

**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

PRE-Election

Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

in the State of

M M M / D D D / Y Y Y Y Y Y

(d) 30-Day

POST-Election

Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

M M M / D D D / Y Y Y Y Y Y

in the State of

M M M / D D D / Y Y Y Y Y Y

5. Covering Period

M M M / D D D / Y Y Y Y Y Y

04

D D D / Y Y Y Y Y Y

01

Y Y Y Y Y Y

2012

through

M M M / D D D / Y Y Y Y Y Y

04

D D D / Y Y Y Y Y Y

30

Y Y Y Y Y Y

2012

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

Type or Print Name of Treasurer LEE A. SAUNDERS

Signature of Treasurer

LEE A. SAUNDERS

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y

05

D D D / Y Y Y Y Y Y

17

Y Y Y Y Y Y

2012

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
04 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|--|--|
| 6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2012 | | 5966055.18 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 7019204.74 | |
| (c) Total Receipts (from Line 19) | 717673.36 | 2721009.89 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 7736878.10 | 8687065.07 |
| 7. Total Disbursements (from Line 31) | 234507.92 | 1184694.89 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 7502370.18 | 7502370.18 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 6552.70 | |



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

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

Report Covering the Period:

From:

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 01 | / | 2012 |

To:

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 30 | / | 2012 |

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).....

48292.67

100338.58

(ii) Unitemized

637830.84

2435496.70

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

686123.51

2535835.28

(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)

686123.51

2535835.28

12. Transfers From Affiliated/Other

Party Committees.....

29742.91

178536.35

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

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

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

1806.94

6638.26

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))..... ▶

717673.36

2721009.89

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

717673.36

2721009.89

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 | 460.68 | 16172.65 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 460.68 | 16172.65 |
| 22. Transfers to Affiliated/Other Party Committees..... | 128518.56 | 664018.56 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 105500.00 | 499750.00 |
| 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..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 28.68 | 4753.68 |
| (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))..... | 28.68 | 4753.68 |
| 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)) .. | 234507.92 | 1184694.89 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 234507.92 | 1184694.89 |

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) | 686123.51 | 2535835.28 |
| 34. Total Contribution Refunds (from Line 28(d)) | 28.68 | 4753.68 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 686094.83 | 2531081.60 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ► | 460.68 | 16172.65 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) ► | 460.68 | 16172.65 |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER: PAGE 6 OF 316
 (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. JEFFREY S. ABBE

Mailing Address P.O. Box 486

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Harold | KY | 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 ▼

433.51

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 13 | / | 2012 |

Transaction ID : SA11AI.245766

Amount of Each Receipt this Period

61.93

Full Name (Last, First, Middle Initial)

B. JEFFREY S. ABBE

Mailing Address P.O. Box 486

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Harold | KY | 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 ▼

495.44

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 30 | / | 2012 |

Transaction ID : SA11AI.245967

Amount of Each Receipt this Period

61.93

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 ▼

336.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 18 | / | 2012 |

Transaction ID : SA11AI.249462

Amount of Each Receipt this Period

42.00

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

165.86

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

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

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

FOR LINE NUMBER: PAGE 7 OF 316

(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) A. RICHARD ABELSON</p> <p>Mailing Address 4315 N. Lake Drive</p> <p>City State Zip Code Shorewood WI 53211</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME WI CN 48 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 ▼ 350.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246168</p> <p>Amount of Each Receipt this Period 14.00</p> | | |
| <p>Full Name (Last, First, Middle Initial) B. TRACEY ABMAN</p> <p>Mailing Address 3136 N. Seminary Avenue</p> <p>City State Zip Code Chicago IL 60657-3309</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IL CN 31 DIRECTOR OF ORGANIZER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 263.16</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247676</p> <p>Amount of Each Receipt this Period 87.72</p> | | |
| <p>Full Name (Last, First, Middle Initial) C. CANDACE M. ACORD</p> <p>Mailing Address 9 Appollo Place</p> <p>City State Zip Code Iowa City IA 52240</p> <p>FEC ID number of contributing federal political committee. C</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 04 / 24 / 2012 Transaction ID : SA11AI.249581</p> <p>Amount of Each Receipt this Period 25.00</p> | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>126.72</p> | | |
| <p>TOTAL 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 8 OF 316

(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

Full Name (Last, First, Middle Initial)

A. ADAM ACOSTA

Mailing Address 66 La Perla

City State Zip Code
 Foothill Ranch CA 92610

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME CA CN 36

Occupation

POLITICAL ACTION REPRESENTATIVE III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.28

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 13 / 2012

Transaction ID : SA11AI.249530

Amount of Each Receipt this Period

67.32

Full Name (Last, First, Middle Initial)

B. CATHYRN ACTON

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 ▼

233.28

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 05 / 2012

Transaction ID : SA11AI.247644

Amount of Each Receipt this Period

58.32

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/STATE OF OH

Occupation

PLUMBER II

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
 04 / 06 / 2012

Transaction ID : SA11AI.244969

Amount of Each Receipt this Period

40.00

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

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

165.64

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 316
 (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 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/STATE OF OH

Occupation

PLUMBER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 20 | / | 2012 |

Transaction ID : SA11AI.245354

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. MUSILIU ADE ALAGBALA
Mailing Address 5701 N. Sheridan
#10A

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Chicago | IL | 60660 |

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME IL CN 31

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.28

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 02 | / | 2012 |

Transaction ID : SA11AI.247677

Amount of Each Receipt this Period

69.76

Full Name (Last, First, Middle Initial)

C. JOAN ALBAUGH

Mailing Address 66490 Wintergreen Road

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Lore City | OH | 43755 |

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 4/GUERNSEY CNTY

Occupation

CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.82

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 02 | / | 2012 |

Transaction ID : SA11AI.246739

Amount of Each Receipt this Period

80.00

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

189.76

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 10 OF 316

(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

Full Name (Last, First, Middle Initial)

A. JOAN ALBAUGH

Mailing Address 66490 Wintergreen Road

City State Zip Code
 Lore City OH 43755

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/GUERNSEY CNTY

Occupation

CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.76

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 12 / 2012

Transaction ID : SA11AI.246495

Amount of Each Receipt this Period

76.94

Full Name (Last, First, Middle Initial)

B. JOAN ALBAUGH

Mailing Address 66490 Wintergreen Road

City State Zip Code
 Lore City OH 43755

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/GUERNSEY CNTY

Occupation

CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.70

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11AI.246657

Amount of Each Receipt this Period

76.94

Full Name (Last, First, Middle Initial)

C. DIANN ALBRIGHT

Mailing Address 2405 South Fourth Sreet

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 ▼

275.76

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 10 / 2012

Transaction ID : SA11AI.246896

Amount of Each Receipt this Period

68.94

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

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

222.82

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

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

FOR LINE NUMBER: PAGE 11 OF 316
(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) A. SHANA ALDERTON</p> <p>Mailing Address 710 Chippewa Square</p> <p>City Marquette State MI Zip Code 48955</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 253.47</p> | | | <p>Date of Receipt 04 / 03 / 2012 Transaction ID : SA11AI.247487</p> <p>Amount of Each Receipt this Period 36.21</p> | |
| <p>Full Name (Last, First, Middle Initial) B. SHANA ALDERTON</p> <p>Mailing Address 710 Chippewa Square</p> <p>City Marquette State MI Zip Code 48955</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 289.68</p> | | | <p>Date of Receipt 04 / 17 / 2012 Transaction ID : SA11AI.247537</p> <p>Amount of Each Receipt this Period 36.21</p> | |
| <p>Full Name (Last, First, Middle Initial) C. SHARON J. ALEXANDER</p> <p>Mailing Address 12510 Chalford Lane</p> <p>City Bowie State MD Zip Code 20715</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 273.35</p> | | | <p>Date of Receipt 04 / 13 / 2012 Transaction ID : SA11AI.245767</p> <p>Amount of Each Receipt this Period 39.05</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>111.47</p> | |
| <p>TOTAL 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 12 OF 316

(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

| | | | |
|---|--|--|---|
| A. SHARON J. ALEXANDER Full Name (Last, First, Middle Initial) Mailing Address 12510 Chalford Lane City Bowie State MD Zip Code 20715 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation EXECUTIVE OFFICE ASSISTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 312.40 | | | Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.245968 Amount of Each Receipt this Period 39.05 |
| B. KENNETH L. ALLEN Full Name (Last, First, Middle Initial) Mailing Address 7935 SW Santolina Place City Beaverton State OR Zip Code 97008-6272 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OR CN 75 Occupation EXECUTIVE DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 443.00 | | | Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246169 Amount of Each Receipt this Period 14.00 |
| C. KENNETH L. ALLEN Full Name (Last, First, Middle Initial) Mailing Address 7935 SW Santolina Place City Beaverton State OR Zip Code 97008-6272 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OR CN 75 Occupation EXECUTIVE DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 572.00 | | | Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.249565 Amount of Each Receipt this Period 129.00 |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | | 182.05 |
| TOTAL This Period (last page this line number 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 316
(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) A. BARBARA ANDERSON</p> <p>Mailing Address 4301 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. C</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 ▼ 228.00</p> | | | City Harrisburg | State PA | Zip Code 17111 | Name of Employer AFSCME PA CN 13 | Occupation STAFF REPRESENTATIVE | <p>Date of Receipt 04 / 10 / 2012 Transaction ID : SA11AI.246897</p> <p>Amount of Each Receipt this Period 57.00</p> | |
| City Harrisburg | State PA | Zip Code 17111 | | | | | | | |
| Name of Employer AFSCME PA CN 13 | Occupation STAFF REPRESENTATIVE | | | | | | | | |
| <p>Full Name (Last, First, Middle Initial) B. CAROL A ANDERSON</p> <p>Mailing Address 303 Dias Drive</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Fort Washington</td> <td style="width: 33%;">State MD</td> <td style="width: 33%;">Zip Code 20744</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME INT'L</td> <td style="width: 66%;">Occupation ASSOCIATE DIRECTOR, EDUCATION</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 ▼ 367.50</p> | | | City Fort Washington | State MD | Zip Code 20744 | Name of Employer AFSCME INT'L | Occupation ASSOCIATE DIRECTOR, EDUCATION | <p>Date of Receipt 04 / 13 / 2012 Transaction ID : SA11AI.245769</p> <p>Amount of Each Receipt this Period 52.50</p> | |
| City Fort Washington | State MD | Zip Code 20744 | | | | | | | |
| Name of Employer AFSCME INT'L | Occupation ASSOCIATE DIRECTOR, EDUCATION | | | | | | | | |
| <p>Full Name (Last, First, Middle Initial) C. CAROL A ANDERSON</p> <p>Mailing Address 303 Dias Drive</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Fort Washington</td> <td style="width: 33%;">State MD</td> <td style="width: 33%;">Zip Code 20744</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME INT'L</td> <td style="width: 66%;">Occupation ASSOCIATE DIRECTOR, EDUCATION</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 ▼ 420.00</p> | | | City Fort Washington | State MD | Zip Code 20744 | Name of Employer AFSCME INT'L | Occupation ASSOCIATE DIRECTOR, EDUCATION | <p>Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.245970</p> <p>Amount of Each Receipt this Period 52.50</p> | |
| City Fort Washington | State MD | Zip Code 20744 | | | | | | | |
| Name of Employer AFSCME INT'L | Occupation ASSOCIATE DIRECTOR, EDUCATION | | | | | | | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> <p>TOTAL This Period (last page this line number only)..... ▶</p> | | | <p>162.00</p> <p></p> | | | | | | |

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

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

73.16

114.54

316.05

45.15

232.85

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 316
 (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. MICHAEL L. ARTZ

Mailing Address 745 Irving Street NW

 City
 Washington

 State
 DC

 Zip Code
 20010

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE GENERAL COUNSEL I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.20

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 30 | / | 2012 |

Transaction ID : SA11AI.245972

Amount of Each Receipt this Period

45.15

Full Name (Last, First, Middle Initial)

B. LAURA M. ASKELIN

Mailing Address 1031 4th Avenue S.E.

