

Purpose of Disbursement  
Contribution

Candidate Name

**LLOYD DOGGETT**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: TX District: 35

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		08		2013

**Transaction ID : SB23.24000**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. DOGGETT FOR U.S. CONGRESS**

Mailing Address P.O. Box 5843

City	State	Zip Code
Austin	TX	78763

Purpose of Disbursement  
Contribution

Candidate Name

**LLOYD DOGGETT**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: TX District: 35

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		08		2013

**Transaction ID : SB23.24001**

Amount of Each Disbursement this Period

-1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15000.00
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**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 511 OF 516

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. GUTIERREZ FOR CONGRESS**

Mailing Address 2846 N. River Walk Drive

City	State	Zip Code
Chicago	IL	60618

Purpose of Disbursement  
Contribution

011

Candidate Name

**LUIS V GUTIERREZ**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		10		2013

**Transaction ID : SB23.23998**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. GUTIERREZ FOR CONGRESS**

Mailing Address 2846 N. River Walk Drive

City	State	Zip Code
Chicago	IL	60618

Purpose of Disbursement  
Contribution

011

Candidate Name

**LUIS V GUTIERREZ**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		10		2013

**Transaction ID : SB23.24004**

Amount of Each Disbursement this Period

-2500.00
----------

Full Name (Last, First, Middle Initial)

**C. MATHESON FOR CONGRESS**

Mailing Address P.O. Box 521048

City	State	Zip Code
Salt Lake City	UT	84152

Purpose of Disbursement  
Contribution

011

Candidate Name

**JAMES DAVID MATHESON**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: UT District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		10		2013

**Transaction ID : SB23.24003**

Amount of Each Disbursement this Period

2500.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2500.00
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**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 512 OF 516

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. MATHESON FOR CONGRESS**

Mailing Address P.O. Box 521048

City	State	Zip Code
Salt Lake City	UT	84152

Purpose of Disbursement  
Contribution

Candidate Name

**JAMES DAVID MATHESON**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: UT District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		10		2013

**Transaction ID : SB23.24010**

Amount of Each Disbursement this Period

-2500.00
----------

Full Name (Last, First, Middle Initial)

**B. MIKE HONDA FOR CONGRESS**Mailing Address 123 E San Carlos Street  
Suite 531

City	State	Zip Code
San Jose	CA	95112

Purpose of Disbursement  
Contribution

Candidate Name

**MIKE HONDA**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 17

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2013

**Transaction ID : SB23.24006**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**C. PAUL TONKO FOR CONGRESS**Mailing Address 911 Central Avenue  
#221

City	State	Zip Code
Albany	NY	12206

Purpose of Disbursement  
Contribution

Candidate Name

**PAUL DAVID TONKO**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 20

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		02		2013

**Transaction ID : SB23.23996**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00
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	21b		22	<b>X</b>	23		24		25		26
	27		28a		28b		28c		29		30b

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

Category/  
Type

07 / 15 / 2013

Category/  
TypeCategory/  
Type

Age Group	Percentage
18-24	10
25-34	15
35-44	20
45-54	25
55-64	30
65-74	35
75-84	40
85+	45

3500.00

Diagram illustrating a fire alarm control panel (FACP) installed in a building. The panel is located on the second floor, indicated by the '2' on the wall. The panel displays the number '3500.00' and has several indicator lights (red and green) and a speaker.

**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 514 OF 516

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. THE REED COMMITTEE**

Mailing Address P.O. Box 8628

City	State	Zip Code
Cranston	RI	02920

Purpose of Disbursement  
Contribution

011

Candidate Name

**JACK REED**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: RI District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2013

**Transaction ID : SB23.24015**

Amount of Each Disbursement this Period

3750.00
---------

Full Name (Last, First, Middle Initial)

**B. UDALL FOR US ALL**

Mailing Address P.O. Box 25766

City	State	Zip Code
Albuquerque	NM	87125

Purpose of Disbursement  
Contribution

011

Candidate Name

**TOM UDALL**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NM District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	30	/	2013

**Transaction ID : SB23.24017**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. WHITEHOUSE FOR SENATE**

Mailing Address P.O. Box 40280

City	State	Zip Code
Providence	RI	02940

Purpose of Disbursement  
Contribution

011

Candidate Name

**SHELDON II WHITEHOUSE**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: RI District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	30	/	2013

**Transaction ID : SB23.24016**

Amount of Each Disbursement this Period

500.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9250.00
---------

37250.00
----------

**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 515 OF 516

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input checked="" type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E**

Full Name (Last, First, Middle Initial)

**A. AMALGAMATED BANK**

Mailing Address 275 7th Avenue

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement  
Loan payment/6-30-13

Candidate Name

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2013

**Transaction ID : SB26.24039**

Amount of Each Disbursement this Period

231454.57
-----------

Full Name (Last, First, Middle Initial)

**B. AMALGAMATED BANK**

Mailing Address 275 7th Avenue

City	State	Zip Code
New York	NY	10001

Purpose of Disbursement  
Loan payment/7-31-13

Candidate Name

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2013

**Transaction ID : SB26.25679**

Amount of Each Disbursement this Period

232552.12
-----------

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

464006.69
464006.69

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 516 OF 516

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.16856

**AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E****LOAN SOURCE** Full Name (Last, First, Middle Initial)

AMALGAMATED BANK

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 275 7th Avenue

City New York

State NY

ZIP Code 10001

Original Amount of Loan

3500000.00

Cumulative Payment To Date

1610211.61

Balance Outstanding at Close of This Period

1889788.39

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 28 / 2012

Date Due

M M / D D / Y Y Y Y

03/31/2014

Interest Rate

4.25

% (apr)

Secured:

☒ Yes☐ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1889788.39

**TOTALS** This Period (last page in this line only)..... ►

1889788.39

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.