 City
 Rochester

 State
 MN

 Zip Code
 55904

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.53

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 10 | / | 2012 |

Transaction ID : SA11AI.247886

Amount of Each Receipt this Period

54.44

Full Name (Last, First, Middle Initial)

C. RICHARD C. BADGER II

Mailing Address P.O. Box 2825

 City
 Appleton

 State
 WI

 Zip Code
 54912

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

AFSCME WI CN 40

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 03 | / | 2012 |

Transaction ID : SA11AI.249511

Amount of Each Receipt this Period

85.00

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

184.59

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 16 OF 316

☒ 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. JOE BAESSLER

Mailing Address 2512 NE 50th

City

Portland

State

OR

Zip Code

97213

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OR CN 75

Occupation

COUNCIL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.249566

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

B. RONALD E. BARILLAS

Mailing Address 25 Nursery Lane

City

York

State

PA

Zip Code

17404

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 ▼

331.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245772

Amount of Each Receipt this Period

47.31

Full Name (Last, First, Middle Initial)

C. RONALD E. BARILLAS

Mailing Address 25 Nursery Lane

City

York

State

PA

Zip Code

17404

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 ▼

378.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.245973

Amount of Each Receipt this Period

47.31

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

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

174.62

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 316

(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. SUSAN BARKULIS

Mailing Address 9051 Southwest Blvd.

#P

City

Jefferson

State

MO

Zip Code

65109

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

434.13

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 13 / 2012

Transaction ID : SA11AI.245773

Amount of Each Receipt this Period

60.62

Full Name (Last, First, Middle Initial)

B. SUSAN BARKULIS

Mailing Address 9051 Southwest Blvd.

#P

City

Jefferson

State

MO

Zip Code

65109

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

494.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11AI.245974

Amount of Each Receipt this Period

60.62

Full Name (Last, First, Middle Initial)

C. DEBRA L. BASHAM

Mailing Address 5378 Cherry Creek Parkway N.

City

Columbus

State

OH

Zip Code

43228

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/BATH LSD

Occupation

BUS DRIVER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 12 / 2012

Transaction ID : SA11AI.246498

Amount of Each Receipt this Period

60.00

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

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

181.24

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

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

FOR LINE NUMBER: PAGE 18 OF 316

(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) A. FATIMA A BASTIANELLI</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245774</p> | | |
| <p>Mailing Address 5604 Vernon Place</p> | | | <p>Amount of Each Receipt this Period 38.25</p> | | |
| <p>City Bethesda</p> | <p>State MD</p> | <p>Zip Code 20817</p> | | | |
| <p>FEC ID number of contributing federal political committee. C</p> | | | | | |
| <p>Name of Employer AFSCME INT'L</p> | | <p>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 ▼ 267.75</p> | | | |
| <p>Full Name (Last, First, Middle Initial) B. FATIMA A BASTIANELLI</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.245975</p> | | |
| <p>Mailing Address 5604 Vernon Place</p> | | | <p>Amount of Each Receipt this Period 38.25</p> | | |
| <p>City Bethesda</p> | <p>State MD</p> | <p>Zip Code 20817</p> | | | |
| <p>FEC ID number of contributing federal political committee. C</p> | | | | | |
| <p>Name of Employer AFSCME INT'L</p> | | <p>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 ▼ 306.00</p> | | | |
| <p>Full Name (Last, First, Middle Initial) C. LINDA BATES</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245775</p> | | |
| <p>Mailing Address 1510 Walnut Street</p> | | | <p>Amount of Each Receipt this Period 33.76</p> | | |
| <p>City Woodbridge</p> | <p>State VA</p> | <p>Zip Code 22191</p> | | | |
| <p>FEC ID number of contributing federal political committee. C</p> | | | | | |
| <p>Name of Employer AFSCME INT'L</p> | | <p>Occupation LEGAL 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 ▼ 228.32</p> | | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>110.26</p> | | |
| <p>TOTAL 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 19 OF 316

☒ 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) A. LINDA BATES</p> <p>Mailing Address 1510 Walnut Street</p> <p>City State Zip Code Woodbridge VA 22191</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L LEGAL 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 ▼ 262.08</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.245976</p> <p>Amount of Each Receipt this Period 33.76</p> | | |
| <p>Full Name (Last, First, Middle Initial) B. MICHAEL D. BAUER</p> <p>Mailing Address 23 Valley Forge Lane</p> <p>City State Zip Code Elyria OH 44035</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 260.65</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 03 / 2012 Transaction ID : SA11AI.247225</p> <p>Amount of Each Receipt this Period 87.32</p> | | |
| <p>Full Name (Last, First, Middle Initial) C. PATRICIA BAUER</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. C</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 ▼ 388.88</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.246902</p> <p>Amount of Each Receipt this Period 97.22</p> | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>218.30</p> | | |
| <p>TOTAL 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 20 OF 316

(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

Full Name (Last, First, Middle Initial)

A. 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 ▼

446.52

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 02 / 2012

Transaction ID : SA11AI.247679

Amount of Each Receipt this Period

120.84

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 ▼

474.52

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246170

Amount of Each Receipt this Period

28.00

Full Name (Last, First, Middle Initial)

C. BRIAN L. BEALLOR

Mailing Address 3898 Rubythroat Drive

City State Zip Code
Gahanna OH 42230

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.36

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246332

Amount of Each Receipt this Period

24.04

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

172.88

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 21 OF 316

☒ 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) A. KENT BEAUCHAMP</p> <p>Mailing Address 2309 Mariners Point Lane</p> <p>City Springfield State IL Zip Code 62712</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME IL CN 31 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 ▼ 250.98</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247680</p> <p>Amount of Each Receipt this Period 83.66</p> | | |
| <p>Full Name (Last, First, Middle Initial) B. MICHAEL BEGATTO</p> <p>Mailing Address 301 Hedgerow Lane</p> <p>City Wilmington State DE Zip Code 19807</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME DE CN 81 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 ▼ 377.63</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 09 / 2012 Transaction ID : SA11AI.249413</p> <p>Amount of Each Receipt this Period 90.56</p> | | |
| <p>Full Name (Last, First, Middle Initial) C. NANCY L. BELCHER</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. C</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 ▼ 220.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 25 / 2012 Transaction ID : SA11AI.245727</p> <p>Amount of Each Receipt this Period 40.00</p> | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | 214.22 | | |
| <p>TOTAL 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 22 OF 316
(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

Full Name (Last, First, Middle Initial)

A. JOSEPH BELLA

Mailing Address 501 W George Street

City State Zip Code
Arlington Heights IL 60005

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IL CN 31

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 02 / 2012

Transaction ID : SA11AI.247681

Amount of Each Receipt this Period

83.66

Full Name (Last, First, Middle Initial)

B. CHARLES BENN

Mailing Address 141 Eddington Avenue

City State Zip Code
Harrisburg PA 17111-3520

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.246903

Amount of Each Receipt this Period

97.22

Full Name (Last, First, Middle Initial)

C. BRENDA L BENTON

Mailing Address 6800 N. High Street

City State Zip Code
Worthington OH 43085-2512

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 ▼

203.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.245977

Amount of Each Receipt this Period

25.40

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

206.28

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 23 OF 316
(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) A. STEVEN BERGER</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. C</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 ▼ 203.36</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 05 / 2012 Transaction ID : SA11AI.247647</p> <p>Amount of Each Receipt this Period 50.84</p> |
| <p>Full Name (Last, First, Middle Initial) B. JEFFREY BIGELOW</p> <p>Mailing Address 29 N. Wacker Drive</p> <p>City Chicago State IL Zip Code 60606</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME IL CN 31 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 ▼ 250.98</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247683</p> <p>Amount of Each Receipt this Period 83.66</p> |
| <p>Full Name (Last, First, Middle Initial) C. WALTER BLAIR</p> <p>Mailing Address 2223 Wintergreen Avenue</p> <p>City District Heights State MD Zip Code 20747</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASSISTANT 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 ▼ 312.48</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245777</p> <p>Amount of Each Receipt this Period 44.64</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | 179.14 |
| <p>TOTAL 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 24 OF 316

(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) A. WALTER BLAIR</p> <p>Mailing Address 2223 Wintergreen Avenue</p> <p>City State Zip Code District Heights MD 20747</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT 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 ▼ 357.12</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.245978</p> <p>Amount of Each Receipt this Period 44.64</p> | |
| <p>Full Name (Last, First, Middle Initial) B. JANE ANN BLAKESLEY</p> <p>Mailing Address 2179 Shoreham Road</p> <p>City State Zip Code Upper Arlington OH 43220</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 ADMINISTRATIVE ASSISTANT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 269.50</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 03 / 2012 Transaction ID : SA11AI.246216</p> <p>Amount of Each Receipt this Period 38.50</p> | |
| <p>Full Name (Last, First, Middle Initial) C. JANE ANN BLAKESLEY</p> <p>Mailing Address 2179 Shoreham Road</p> <p>City State Zip Code Upper Arlington OH 43220</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 ADMINISTRATIVE ASSISTANT</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 04 / 16 / 2012 Transaction ID : SA11AI.246274</p> <p>Amount of Each Receipt this Period 38.50</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>121.64</p> | |
| <p>TOTAL 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 25 OF 316

(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

| | | | | |
|--|--|--|--|--|
| A. JANE ANN BLAKESLEY Full Name (Last, First, Middle Initial) 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 Occupation AFSCME OH LOC 4 ADMINISTRATIVE ASSISTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 346.50 | | | Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 04 30 2012 </div> Transaction ID : SA11AI.246334 Amount of Each Receipt this Period 38.50 | |
| B. KAREN BLOOMINGDALE Full Name (Last, First, Middle Initial) Mailing Address 4301 Executive Park Drive City State Zip Code Harrisburg PA 17111 FEC ID number of contributing federal political committee. C Name of Employer Occupation AFSCME PA CN 13 STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 283.36 | | | Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 04 10 2012 </div> Transaction ID : SA11AI.246905 Amount of Each Receipt this Period 70.84 | |
| C. SHAKEEM V. BOONE Full Name (Last, First, Middle Initial) Mailing Address 5204 4th Street NW City State Zip Code Washington DC 20011 FEC ID number of contributing federal political committee. C Name of Employer Occupation AFSCME INT'L STAFF SPECIALIST I Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 227.15 | | | Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 04 13 2012 </div> Transaction ID : SA11AI.245778 Amount of Each Receipt this Period 32.45 | |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | | 141.79 | |
| TOTAL This Period (last page this line number 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 316

(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

Full Name (Last, First, Middle Initial)

A. 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 ▼

259.60

Date of Receipt

04 / 30 / 2012

Transaction ID : SA11AI.245979

Amount of Each Receipt this Period

32.45

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 ▼

1403.55

Date of Receipt

04 / 13 / 2012

Transaction ID : SA11AI.245779

Amount of Each Receipt this Period

199.65

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 ▼

1603.20

Date of Receipt

04 / 30 / 2012

Transaction ID : SA11AI.245980

Amount of Each Receipt this Period

199.65

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

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

431.75

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 316
(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) A. BENJAMIN BORGES-HERNANDEZ</p> <p>Mailing Address Paseo De Palma Real Buzon 185</p> <p>City Juncos State PR Zip Code 00777-0000</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 268.03</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245780</p> <p>Amount of Each Receipt this Period 38.29</p> |
| <p>Full Name (Last, First, Middle Initial) B. BENJAMIN BORGES-HERNANDEZ</p> <p>Mailing Address Paseo De Palma Real Buzon 185</p> <p>City Juncos State PR Zip Code 00777-0000</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 306.32</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.245981</p> <p>Amount of Each Receipt this Period 38.29</p> |
| <p>Full Name (Last, First, Middle Initial) C. SHARON K BORTON</p> <p>Mailing Address 5359 29th Street NW</p> <p>City Washington State DC Zip Code 20015</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASSIST. DIRECTOR, 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 ▼ 348.18</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245781</p> <p>Amount of Each Receipt this Period 49.74</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | 126.32 |
| <p>TOTAL 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 28 OF 316
(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) A. SHARON K BORTON</p> <p>Mailing Address 5359 29th Street NW</p> <p>City Washington State DC Zip Code 20015</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASSIST. DIRECTOR, 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 ▼ 397.92</p> | | | <p>Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.245982</p> <p>Amount of Each Receipt this Period 49.74</p> | |
| <p>Full Name (Last, First, Middle Initial) B. CAROL BOWSHIER</p> <p>Mailing Address 159 East Main Street</p> <p>City Mt. Sterling State OH Zip Code 43143</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 11 Occupation OPERATIONS DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 396.00</p> | | | <p>Date of Receipt 04 / 25 / 2012 Transaction ID : SA11AI.245730</p> <p>Amount of Each Receipt this Period 72.00</p> | |
| <p>Full Name (Last, First, Middle Initial) C. TALISHIA R. BRANDAO</p> <p>Mailing Address 155 Market Street</p> <p>City Highspire State PA Zip Code 17034</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 225.00</p> | | | <p>Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.247084</p> <p>Amount of Each Receipt this Period 75.00</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>196.74</p> | |
| <p>TOTAL 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 29 OF 316

(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) A. WILLIAM BRENNER</p> <p>Mailing Address 3300 Old Trail Road</p> <p>City York Haven State PA Zip Code 17370</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 386.07</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012</p> <p>Transaction ID : SA11AI.246909</p> <p>Amount of Each Receipt this Period 90.84</p> |
| <p>Full Name (Last, First, Middle Initial) B. ROBERT BRISTOL</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. C</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 ▼ 203.00</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 25 / 2012</p> <p>Transaction ID : SA11AI.249052</p> <p>Amount of Each Receipt this Period 26.50</p> |
| <p>Full Name (Last, First, Middle Initial) C. BILL BROCKMILLER</p> <p>Mailing Address 1418 10th Street #204</p> <p>City Lacrosse State WI Zip Code 54601</p> <p>FEC ID number of contributing federal political committee. C</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 04 / 20 / 2012</p> <p>Transaction ID : SA11AI.249461</p> <p>Amount of Each Receipt this Period 30.00</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | <p>147.34</p> |
| <p>TOTAL 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 30 OF 316

☒ 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) A. MATTHEW BROKMAN</p> <p>Mailing Address 444 East Main Street</p> <p>City State Zip Code New Britain CT 06051-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME CT CN 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 ▼ 205.41</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.249497</p> <p>Amount of Each Receipt this Period 51.24</p> | |
| <p>Full Name (Last, First, Middle Initial) B. T BILLY BROWN</p> <p>Mailing Address 820 S Wright Street</p> <p>City State Zip Code Naperville IL 60565</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IL CN 31 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 ▼ 250.98</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247687</p> <p>Amount of Each Receipt this Period 83.66</p> | |
| <p>Full Name (Last, First, Middle Initial) C. CARTER A BUNDY</p> <p>Mailing Address 1968 Otowi Drive</p> <p>City State Zip Code Santa Fe NM 87505</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L POLITICAL ACTION REP. III</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 282.16</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245783</p> <p>Amount of Each Receipt this Period 40.78</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | 175.68 | |
| <p>TOTAL 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 31 OF 316

☒ 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. 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 ▼

323.49

Date of Receipt

04 / 30 / 2012

Transaction ID : SA11AI.245984

Amount of Each Receipt this Period

41.33

Full Name (Last, First, Middle Initial)

B. JUSTIN H. BURCHARD

Mailing Address 1650 Harvard Street NW
Apt #714

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DATA & TARGETING PROGRAM MANAGER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

249.36

Date of Receipt

04 / 13 / 2012

Transaction ID : SA11AI.245784

Amount of Each Receipt this Period

37.14

Full Name (Last, First, Middle Initial)

C. JUSTIN H. BURCHARD

Mailing Address 1650 Harvard Street NW
Apt #714

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DATA & TARGETING PROGRAM MANAGER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

286.50

Date of Receipt

04 / 30 / 2012

Transaction ID : SA11AI.245985

Amount of Each Receipt this Period

37.14

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

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

115.61

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 316

(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

Full Name (Last, First, Middle Initial)

A. CAROL L. BURNETT

Mailing Address 1921 N. Westmoreland

City

Arlington

State

VA

Zip Code

22213

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

MANAGER, ART & GRAPHIC DESIGN

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

367.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245785

Amount of Each Receipt this Period

52.50

Full Name (Last, First, Middle Initial)

B. CAROL L. BURNETT

Mailing Address 1921 N. Westmoreland

City

Arlington

State

VA

Zip Code

22213

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

MANAGER, ART & GRAPHIC DESIGN

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.245986

Amount of Each Receipt this Period

52.50

Full Name (Last, First, Middle Initial)

C. DOUGLAS R. BURNETT

Mailing Address 2051 McKenna Blvd.

City

Madison

State

WI

Zip Code

53711

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

POLITICAL ACTION COORDINATOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

329.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245786

Amount of Each Receipt this Period

47.12

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

152.12

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 33 OF 316

☒ 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) A. DOUGLAS R. BURNETT</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. C</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 ▼ 376.96 </p> | | | City Madison | State WI | Zip Code 53711 | Name of Employer AFSCME INT'L | Occupation POLITICAL ACTION COORDINATOR | <p>Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.245987 </p> <p>Amount of Each Receipt this Period 47.12 </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. PAULA J. CAIRA</p> <p>Mailing Address 17 Fourteenth Street SE</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Washington</td> <td style="width: 33%;">State DC</td> <td style="width: 33%;">Zip Code 20003</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME INT'L</td> <td style="width: 66%;">Occupation ASSOCIATE GENERAL COUNSEL 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 ▼ 423.50 </p> | | | City Washington | State DC | Zip Code 20003 | Name of Employer AFSCME INT'L | Occupation ASSOCIATE GENERAL COUNSEL II | <p>Date of Receipt 04 / 13 / 2012 Transaction ID : SA11AI.245788 </p> <p>Amount of Each Receipt this Period 60.50 </p> | |
| City Washington | State DC | Zip Code 20003 | | | | | | | |
| Name of Employer AFSCME INT'L | Occupation ASSOCIATE GENERAL COUNSEL II | | | | | | | | |
| <p>Full Name (Last, First, Middle Initial) C. PAULA J. CAIRA</p> <p>Mailing Address 17 Fourteenth Street SE</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Washington</td> <td style="width: 33%;">State DC</td> <td style="width: 33%;">Zip Code 20003</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME INT'L</td> <td style="width: 66%;">Occupation ASSOCIATE GENERAL COUNSEL 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 ▼ 484.00 </p> | | | City Washington | State DC | Zip Code 20003 | Name of Employer AFSCME INT'L | Occupation ASSOCIATE GENERAL COUNSEL II | <p>Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.245989 </p> <p>Amount of Each Receipt this Period 60.50 </p> | |
| City Washington | State DC | Zip Code 20003 | | | | | | | |
| Name of Employer AFSCME INT'L | Occupation ASSOCIATE GENERAL COUNSEL II | | | | | | | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | 168.12 | | | | | | |
| <p>TOTAL 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 34 OF 316

☒ 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. NINA M. CALABRIA

Mailing Address 6124 Crystal Valley Drive

City State Zip Code
 Galena OH 43021

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 16 / 2012

Transaction ID : SA11AI.246742

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. NINA M. CALABRIA

Mailing Address 6124 Crystal Valley Drive

City State Zip Code
 Galena OH 43021

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11AI.246339

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. 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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11AI.246340

Amount of Each Receipt this Period

25.00

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 35 OF 316
(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) A. ROBERT CALVIN</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. C</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 ▼ 292.64</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.246912</p> <p>Amount of Each Receipt this Period 73.16</p> | |
| <p>Full Name (Last, First, Middle Initial) B. JOHN CAMERON</p> <p>Mailing Address 6555 N. Maplewood</p> <p>City State Zip Code Chicago IL 60645</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IL CN 31 DIRECTOR POL./COM. RELATIONS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 237.48</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247689</p> <p>Amount of Each Receipt this Period 79.16</p> | |
| <p>Full Name (Last, First, Middle Initial) C. LINDA CANAN-STEPHENS</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. C</p> <p>Name of Employer Occupation AFSCME INT'L DIRECTOR, CONFERENCE AND TRVL SVCS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 688.53</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245789</p> <p>Amount of Each Receipt this Period 93.89</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>246.21</p> | |
| <p>TOTAL 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 36 OF 316
 (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. LINDA CANAN-STEPHENS | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.245990 | |
| Mailing Address 9013 Advantage Court City State Zip Code Burke VA 22003 | | Amount of Each Receipt this Period 93.89 | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer AFSCME INT'L | | Occupation DIRECTOR, CONFERENCE AND TRVL SVCS | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 782.42 | |
| Full Name (Last, First, Middle Initial) B. RICHARD CAPONI | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.246913 | |
| Mailing Address 4453 Stilley Road City State Zip Code Pittsburgh PA 15227 | | Amount of Each Receipt this Period 114.54 | |
| 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 ▼ 458.16 | |
| Full Name (Last, First, Middle Initial) C. GINO A. CARBENIA | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245791 | |
| Mailing Address 9253 Barcroft Drive City State Zip Code Indianapolis IN 46240 | | Amount of Each Receipt this Period 82.33 | |
| 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 ▼ 555.73 | |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | 290.76 | |
| 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 37 OF 316
(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) A. GINO A. CARBENIA</p> <p>Mailing Address 9253 Barcroft Drive</p> <p>City State Zip Code Indianapolis IN 46240</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT TO 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 ▼ 638.06</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.245992</p> <p>Amount of Each Receipt this Period 82.33</p> | |
| <p>Full Name (Last, First, Middle Initial) B. JOYCE CARLSON</p> <p>Mailing Address 911 Aldine Street</p> <p>City State Zip Code Saint Paul MN 55104</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 5/CN14 BUSINESS REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 314.12</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.247891</p> <p>Amount of Each Receipt this Period 72.28</p> | |
| <p>Full Name (Last, First, Middle Initial) C. SHERI CARNAHAN</p> <p>Mailing Address 2007 Emerald Drive</p> <p>City State Zip Code Davenport IA 52084</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IA CN 61 WORKFORCE ADVISOR II</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 268.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.247591</p> <p>Amount of Each Receipt this Period 67.00</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>221.61</p> | |
| <p>TOTAL 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 38 OF 316

☒ 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) A. CHAD W. CARTER</p> <p>Mailing Address 6653 13th Street NW</p> <p>City Washington State DC Zip Code 20012</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation MANAGER, MEMBER AND AFFILIATE SVCS</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 04 / 13 / 2012 Transaction ID : SA11AI.245792</p> <p>Amount of Each Receipt this Period 11.00</p> |
| <p>Full Name (Last, First, Middle Initial) B. CHAD W. CARTER</p> <p>Mailing Address 6653 13th Street NW</p> <p>City Washington State DC Zip Code 20012</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation MANAGER, MEMBER AND AFFILIATE SVCS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 218.00</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.245993</p> <p>Amount of Each Receipt this Period 11.00</p> |
| <p>Full Name (Last, First, Middle Initial) C. JANE M CARTER</p> <p>Mailing Address 315 12th Street NE Apt. 101</p> <p>City Washington State DC Zip Code 20002</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASST. DIRECTOR, ORGANIZING & FLD SVC</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 538.50</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245793</p> <p>Amount of Each Receipt this Period 78.00</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | <p>100.00</p> |
| <p>TOTAL 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 39 OF 316

☒ 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) A. JANE M CARTER</p> <p>Mailing Address 315 12th Street NE Apt. 101</p> <p>City Washington State DC Zip Code 20002</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASST. DIRECTOR, ORGANIZING & FLD SVC</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 616.50</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.245994</p> <p>Amount of Each Receipt this Period 88.00</p> |
| <p>Full Name (Last, First, Middle Initial) B. LEROY CARTER</p> <p>Mailing Address 2648 Towner Road</p> <p>City Ann Arbor State MI Zip Code 48105</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 205.12</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 03 / 2012 Transaction ID : SA11AI.247494</p> <p>Amount of Each Receipt this Period 29.12</p> |
| <p>Full Name (Last, First, Middle Initial) C. LEROY CARTER</p> <p>Mailing Address 2648 Towner Road</p> <p>City Ann Arbor State MI Zip Code 48105</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 234.24</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 17 / 2012 Transaction ID : SA11AI.247544</p> <p>Amount of Each Receipt this Period 29.12</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | 136.24 |
| <p>TOTAL 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 40 OF 316
(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) A. LESLIE A. CARTER</p> <p>Mailing Address 2466 Anna Way</p> <p>City State Zip Code Elgin IL 60124</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IL CN 31 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 ▼ 203.22</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247690</p> <p>Amount of Each Receipt this Period 67.74</p> | |
| <p>Full Name (Last, First, Middle Initial) B. ANTHONY CASO</p> <p>Mailing Address 9 Garden Court</p> <p>City State Zip Code Boston MA 02113-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MA CN 93 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 ▼ 525.41</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 03 / 2012 Transaction ID : SA11AI.247630</p> <p>Amount of Each Receipt this Period 100.10</p> | |
| <p>Full Name (Last, First, Middle Initial) C. ANTHONY CASO</p> <p>Mailing Address 9 Garden Court</p> <p>City State Zip Code Boston MA 02113-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MA CN 93 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 ▼ 567.08</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246173</p> <p>Amount of Each Receipt this Period 41.67</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>209.51</p> | |
| <p>TOTAL 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 41 OF 316

☒ 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. ROBERT CASON

Mailing Address 4301 Executive Park Drive

City State Zip Code
Harrisburg PA 17111

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.246914

Amount of Each Receipt this Period

77.50

Full Name (Last, First, Middle Initial)

B. 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 ▼

292.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.246915

Amount of Each Receipt this Period

73.16

Full Name (Last, First, Middle Initial)

C. EDDIE A. CAUMIANT

Mailing Address 120 S. Virginia Avenue

City State Zip Code
Belleville IL 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 ▼

250.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 02 / 2012

Transaction ID : SA11AI.247691

Amount of Each Receipt this Period

83.66

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

234.32

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 42 OF 316

☒ 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) A. MARK E CAVANAH</p> <p>Mailing Address 243 Iroquois Drive</p> <p>City Paducah State KY Zip Code 42001</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation 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 ▼ 340.97</p> | | <p>Date of Receipt 04 / 13 / 2012 Transaction ID : SA11AI.245794</p> <p>Amount of Each Receipt this Period 48.71</p> |
| <p>Full Name (Last, First, Middle Initial) B. MARK E CAVANAH</p> <p>Mailing Address 243 Iroquois Drive</p> <p>City Paducah State KY Zip Code 42001</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation 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 ▼ 389.68</p> | | <p>Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.245995</p> <p>Amount of Each Receipt this Period 48.71</p> |
| <p>Full Name (Last, First, Middle Initial) C. JEANETTE CHAVEZ</p> <p>Mailing Address 1361 Hamilton Street NW</p> <p>City Washington State DC Zip Code 20011</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 252.91</p> | | <p>Date of Receipt 04 / 13 / 2012 Transaction ID : SA11AI.245795</p> <p>Amount of Each Receipt this Period 36.13</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> <p>TOTAL This Period (last page this line number only)..... ▶</p> | | <p>133.55</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 43 OF 316

☒ 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. JEANETTE CHAVEZ

Mailing Address 1361 Hamilton 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

EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.245996

Amount of Each Receipt this Period

37.61

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 ▼

338.87

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245796

Amount of Each Receipt this Period

48.41

Full Name (Last, First, Middle Initial)

C. 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 ▼

387.28

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.245997

Amount of Each Receipt this Period

48.41

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

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

134.43

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

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

FOR LINE NUMBER: PAGE 44 OF 316

(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) A. JUDY K CHOW</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. C</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 ▼ 400.00</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 05 / 2012 Transaction ID : SA11AI.247166</p> <p>Amount of Each Receipt this Period 100.00</p> |
| <p>Full Name (Last, First, Middle Initial) B. RUSSELL J. CLEMENS</p> <p>Mailing Address 116 Cranburne Lane</p> <p>City Willamsville State NY Zip Code 14221</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 349.68</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 05 / 2012 Transaction ID : SA11AI.247648</p> <p>Amount of Each Receipt this Period 87.42</p> |
| <p>Full Name (Last, First, Middle Initial) C. VORIE CLEMENTS</p> <p>Mailing Address 2419 West 116th Street</p> <p>City Hawthorne State CA Zip Code 90250</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME CA CN 36/LOCAL 3302 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 ▼ 300.00</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.249561</p> <p>Amount of Each Receipt this Period 50.00</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | 237.42 |
| <p>TOTAL 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 45 OF 316

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <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. DONALD L. CLINE

Mailing Address 21 E Hope Place

City

Shelton

State

WA

Zip Code

98584

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28/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 | 4 | | 1 | 0 | | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.248777

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. DONALD L. CLINE

Mailing Address 21 E Hope Place

City

Shelton

State

WA

Zip Code

98584

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 2 | 5 | | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.249075

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. KATHERINE A. COAKLEYMailing Address 410 S. Maple Avenue
#604

City

Falls Church

State

VA

Zip Code

20046

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AFFILIATE COMMUNICATION MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.52

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 3 | | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.245798

Amount of Each Receipt this Period

43.92

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

103.92

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 46 OF 316

(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

Full Name (Last, First, Middle Initial)

A. KATHERINE A. COAKLEY

Mailing Address 410 S. Maple Avenue
#604

City State Zip Code
Falls Church VA 20046

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AFFILIATE COMMUNICATION MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.245999

Amount of Each Receipt this Period

45.12

Full Name (Last, First, Middle Initial)

B. LINCOLN COHEN

Mailing Address 4500 E. 6th Street

City State Zip Code
Gary IN 46403

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IL CN 31

Occupation

EDITOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.62

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 02 / 2012

Transaction ID : SA11AI.247692

Amount of Each Receipt this Period

76.54

Full Name (Last, First, Middle Initial)

C. AARON J. COLE

Mailing Address 12211 S Hangman Valley Road

City State Zip Code
Valleyford WA 99036

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 ▼

210.49

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245799

Amount of Each Receipt this Period

30.07

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

151.73

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

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

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

FOR LINE NUMBER: PAGE 47 OF 316
(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

Full Name (Last, First, Middle Initial)

A. AARON J. COLE

Mailing Address 12211 S Hangman Valley Road

City State Zip Code
Valleyford WA 99036

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 ▼

240.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246000

Amount of Each Receipt this Period

30.07

Full Name (Last, First, Middle Initial)

B. KENTON C. COLE

Mailing Address P.O. Box 882

City State Zip Code
Lomax IA 61454

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IA CN 61/SOIA

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 Y
04 / 10 / 2012

Transaction ID : SA11AI.247592

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

C. TRACEY CONATY

Mailing Address 1789 Lanier Place NW
#42

City State Zip Code
Washington DC 20009

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, NEW MEDIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245800

Amount of Each Receipt this Period

52.50

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

152.57

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: PAGE 48 OF 316
(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

Full Name (Last, First, Middle Initial)

A. TRACEY CONATY

Mailing Address 1789 Lanier Place NW
#42

City State Zip Code
Washington DC 20009

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, NEW MEDIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246001

Amount of Each Receipt this Period

52.50

Full Name (Last, First, Middle Initial)

B. 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 ▼

242.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 25 / 2012

Transaction ID : SA11AI.245734

Amount of Each Receipt this Period

44.00

Full Name (Last, First, Middle Initial)

C. BARBARA COUFAL

Mailing Address 10112 Parkwood Drive

City State Zip Code
Bethesda MD 20814

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, FED GOVT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245802

Amount of Each Receipt this Period

52.50

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

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

149.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 49 OF 316
(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. BARBARA COUFAL

Mailing Address 10112 Parkwood Drive

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Bethesda | MD | 20814 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, FED GOV'T AFFAIRS

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 |
| 04 | / | 30 | / | 2012 |

Transaction ID : SA11AI.246003

Amount of Each Receipt this Period

52.50

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER COWEN

Mailing Address 47 Douglas Street

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Saint Paul | MN | 55102 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

BUSINESS REPRESENTATIVE

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 |
| 04 | / | 10 | / | 2012 |

Transaction ID : SA11AI.247893

Amount of Each Receipt this Period

71.14

Full Name (Last, First, Middle Initial)

C. 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 ▼

280.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 24 | / | 2012 |

Transaction ID : SA11AI.249582

Amount of Each Receipt this Period

40.00

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

163.64

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 50 OF 316
(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

Full Name (Last, First, Middle Initial)

A. DICK CROFTER

Mailing Address 238 S. Oak Park Avenue
#1F

City State Zip Code
Oak Park IL 60302

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IL CN 31

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.22

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 02 / 2012

Transaction ID : SA11AI.247693

Amount of Each Receipt this Period

67.74

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 ▼

203.84

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 03 / 2012

Transaction ID : SA11AI.247496

Amount of Each Receipt this Period

29.12

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 ▼

232.96

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 17 / 2012

Transaction ID : SA11AI.247546

Amount of Each Receipt this Period

29.12

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

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

125.98

| | | | | | | | | | |
|---|-----|--|-----|--|-----|--|----|--|----|
| 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 52 OF 316

(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

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 ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.247895

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 ▼

388.88

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.246920

Amount of Each Receipt this Period

97.22

Full Name (Last, First, Middle Initial)

C. TAWFIK Y DAOUD

Mailing Address 13304 Clifton Park Circle

City

Clifton

State

VA

Zip Code

20124

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

NETWORK ANALYST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.17

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245805

Amount of Each Receipt this Period

47.31

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

198.53

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

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

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

FOR LINE NUMBER: PAGE 53 OF 316

(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

Full Name (Last, First, Middle Initial)

A. TAWFIK Y DAOUD

Mailing Address 13304 Clifton Park Circle

City State Zip Code
 Clifton VA 20124

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

NETWORK ANALYST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11AI.246006

Amount of Each Receipt this Period

47.31

Full Name (Last, First, Middle Initial)

B. ROBERT A. DAVIS

Mailing Address 822 Bovee Lane

City State Zip Code
 Powell OH 43065

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

ASSOCIATE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 03 / 2012

Transaction ID : SA11AI.247238

Amount of Each Receipt this Period

87.32

Full Name (Last, First, Middle Initial)

C. 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 ▼

203.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 03 / 2012

Transaction ID : SA11AI.247497

Amount of Each Receipt this Period

29.12

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

163.75

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

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

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

FOR LINE NUMBER: PAGE 54 OF 316

(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

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 ▼

232.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 17 / 2012

Transaction ID : SA11AI.247547

Amount of Each Receipt this Period

29.12

Full Name (Last, First, Middle Initial)

B. SHEILA M. DAWKINS-FLINN

Mailing Address 1028 Terrell Drive

City State Zip Code
Akron OH 44313

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/UNION LOCAL SD

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 02 / 2012

Transaction ID : SA11AI.246745

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. SHEILA M. DAWKINS-FLINN

Mailing Address 1028 Terrell Drive

City State Zip Code
Akron OH 44313

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/UNION LOCAL SD

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 Y
04 / 03 / 2012

Transaction ID : SA11AI.246406

Amount of Each Receipt this Period

50.00

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

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

119.12

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

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

FOR LINE NUMBER:
(check only one)

PAGE 55 OF 316

☒ 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) A. SHEILA M. DAWKINS-FLINN</p> <p>Mailing Address 1028 Terrell Drive</p> <p>City State Zip Code Akron OH 44313</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/UNION LOCAL SD 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 ▼ 390.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 16 / 2012 Transaction ID : SA11AI.246554</p> <p>Amount of Each Receipt this Period 50.00</p> | |
| <p>Full Name (Last, First, Middle Initial) B. SHEILA M. DAWKINS-FLINN</p> <p>Mailing Address 1028 Terrell Drive</p> <p>City State Zip Code Akron OH 44313</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/UNION LOCAL SD 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 ▼ 440.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246668</p> <p>Amount of Each Receipt this Period 50.00</p> | |
| <p>Full Name (Last, First, Middle Initial) C. JIMMIE L. DAWSON</p> <p>Mailing Address 35263 S. Turtle Trail #38B</p> <p>City State Zip Code Willoughby OH 44094</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/WILLOUGHBY 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 ▼ 206.72</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 23 / 2012 Transaction ID : SA11AI.246626</p> <p>Amount of Each Receipt this Period 20.84</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>120.84</p> | |
| <p>TOTAL 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 56 OF 316
(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

Full Name (Last, First, Middle Initial)

A. EDGAR DEJESUS

Mailing Address 8 Ralph Street
First Floor

City Bergenfield State NJ Zip Code 07621-0000

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.78

Date of Receipt

04 / 13 / 2012

Transaction ID : SA11AI.245806

Amount of Each Receipt this Period

51.54

Full Name (Last, First, Middle Initial)

B. EDGAR DEJESUS

Mailing Address 8 Ralph Street
First Floor

City Bergenfield State NJ Zip Code 07621-0000

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.32

Date of Receipt

04 / 30 / 2012

Transaction ID : SA11AI.246007

Amount of Each Receipt this Period

51.54

Full Name (Last, First, Middle Initial)

C. JOHN C. DEMPSEY

Mailing Address 20235 Watermark Place

City Sterling State VA Zip Code 20165

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

679.38

Date of Receipt

04 / 13 / 2012

Transaction ID : SA11AI.245807

Amount of Each Receipt this Period

95.34

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

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

198.42

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 316

(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

Full Name (Last, First, Middle Initial)

A. JOHN C. DEMPSEY

Mailing Address 20235 Watermark Place

City State Zip Code
 Sterling VA 20165

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

774.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11AI.246008

Amount of Each Receipt this Period

95.34

Full Name (Last, First, Middle Initial)

B. CONSTANCE DERR

Mailing Address P.O. Box 116

City State Zip Code
 Maspeth NY 11378

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 13 / 2012

Transaction ID : SA11AI.245808

Amount of Each Receipt this Period

52.50

Full Name (Last, First, Middle Initial)

C. CONSTANCE DERR

Mailing Address P.O. Box 116

City State Zip Code
 Maspeth NY 11378

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11AI.246009

Amount of Each Receipt this Period

52.50

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

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

200.34

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

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

FOR LINE NUMBER: PAGE 58 OF 316

(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) A. GREG D. DEVEREUX</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 11 / 2012 Transaction ID : SA11AI.249374</p> | |
| <p>Mailing Address 3561 Kamilche Point Road</p> | | | | |
| City Shelton | State WA | Zip Code 98584 | | |
| <p>FEC ID number of contributing federal political committee. C</p> | | | <p>Amount of Each Receipt this Period 120.00</p> | |
| <p>Name of Employer AFSCME WA CN 28</p> | | <p>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 ▼ 522.00</p> | | |
| <p>Full Name (Last, First, Middle Initial) B. GREG D. DEVEREUX</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246174</p> | |
| <p>Mailing Address 3561 Kamilche Point Road</p> | | | | |
| City Shelton | State WA | Zip Code 98584 | | |
| <p>FEC ID number of contributing federal political committee. C</p> | | | <p>Amount of Each Receipt this Period 14.00</p> | |
| <p>Name of Employer AFSCME WA CN 28</p> | | <p>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 ▼ 536.00</p> | | |
| <p>Full Name (Last, First, Middle Initial) C. JEFFREY DEXTER</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247695</p> | |
| <p>Mailing Address 501 Dennis Avenue</p> | | | | |
| City Bradley | State IL | Zip Code 60915 | | |
| <p>FEC ID number of contributing federal political committee. C</p> | | | <p>Amount of Each Receipt this Period 67.74</p> | |
| <p>Name of Employer AFSCME IL CN 31</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 ▼ 203.22</p> | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>201.74</p> | |
| <p>TOTAL 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 59 OF 316

(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

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 ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 25 / 2012

Transaction ID : SA11AI.248171

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. CRYSTAL M. DI DOMENICO

Mailing Address 6616 Comet Circle
#615

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 ▼

253.05

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245809

Amount of Each Receipt this Period

36.15

Full Name (Last, First, Middle Initial)

C. CRYSTAL M. DI DOMENICO

Mailing Address 6616 Comet Circle
#615

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 ▼

289.20

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246010

Amount of Each Receipt this Period

36.15

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

222.30

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

Aggregate Year-to-Date ▼

| Month | Year-to-Date Sales |
|-------|--------------------|
| Jan | ~100 |
| Feb | ~150 |
| Mar | ~200 |
| Apr | ~250 |
| May | ~300 |
| Jun | ~350 |
| Jul | ~400 |
| Aug | ~450 |
| Sep | ~500 |
| Oct | ~550 |
| Nov | ~600 |
| Dec | 448.00 |

| 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+ | 56.00 |

Aggregate Year-to-Date ▼

| Month | Year-to-Date Sales |
|-------|--------------------|
| 1 | 100.00 |
| 2 | 100.00 |
| 3 | 100.00 |
| 4 | 100.00 |
| 5 | 100.00 |
| 6 | 100.00 |
| 7 | 100.00 |
| 8 | 100.00 |
| 9 | 100.00 |
| 10 | 100.00 |
| 11 | 100.00 |
| 12 | 504.00 |

| Age Group | Percentage |
|-----------|------------|
| 18-24 | 10.00 |
| 25-34 | 15.00 |
| 35-44 | 20.00 |
| 45-54 | 25.00 |
| 55-64 | 30.00 |
| 65-74 | 35.00 |
| 75-84 | 40.00 |
| 85+ | 56.00 |

Aggregate Year-to-Date ▼

| Month | Year-to-Date Sales |
|-------|--------------------|
| Jan | 15.00 |
| Feb | 15.00 |
| Mar | 15.00 |
| Apr | 15.00 |
| May | 15.00 |
| Jun | 15.00 |
| Jul | 15.00 |
| Aug | 15.00 |
| Sep | 15.00 |
| Oct | 15.00 |
| Nov | 15.00 |
| Dec | 212.03 |

30.29

142.29

[illegible]

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

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

FOR LINE NUMBER: PAGE 61 OF 316
(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

Full Name (Last, First, Middle Initial)

A. JEANETTE DIFLORIO

Mailing Address 1015 Washington Street

City State Zip Code
Brighton MI 48116

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.32

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 17 / 2012

Transaction ID : SA11AI.247548

Amount of Each Receipt this Period

30.29

Full Name (Last, First, Middle Initial)

B. JOHN A. DINICOLA

Mailing Address 320 2nd Street

City State Zip Code
Bergenline NJ 07087-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IL CN 31

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.22

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 02 / 2012

Transaction ID : SA11AI.247697

Amount of Each Receipt this Period

67.74

Full Name (Last, First, Middle Initial)

C. 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 ▼

232.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.246926

Amount of Each Receipt this Period

58.14

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

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

156.17

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 316
 (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

Full Name (Last, First, Middle Initial)

A. KEVIN DOEING

Mailing Address 316 Quittie Park Dr.

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Annvile | 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 ▼

326.72

Date of Receipt

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 04 | / | 10 | / | 2012 |

Transaction ID : SA11AI.246927

Amount of Each Receipt this Period

81.68

Full Name (Last, First, Middle Initial)

B. DANNY DONOHUE

Mailing Address 10 Longview Drive

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Clifton Park | NY | 12061 |

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME NY LOC 1000

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.16

Date of Receipt

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 04 | / | 19 | / | 2012 |

Transaction ID : SA11AI.249465

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

C. DANNY DONOHUE

Mailing Address 10 Longview Drive

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Clifton Park | NY | 12061 |

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME NY LOC 1000

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.16

Date of Receipt

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 04 | / | 30 | / | 2012 |

Transaction ID : SA11AI.246175

Amount of Each Receipt this Period

14.00

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

114.92

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

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

PAGE 63 OF 316

| | | | |
|---|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <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. CAROL A. DOTLICH

Mailing Address 8312 198th Street E

City

Spanaway

State

WA

Zip Code

98387

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

213.50

Date of Receipt

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04 | 10 | 2012 |

Transaction ID : SA11AI.248799

Amount of Each Receipt this Period

6.50

Full Name (Last, First, Middle Initial)

B. CAROL A. DOTLICH

Mailing Address 8312 198th Street E

City

Spanaway

State

WA

Zip Code

98387

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

255.50

Date of Receipt

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04 | 11 | 2012 |

Transaction ID : SA11AI.249375

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

C. CAROL A. DOTLICH

Mailing Address 8312 198th Street E

City

Spanaway

State

WA

Zip Code

98387

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

262.00

Date of Receipt

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 04 | 25 | 2012 |

Transaction ID : SA11AI.249096

Amount of Each Receipt this Period

6.50

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

55.00

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

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

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

FOR LINE NUMBER: PAGE 64 OF 316

(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

Full Name (Last, First, Middle Initial)

A. CAROL A. DOTLICH

Mailing Address 8312 198th Street E

City

Spanaway

State

WA

Zip Code

98387

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246176

Amount of Each Receipt this Period

14.00

Full Name (Last, First, Middle Initial)

B. THOMAS C. DRABICK JR.

Mailing Address 982 Fortkort Drive

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

DIRECTOR, LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 03 / 2012

Transaction ID : SA11AI.246227

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. THOMAS C. DRABICK JR.

Mailing Address 982 Fortkort Drive

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

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
04 / 16 / 2012

Transaction ID : SA11AI.246285

Amount of Each Receipt this Period

40.00

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

94.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 65 OF 316

☒ 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) A. THOMAS C. DRABICK JR.</p> <p>Mailing Address 982 Fortkort Drive</p> <p>City Reynoldsburg State OH Zip Code 43068</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation DIRECTOR, LEGAL SERVICES</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 04 / 30 / 2012 Transaction ID : SA11AI.246345</p> <p>Amount of Each Receipt this Period 40.00</p> | |
| <p>Full Name (Last, First, Middle Initial) B. LAURA E. DRAKE</p> <p>Mailing Address 238 S. Oak Park Avenue</p> <p>City Oak Park State IL Zip Code 60302</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME IL CN 31 Occupation SENIOR ORGANIZER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 203.22</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247701</p> <p>Amount of Each Receipt this Period 67.74</p> | |
| <p>Full Name (Last, First, Middle Initial) C. PAMELA F. DUNCAN</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. C</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 ▼ 269.50</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 03 / 2012 Transaction ID : SA11AI.246228</p> <p>Amount of Each Receipt this Period 38.50</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>146.24</p> | |
| <p>TOTAL 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 66 OF 316

| | | | |
|---|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <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. PAMELA F. DUNCAN

Mailing Address 7282 Aplin Drive

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

EXECUTIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 16 | / | 2012 |

Transaction ID : SA11AI.246286

Amount of Each Receipt this Period

38.50

Full Name (Last, First, Middle Initial)

B. PAMELA F. DUNCAN

Mailing Address 7282 Aplin Drive

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

EXECUTIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 16 | / | 2012 |

Transaction ID : SA11AI.246748

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. PAMELA F. DUNCAN

Mailing Address 7282 Aplin Drive

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

EXECUTIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.50

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 30 | / | 2012 |

Transaction ID : SA11AI.246346

Amount of Each Receipt this Period

38.50

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

117.00

TOTAL This Period (last page this line number 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 316

(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

Full Name (Last, First, Middle Initial)

A. DENNIS J. EAGLE

Mailing Address 5007 26th Avenue SE

| | | |
|-------|-------|----------|
| City | State | Zip Code |
| Lacey | WA | 98503 |

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME WA CN 28

Occupation

DIRECTOR OF LPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 04 | / | 11 | / | 2012 |

Transaction ID : SA11AI.249376

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

B. JOHN M. EAGLESPRIT

Mailing Address 619 W Gambier Street

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Mount Vernon | OH | 43050 |

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 4/COLUMBUS CITY

Occupation

CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 04 | / | 23 | / | 2012 |

Transaction ID : SA11AI.246852

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. 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 ▼

303.52

Date of Receipt

| | | | | |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 04 | / | 10 | / | 2012 |

Transaction ID : SA11AI.246929

Amount of Each Receipt this Period

75.88

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

190.88

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 68 OF 316
(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) A. THOMAS EDSTROM</p> <p>Mailing Address 4106 N. Sacramento</p> <p>City State Zip Code Chicago IL 60618</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IL CN 31 LEGAL COUNSEL</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 237.72</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247702 </p> <p>Amount of Each Receipt this Period 79.24</p> | | |
| <p>Full Name (Last, First, Middle Initial) B. DEVON F. ELLIS</p> <p>Mailing Address 1379 Hudson Street</p> <p>City State Zip Code Dupont WA 98327</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 202.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 25 / 2012 Transaction ID : SA11AI.249102 </p> <p>Amount of Each Receipt this Period 26.00</p> | | |
| <p>Full Name (Last, First, Middle Initial) C. LORI R. ELMORE</p> <p>Mailing Address 1763 North Cassady Avenue</p> <p>City State Zip Code Columbus OH 43219</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 286.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 25 / 2012 Transaction ID : SA11AI.245735 </p> <p>Amount of Each Receipt this Period 52.00</p> | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | 157.24 | | |
| <p>TOTAL 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 69 OF 316

| | | | |
|---|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <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. KURT ERRICKSONMailing 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 ▼

284.52

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 10 | / | 2012 |

Transaction ID : SA11AI.247897

Amount of Each Receipt this Period

71.13

Full Name (Last, First, Middle Initial)

B. FLORENCE S. ESTESMailing Address 4328 N. Hermitage Avenue
#1-W

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Chicago | IL | 60613 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IL CN 31

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.22

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 02 | / | 2012 |

Transaction ID : SA11AI.247703

Amount of Each Receipt this Period

67.74

Full Name (Last, First, Middle Initial)

C. 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 ▼

226.80

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 10 | / | 2012 |

Transaction ID : SA11AI.246930

Amount of Each Receipt this Period

56.70

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

195.57

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 70 OF 316

☒ 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. 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 ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 05 / 2012

Transaction ID : SA11AI.247650

Amount of Each Receipt this Period

87.50

Full Name (Last, First, Middle Initial)

B. 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 ▼

200.09

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 03 / 2012

Transaction ID : SA11AI.247242

Amount of Each Receipt this Period

67.02

Full Name (Last, First, Middle Initial)

C. 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 ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 25 / 2012

Transaction ID : SA11AI.248179

Amount of Each Receipt this Period

60.00

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

214.52

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 71 OF 316
 (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. STEPHAN FANTAUZZO

Mailing Address 3840 N. Delaware Street

 City
 Indianapolis

 State
 IN

 Zip Code
 46205

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, ORGANIZING & FIELD SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591.35

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 3 | | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.245811

Amount of Each Receipt this Period

85.59

Full Name (Last, First, Middle Initial)

B. STEPHAN FANTAUZZO

Mailing Address 3840 N. Delaware Street

 City
 Indianapolis

 State
 IN

 Zip Code
 46205

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, ORGANIZING & FIELD SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

676.94

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | | 3 | 0 | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.246012

Amount of Each Receipt this Period

85.59

Full Name (Last, First, Middle Initial)

C. MICHAEL J. FEDOR

Mailing Address 2340 Dewey Lane

 City
 Enola

 State
 PA

 Zip Code
 17025

 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 ▼

212.76

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | | 3 | 0 | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.246014

Amount of Each Receipt this Period

30.76

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

201.94

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

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

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

FOR LINE NUMBER: PAGE 72 OF 316

(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

Full Name (Last, First, Middle Initial)

A. RICHARD M. FELLER

Mailing Address 4705 Butterworth Place NW

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.58

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245814

Amount of Each Receipt this Period

56.94

Full Name (Last, First, Middle Initial)

B. RICHARD M. FELLER

Mailing Address 4705 Butterworth Place NW

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246015

Amount of Each Receipt this Period

56.94

Full Name (Last, First, Middle Initial)

C. JOHN J. FILAK Jr.

Mailing Address 6160 Clingan Road

City

Poland

State

OH

Zip Code

44514

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.29

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 03 / 2012

Transaction ID : SA11AI.247243

Amount of Each Receipt this Period

87.32

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

201.20

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

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

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

FOR LINE NUMBER: PAGE 73 OF 316

(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. DAVID FILLMAN

Mailing Address 2520 Helen Street

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Hatboro | PA | 19040 |

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.72

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 10 | / | 2012 |

Transaction ID : SA11AI.246933

Amount of Each Receipt this Period

142.18

Full Name (Last, First, Middle Initial)

B. DAVID FILLMAN

Mailing Address 2520 Helen Street

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Hatboro | PA | 19040 |

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.72

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 30 | / | 2012 |

Transaction ID : SA11AI.246177

Amount of Each Receipt this Period

14.00

Full Name (Last, First, Middle Initial)

C. 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 ▼

208.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 10 | / | 2012 |

Transaction ID : SA11AI.247899

Amount of Each Receipt this Period

52.00

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

208.18

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 74 OF 316
(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) A. CHRISTOPHER C. FLEMING</p> <p>Mailing Address 5729 Heritage Hill Court</p> <p>City State Zip Code Alexandria VA 22310</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT DIRECTOR MEDIA OUTREACH</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 296.03</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245815</p> <p>Amount of Each Receipt this Period 42.29</p> | |
| <p>Full Name (Last, First, Middle Initial) B. CHRISTOPHER C. FLEMING</p> <p>Mailing Address 5729 Heritage Hill Court</p> <p>City State Zip Code Alexandria VA 22310</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT DIRECTOR MEDIA OUTREACH</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 338.32</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246016</p> <p>Amount of Each Receipt this Period 42.29</p> | |
| <p>Full Name (Last, First, Middle Initial) C. NANETTE M. FOLSOM</p> <p>Mailing Address 5631 Swan Avenue ne</p> <p>City State Zip Code North Canton OH 44721</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 225.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246349</p> <p>Amount of Each Receipt this Period 25.00</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>109.58</p> | |
| <p>TOTAL 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 75 OF 316
(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) A. BENJAMIN FORSTENZER</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. C</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 ▼ 250.00</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 05 / 2012 Transaction ID : SA11AI.247651</p> <p>Amount of Each Receipt this Period 62.50</p> |
| <p>Full Name (Last, First, Middle Initial) B. JEFFREY S. FOWLER</p> <p>Mailing Address 7664 Hinton Avenue South Apt. #9</p> <p>City Cottage Grove State MN Zip Code 55016</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME MN CN 5/CN14 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 ▼ 217.75</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.247900</p> <p>Amount of Each Receipt this Period 54.44</p> |
| <p>Full Name (Last, First, Middle Initial) C. MICHAEL E. FOX</p> <p>Mailing Address 3818 Sheffield Lane</p> <p>City Harrisburg State PA Zip Code 17110-3044</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME PA CN 13 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 ▼ 725.43</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.246934</p> <p>Amount of Each Receipt this Period 171.81</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | 288.75 |
| <p>TOTAL This Period (last page this line number only)..... ▶</p> | | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 76 OF 316
(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

| | | |
|--|--|---|
| A. MICHAEL E. FOX Full Name (Last, First, Middle Initial) 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 795.43 | | Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.246178 Amount of Each Receipt this Period 70.00 |
| B. WALTER FRANCIS Full Name (Last, First, Middle Initial) Mailing Address 1002 Cypress Rd. City Wilmington State DE Zip Code 19810 FEC ID number of contributing federal political committee. C Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 246.08 | | Date of Receipt 04 / 10 / 2012 Transaction ID : SA11AI.246935 Amount of Each Receipt this Period 61.52 |
| C. JAMES E. FRYE Full Name (Last, First, Middle Initial) Mailing Address 11510 Waesche Drive City Bowie State MD Zip Code 20721 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation STAFF SPECIALIST II Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 239.75 | | Date of Receipt 04 / 13 / 2012 Transaction ID : SA11AI.245816 Amount of Each Receipt this Period 34.25 |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | 165.77 |
| 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 77 OF 316

(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

Full Name (Last, First, Middle Initial)

A. JAMES E. FRYE

Mailing Address 11510 Waesche Drive

City

Bowie

State

MD

Zip Code

20721

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 ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246017

Amount of Each Receipt this Period

34.25

Full Name (Last, First, Middle Initial)

B. MARK J. FRYMOYER

Mailing Address 518 Reuel Avenue

City

Kellogg

State

IA

Zip Code

50134

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
04 / 10 / 2012

Transaction ID : SA11AI.247596

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. BRIAN FUITEN

Mailing Address 445 Mayfair Drive

City

Lincoln

State

IL

Zip Code

62656

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IL CN 31

Occupation

DATA PROCESSING SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.50

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 02 / 2012

Transaction ID : SA11AI.247704

Amount of Each Receipt this Period

76.50

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

170.75

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER: PAGE 78 OF 316
 (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. SEAN FULKERSON
 Mailing Address 29 N. Wacker Drive
 Suite 800

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Chicago | IL | 60606 |

 FEC ID number of contributing
 federal political committee.

Name of Employer

AFSCME IL CN 31

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 02 | / | 2012 |

Transaction ID : SA11AI.247705

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER B. FULLER

Mailing Address 92 Wilber Avenue

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Columbus | OH | 43215 |

 FEC ID number of contributing
 federal political committee.

Name of Employer

AFSCME OH LOC 4/COLUMBUS CITY

Occupation

BUS DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 23 | / | 2012 |

Transaction ID : SA11AI.246856

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. AMY H. GALATIAN

Mailing Address 10925 Southern Highlands Parkway

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Las Vegas | NV | 89141 |

 FEC ID number of contributing
 federal political committee.

Name of Employer

AFSCME INT'L

Occupation

FIELD COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 13 | / | 2012 |

Transaction ID : SA11AI.245817

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: PAGE 79 OF 316

(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

Full Name (Last, First, Middle Initial)

A. AMY H. GALATIAN

Mailing Address 10925 Southern Highlands Parkway

City State Zip Code
 Las Vegas NV 89141

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.28

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11AI.246018

Amount of Each Receipt this Period

38.16

Full Name (Last, First, Middle Initial)

B. KERRI GALLAGHER

Mailing Address 8 South Main Street

City State Zip Code
 Mountain Top PA 18707

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.08

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 10 / 2012

Transaction ID : SA11AI.246936

Amount of Each Receipt this Period

61.52

Full Name (Last, First, Middle Initial)

C. JOHN GALUSKA

Mailing Address 205 Green Vista Drive

City State Zip Code
 Pittsburgh PA 15237

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.08

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 10 / 2012

Transaction ID : SA11AI.246937

Amount of Each Receipt this Period

61.52

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

161.20

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 80 OF 316

☒ 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) A. DEBRA L. GARCIA</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. C</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 ▼ 316.74</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245818</p> <p>Amount of Each Receipt this Period 55.90</p> | |
| <p>Full Name (Last, First, Middle Initial) B. DEBRA L. GARCIA</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. C</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 ▼ 372.64</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246019</p> <p>Amount of Each Receipt this Period 55.90</p> | |
| <p>Full Name (Last, First, Middle Initial) C. ALBERT GARRETT</p> <p>Mailing Address 18491 Lauder</p> <p>City State Zip Code Detroit MI 48235-2738</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 866.81</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 03 / 2012 Transaction ID : SA11AI.247503</p> <p>Amount of Each Receipt this Period 117.83</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>229.63</p> | |
| <p>TOTAL 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 81 OF 316

☒ 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) A. ALBERT GARRETT</p> <p>Mailing Address 18491 Lauder</p> <p>City State Zip Code Detroit MI 48235-2738</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 984.64</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 17 / 2012 Transaction ID : SA11AI.247553</p> <p>Amount of Each Receipt this Period 117.83</p> | |
| <p>Full Name (Last, First, Middle Initial) B. ALBERT GARRETT</p> <p>Mailing Address 18491 Lauder</p> <p>City State Zip Code Detroit MI 48235-2738</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 998.64</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246179</p> <p>Amount of Each Receipt this Period 14.00</p> | |
| <p>Full Name (Last, First, Middle Initial) C. DAVID GASH</p> <p>Mailing Address 226 Hartley Road</p> <p>City State Zip Code Hershey PA 17033</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 292.64</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.246938</p> <p>Amount of Each Receipt this Period 73.16</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>204.99</p> | |
| <p>TOTAL 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 82 OF 316

☒ 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. MONA L. GAYDEN

Mailing Address 4400 Telfair Blvd.
Unit 5051

City State Zip Code
Camp Springs MD 20746

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 ▼

207.68

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246020

Amount of Each Receipt this Period

25.96

Full Name (Last, First, Middle Initial)

B. RAGLAN GEORGE Jr.

Mailing Address 75 Varick Street
Suite #1404

City State Zip Code
New York NY 10013-9902

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME NY CN 1707

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.80

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 20 / 2012

Transaction ID : SA11AI.249410

Amount of Each Receipt this Period

95.76

Full Name (Last, First, Middle Initial)

C. RAGLAN GEORGE Jr.

Mailing Address 75 Varick Street
Suite #1404

City State Zip Code
New York NY 10013-9902

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME NY CN 1707

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

534.80

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246180

Amount of Each Receipt this Period

14.00

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

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

135.72

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

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

FOR LINE NUMBER: PAGE 83 OF 316
(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) A. THOMAS GIBBS</p> <p>Mailing Address 152 Upper Claar Rd.</p> <p>City Claysburg State PA Zip Code 16625</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 292.64</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.246939</p> <p>Amount of Each Receipt this Period 73.16</p> |
| <p>Full Name (Last, First, Middle Initial) B. KAREN GILGOFF</p> <p>Mailing Address 3003 Van Ness Street NW #W1023</p> <p>City Washington State DC Zip Code 20008</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASST. DIRECTOR, RETIREES PROGRAM</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 558.18</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245821</p> <p>Amount of Each Receipt this Period 79.74</p> |
| <p>Full Name (Last, First, Middle Initial) C. KAREN GILGOFF</p> <p>Mailing Address 3003 Van Ness Street NW #W1023</p> <p>City Washington State DC Zip Code 20008</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASST. DIRECTOR, RETIREES PROGRAM</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 637.92</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246022</p> <p>Amount of Each Receipt this Period 79.74</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | <p>232.64</p> |
| <p>TOTAL 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 84 OF 316
 (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. DOROTHY L. GILLIAM

Mailing Address 1216 Waterford Drive

City

District Heights

State

MD

Zip Code

20747

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ADMINISTRATIVE ASSISTANT II

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

263.06

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | | 13 | | 2012 |

Transaction ID : SA11AI.245822

Amount of Each Receipt this Period

37.58

Full Name (Last, First, Middle Initial)

B. DOROTHY L. GILLIAM

Mailing Address 1216 Waterford Drive

City

District Heights

State

MD

Zip Code

20747

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ADMINISTRATIVE ASSISTANT II

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.64

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | | 30 | | 2012 |

Transaction ID : SA11AI.246023

Amount of Each Receipt this Period

37.58

Full Name (Last, First, Middle Initial)

C. CHERYL A. GILMORE
Mailing Address 3320 6th Street SE
302

City

Washington

State

DC

Zip Code

20032

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ADMINISTRATIVE ASSISTANT II

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

261.79

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | | 13 | | 2012 |

Transaction ID : SA11AI.245824

Amount of Each Receipt this Period

34.08

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

109.24

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 85 OF 316

(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

Full Name (Last, First, Middle Initial)

A. CHERYL A. GILMORE

Mailing Address 3320 6th Street SE
 # 302

City State Zip Code
 Washington DC 20032

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 ▼

295.87

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11AI.246025

Amount of Each Receipt this Period

34.08

Full Name (Last, First, Middle Initial)

B. STEVE GIORGI

Mailing Address 8386 Gardenia Street

City State Zip Code
 Virginia MN 55792

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 65

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 09 / 2012

Transaction ID : SA11AI.249446

Amount of Each Receipt this Period

79.68

Full Name (Last, First, Middle Initial)

C. PATRICIA M. GLYNN

Mailing Address 55 Aberdeen Avenue

City State Zip Code
 Cambridge MA 02138-0000

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 ▼

323.82

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 13 / 2012

Transaction ID : SA11AI.245825

Amount of Each Receipt this Period

46.26

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

160.02

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

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

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

FOR LINE NUMBER: PAGE 86 OF 316

(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) A. PATRICIA M. GLYNN</p> <p>Mailing Address 55 Aberdeen Avenue</p> <p>City State Zip Code Cambridge MA 02138-0000</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 370.08</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246026</p> <p>Amount of Each Receipt this Period 46.26</p> | |
| <p>Full Name (Last, First, Middle Initial) B. MARK GOLDEN</p> <p>Mailing Address 74 Ice Pond Road</p> <p>City State Zip Code Levittown PA 19057</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 292.64</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.246940</p> <p>Amount of Each Receipt this Period 73.16</p> | |
| <p>Full Name (Last, First, Middle Initial) C. RICHARD GOLLIN</p> <p>Mailing Address 900 Randolph Place</p> <p>City State Zip Code Union NJ 07083-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME NJ CN 52 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 ▼ 465.68</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 20 / 2012 Transaction ID : SA11AI.244952</p> <p>Amount of Each Receipt this Period 105.92</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>225.34</p> | |
| <p>TOTAL 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 87 OF 316
(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

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. RICHARD GOLLIN | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246181 | |
| Mailing Address 900 Randolph Place City State Zip Code Union NJ 07083-0000 | | Amount of Each Receipt this Period 14.00 | |
| FEC ID number of contributing federal political committee. C | | | |
| 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 ▼ 479.68 | |
| Full Name (Last, First, Middle Initial) B. JAMES R. GOLLINGS Jr. | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 03 / 2012 Transaction ID : SA11AI.246232 | |
| Mailing Address 40 Rathbone City State Zip Code Columbus OH 43214 | | Amount of Each Receipt this Period 38.47 | |
| 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 ▼ 269.29 | |
| Full Name (Last, First, Middle Initial) C. JAMES R. GOLLINGS Jr. | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 16 / 2012 Transaction ID : SA11AI.246292 | |
| Mailing Address 40 Rathbone City State Zip Code Columbus OH 43214 | | Amount of Each Receipt this Period 38.47 | |
| 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 ▼ 307.76 | |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | 90.94 | |
| TOTAL This Period (last page this line number only)..... ▶ | | | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 88 OF 316

☒ 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) A. JAMES R. GOLLINGS Jr.</p> <p>Mailing Address 40 Rathbone</p> <p>City State Zip Code Columbus OH 43214</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 347.76</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 16 / 2012</p> <p>Transaction ID : SA11AI.246750</p> <p>Amount of Each Receipt this Period 40.00</p> | |
| <p>Full Name (Last, First, Middle Initial) B. JAMES R. GOLLINGS Jr.</p> <p>Mailing Address 40 Rathbone</p> <p>City State Zip Code Columbus OH 43214</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 386.23</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012</p> <p>Transaction ID : SA11AI.246351</p> <p>Amount of Each Receipt this Period 38.47</p> | |
| <p>Full Name (Last, First, Middle Initial) C. NATHAN GONGWER</p> <p>Mailing Address 223 W Washington Street</p> <p>City State Zip Code Loudonville OH 44842</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 216.44</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 06 / 2012</p> <p>Transaction ID : SA11AI.245092</p> <p>Amount of Each Receipt this Period 30.92</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>109.39</p> | |
| <p>TOTAL 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 89 OF 316

☒ 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. NATHAN GONGWER

Mailing Address 223 W Washington Street

City State Zip Code
Loudonville OH 44842

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 ▼

247.36

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 20 / 2012

Transaction ID : SA11AI.245472

Amount of Each Receipt this Period

30.92

Full Name (Last, First, Middle Initial)

B. 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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 25 / 2012

Transaction ID : SA11AI.245738

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. PATRICIA GORDON

Mailing Address 112 Chesbrough Road

City State Zip Code
West Roxbury MA 02132

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 ▼

203.20

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246027

Amount of Each Receipt this Period

25.40

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

116.32

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 90 OF 316

☒ 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) A. PERRY GORDON</p> <p>Mailing Address P.O. Box 1123</p> <p>City Roy State WA Zip Code 98580</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME WA CN 28 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 ▼ 250.00</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 11 / 2012 Transaction ID : SA11AI.249378</p> <p>Amount of Each Receipt this Period 64.00</p> |
| <p>Full Name (Last, First, Middle Initial) B. SHERRYL GORDON</p> <p>Mailing Address 3 Longwood Lane</p> <p>City Columbus State NJ Zip Code 08022-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME NJ CN 1 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 ▼ 274.80</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 25 / 2012 Transaction ID : SA11AI.249411</p> <p>Amount of Each Receipt this Period 58.20</p> |
| <p>Full Name (Last, First, Middle Initial) C. SHERRYL GORDON</p> <p>Mailing Address 3 Longwood Lane</p> <p>City Columbus State NJ Zip Code 08022-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME NJ CN 1 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 ▼ 288.80</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246182</p> <p>Amount of Each Receipt this Period 14.00</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> <p>TOTAL This Period (last page this line number only)..... ▶</p> | | <p>136.20</p> |

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 316

(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

Full Name (Last, First, Middle Initial)

A. ERIN GORMAN

Mailing Address 1212 Christopher Lane

City State Zip Code
 Springfield IL 62712

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IL CN 31

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.82

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 02 / 2012

Transaction ID : SA11AI.247708

Amount of Each Receipt this Period

74.94

Full Name (Last, First, Middle Initial)

B. JANE A. GRAFF

Mailing Address 433 Lighthouse Drive

City State Zip Code
 Vallejo CA 94590

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME CA CN 57/LOCAL 2620

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
 04 / 23 / 2012

Transaction ID : SA11AI.249488

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. STEPHEN M. GRAHAM

Mailing Address 10105 Baltimore Avenue
 Apt. 3407

City State Zip Code
 College Park MD 20740

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 ▼

351.59

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 13 / 2012

Transaction ID : SA11AI.245828

Amount of Each Receipt this Period

51.10

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

226.04

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 92 OF 316
 (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. STEPHEN M. GRAHAM | | 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>4</td><td></td> <td>3</td><td>0</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.246029 | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 3 | 0 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 4 | | 3 | 0 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | |
| Mailing Address 10105 Baltimore Avenue Apt. 3407 | | 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>51.10</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | 51.10 |
| | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 51.10 | | | | | | | | | | | | | | |
| City College Park State MD Zip Code 20740 | 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 | | | | | | | | | | | | | | | | | | | | | |
| C | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer AFSCME INT'L | Occupation ASSOCIATE DIRECTOR, ACCOUNTING | | | | | | | | | | | | | | | | | | | | | | |
| 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>402.69</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | 402.69 | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 402.69 | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) B. BONNIE L. GRANTZ | | 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>4</td><td></td> <td>0</td><td>3</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.246423 | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 0 | 3 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 4 | | 0 | 3 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | |
| Mailing Address 3898 Ascott 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>38.47</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | 38.47 |
| | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 38.47 | | | | | | | | | | | | | | |
| City Youngstown State OH Zip Code 44511 | 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 | | | | | | | | | | | | | | | | | | | | | |
| C | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer AFSCME OH LOC 4/AUSTINTOWN LSD | Occupation BUS DRIVER | | | | | | | | | | | | | | | | | | | | | | |
| 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>269.29</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | 269.29 | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 269.29 | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) C. BONNIE L. GRANTZ | | 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>4</td><td></td> <td>1</td><td>6</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.246567 | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 1 | 6 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 4 | | 1 | 6 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | |
| Mailing Address 3898 Ascott 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>38.47</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | 38.47 |
| | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 38.47 | | | | | | | | | | | | | | |
| City Youngstown State OH Zip Code 44511 | 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 | | | | | | | | | | | | | | | | | | | | | |
| C | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer AFSCME OH LOC 4/AUSTINTOWN LSD | Occupation BUS DRIVER | | | | | | | | | | | | | | | | | | | | | | |
| 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>307.76</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | 307.76 | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 307.76 | | | | | | | | | | | | | | |
| SUBTOTAL 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>128.04</td> </tr> </table> | | | | | | | | | | | 128.04 | | | | | | | | | | |
| | | | | | | | | | 128.04 | | | | | | | | | | | | | | |
| TOTAL 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 93 OF 316
(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

Full Name (Last, First, Middle Initial)

A. BONNIE L. GRANTZ

Mailing Address 3898 Ascott Court

City State Zip Code
Youngstown OH 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 ▼

346.23

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246680

Amount of Each Receipt this Period

38.47

Full Name (Last, First, Middle Initial)

B. ELIZABETH D. GRAY-LINDSLEY

Mailing Address 1302 4th Street SW

City State Zip Code
Washington DC 20024

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSIST DIRECTOR, CAPITAL STRATEGIES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

682.56

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245829

Amount of Each Receipt this Period

105.01

Full Name (Last, First, Middle Initial)

C. ELIZABETH D. GRAY-LINDSLEY

Mailing Address 1302 4th Street SW

City State Zip Code
Washington DC 20024

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSIST DIRECTOR, CAPITAL STRATEGIES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

787.57

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246030

Amount of Each Receipt this Period

105.01

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

248.49

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

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

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

FOR LINE NUMBER: PAGE 94 OF 316
(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) A. R. SEAN GRAYSON</p> <p>Mailing Address 10201 Galena Pointe 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. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH CN 8</td> <td style="width: 66%;">Occupation GENERAL COUNSEL</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 ▼ 317.31</p> | | | City Galena | State OH | Zip Code 43021 | Name of Employer AFSCME OH CN 8 | Occupation GENERAL COUNSEL | <p>Date of Receipt 04 / 03 / 2012 Transaction ID : SA11AI.247246</p> <p>Amount of Each Receipt this Period 106.30</p> | |
| City Galena | State OH | Zip Code 43021 | | | | | | | |
| Name of Employer AFSCME OH CN 8 | Occupation GENERAL COUNSEL | | | | | | | | |
| <p>Full Name (Last, First, Middle Initial) B. JONATHAN GREBNER</p> <p>Mailing Address 840 Randolph Avenue</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Saint Paul</td> <td style="width: 33%;">State MN</td> <td style="width: 33%;">Zip Code 55126</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME MN CN 5/CN14</td> <td style="width: 66%;">Occupation POLITICAL 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 ▼ 252.95</p> | | | City Saint Paul | State MN | Zip Code 55126 | Name of Employer AFSCME MN CN 5/CN14 | Occupation POLITICAL DIRECTOR | <p>Date of Receipt 04 / 10 / 2012 Transaction ID : SA11AI.247901</p> <p>Amount of Each Receipt this Period 63.24</p> | |
| City Saint Paul | State MN | Zip Code 55126 | | | | | | | |
| Name of Employer AFSCME MN CN 5/CN14 | Occupation POLITICAL DIRECTOR | | | | | | | | |
| <p>Full Name (Last, First, Middle Initial) C. RONALD J. GREEN</p> <p>Mailing Address 531 Park Shadow Court</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Baldwin Park</td> <td style="width: 33%;">State CA</td> <td style="width: 33%;">Zip Code 90706</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME CA CN 36/LOCAL 3634</td> <td style="width: 66%;">Occupation TRANSIT SUPERVISOR</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 ▼ 1500.00</p> | | | City Baldwin Park | State CA | Zip Code 90706 | Name of Employer AFSCME CA CN 36/LOCAL 3634 | Occupation TRANSIT SUPERVISOR | <p>Date of Receipt 04 / 13 / 2012 Transaction ID : SA11AI.249562</p> <p>Amount of Each Receipt this Period 300.00</p> | |
| City Baldwin Park | State CA | Zip Code 90706 | | | | | | | |
| Name of Employer AFSCME CA CN 36/LOCAL 3634 | Occupation TRANSIT SUPERVISOR | | | | | | | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> <p>TOTAL This Period (last page this line number only)..... ▶</p> | | | <p style="text-align: right;">469.54</p> | | | | | | |

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

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

FOR LINE NUMBER: PAGE 95 OF 316
(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

| | | | |
|--|--|--|--|
| A. STEVE GRETSUK Full Name (Last, First, Middle Initial) 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 573.58 | | | Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245831 Amount of Each Receipt this Period 81.94 |
| B. STEVE GRETSUK Full Name (Last, First, Middle Initial) 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 655.52 | | | Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246032 Amount of Each Receipt this Period 81.94 |
| C. KIMBERLY GRIFFIN Full Name (Last, First, Middle Initial) Mailing Address 4109 Silver Park Terrace City Suitland State MD Zip Code 20746 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation ADMINISTRATIVE ASSISTANT II Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 238.56 | | | Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245832 Amount of Each Receipt this Period 34.08 |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | | 197.96 |
| TOTAL This Period (last page this line number only)..... ▶ | | | |

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

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

FOR LINE NUMBER: PAGE 96 OF 316

(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

Full Name (Last, First, Middle Initial)

A. KIMBERLY GRIFFIN

Mailing Address 4109 Silver Park Terrace

City

State

Zip Code

Suitland

MD

20746

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

AFSCME INT'L

ADMINISTRATIVE ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246033

Amount of Each Receipt this Period

34.08

Full Name (Last, First, Middle Initial)

B. LYLE B GRIMES

Mailing Address P.O. Box 9432

City

State

Zip Code

Bridge City

LA

70096

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

AFSCME INT'L

ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.97

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245833

Amount of Each Receipt this Period

31.81

Full Name (Last, First, Middle Initial)

C. LYLE B GRIMES

Mailing Address P.O. Box 9432

City

State

Zip Code

Bridge City

LA

70096

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

AFSCME INT'L

ORGANIZER II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.78

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246034

Amount of Each Receipt this Period

31.81

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

97.70

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 97 OF 316

☒ 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. OTTO GROENEWALD

Mailing Address Route 9 Box 154

City

Bloomfield

State

IA

Zip Code

52537

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IA CN 61

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.247598

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

B. 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 ▼

292.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.246942

Amount of Each Receipt this Period

73.16

Full Name (Last, First, Middle Initial)

C. ROGER B. HALLUM

Mailing Address 5136 Edgeview Road

City

Columbus

State

OH

Zip Code

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 ▼

208.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246682

Amount of Each Receipt this Period

41.67

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

174.83

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 Page

FOR LINE NUMBER: PAGE 98 OF 316
(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) A. TOMIKA C, HALSEY</p> <p>Mailing Address 1731 E 87th Court</p> <p>City State Zip Code Merrillville IN 46410</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 221.20</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245834</p> <p>Amount of Each Receipt this Period 31.60</p> | |
| <p>Full Name (Last, First, Middle Initial) B. TOMIKA C, HALSEY</p> <p>Mailing Address 1731 E 87th Court</p> <p>City State Zip Code Merrillville IN 46410</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 252.80</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246035</p> <p>Amount of Each Receipt this Period 31.60</p> | |
| <p>Full Name (Last, First, Middle Initial) C. KEVIN S. HANES</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. C</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 ▼ 209.50</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245835</p> <p>Amount of Each Receipt this Period 29.94</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>93.14</p> | |
| <p>TOTAL 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 99 OF 316

(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) A. KEVIN S. HANES</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. C</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 ▼ 239.44</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246036</p> <p>Amount of Each Receipt this Period 29.94</p> | |
| <p>Full Name (Last, First, Middle Initial) B. RYAN HANSON</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. C</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 ▼ 217.74</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.247903</p> <p>Amount of Each Receipt this Period 54.44</p> | |
| <p>Full Name (Last, First, Middle Initial) C. YVONNE J. HARGROVE</p> <p>Mailing Address 12832 Evansport PI</p> <p>City State Zip Code Woodbridge VA 22192</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ADMINISTRATIVE 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 ▼ 248.15</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245836</p> <p>Amount of Each Receipt this Period 35.45</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>119.83</p> | |
| <p>TOTAL 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 100 OF 316
 (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. YVONNE J. HARGROVE | | | Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>30</td> <td></td> <td>2012</td> </tr> </table> Transaction ID : SA11AI.246037 | | | M M | / | D D | / | Y Y Y Y Y Y | 04 | | 30 | | 2012 |
| M M | / | D D | / | Y Y Y Y Y Y | | | | | | | | | | | |
| 04 | | 30 | | 2012 | | | | | | | | | | | |
| Mailing Address 12832 Evansport Pl City Woodbridge State VA Zip Code 22192 | | | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">35.45</td> </tr> </table> | | | 35.45 | | | | | | | | | |
| 35.45 | | | | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. C | | | | | | | | | | | | | | | |
| Name of Employer AFSCME INT'L | | Occupation ADMINISTRATIVE ASSISTANT I | | | | | | | | | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="5">283.60</td> </tr> </table> | | | | 283.60 | | | | | | | | | |
| 283.60 | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) B. LORA HARRIS | | | Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>02</td> <td></td> <td>2012</td> </tr> </table> Transaction ID : SA11AI.247710 | | | M M | / | D D | / | Y Y Y Y Y Y | 04 | | 02 | | 2012 |
| M M | / | D D | / | Y Y Y Y Y Y | | | | | | | | | | | |
| 04 | | 02 | | 2012 | | | | | | | | | | | |
| Mailing Address 265 Forest Blvd City Park Forest State IL Zip Code 60466-1750 | | | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">70.76</td> </tr> </table> | | | 70.76 | | | | | | | | | |
| 70.76 | | | | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. C | | | | | | | | | | | | | | | |
| Name of Employer AFSCME IL CN 31 | | Occupation STAFF REPRESENTATIVE | | | | | | | | | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="5">212.28</td> </tr> </table> | | | | 212.28 | | | | | | | | | |
| 212.28 | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) C. LOUIS HARRIS | | | Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>13</td> <td></td> <td>2012</td> </tr> </table> Transaction ID : SA11AI.249534 | | | M M | / | D D | / | Y Y Y Y Y Y | 04 | | 13 | | 2012 |
| M M | / | D D | / | Y Y Y Y Y Y | | | | | | | | | | | |
| 04 | | 13 | | 2012 | | | | | | | | | | | |
| Mailing Address 1516 172nd Street East City Spanaway State WA Zip Code 98387 | | | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">65.70</td> </tr> </table> | | | 65.70 | | | | | | | | | |
| 65.70 | | | | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. C | | | | | | | | | | | | | | | |
| Name of Employer AFSCME CA CN 36 | | 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 colspan="5">262.80</td> </tr> </table> | | | | 262.80 | | | | | | | | | |
| 262.80 | | | | | | | | | | | | | | | |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | | <table border="1"> <tr> <td colspan="5">171.91</td> </tr> </table> | | | 171.91 | | | | | | | | | |
| 171.91 | | | | | | | | | | | | | | | |
| TOTAL This Period (last page this line number only)..... ▶ | | | <table border="1"> <tr> <td colspan="5"></td> </tr> </table> | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 101 OF 316

☒ 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. SHARON L. HARRIS

Mailing Address 677 E. 4th Avenue

City State Zip Code
Columbus OH 43201

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4/COLUMBUS CITY

Occupation
BUS DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 23 / 2012

Transaction ID : SA11AI.246859

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. STEPHANIE HARRISON

Mailing Address 7824 Main Falls Creek

City State Zip Code
Catonsville MD 21228

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation
DIRECTOR, HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245839

Amount of Each Receipt this Period

62.60

Full Name (Last, First, Middle Initial)

C. STEPHANIE HARRISON

Mailing Address 7824 Main Falls Creek

City State Zip Code
Catonsville MD 21228

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation
DIRECTOR, HUMAN RESOURCES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246040

Amount of Each Receipt this Period

62.60

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

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

150.20

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

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

FOR LINE NUMBER:
(check only one)

PAGE 102 OF 316

☒ 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) A. RAYDENE HARWICK</p> <p>Mailing Address 2101-27 Hill Road Apt. #1</p> <p>City Sellersville State PA Zip Code 18960</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 226.80</p> | | | <p>Date of Receipt 04 / 10 / 2012</p> <p>Transaction ID : SA11AI.246943</p> <p>Amount of Each Receipt this Period 56.70</p> | |
| <p>Full Name (Last, First, Middle Initial) B. ELIZABETH HASTINGS</p> <p>Mailing Address 5225 N. Rivers Edge Terrace #204</p> <p>City Chicago State IL Zip Code 60630</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME IL CN 31 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 ▼ 212.28</p> | | | <p>Date of Receipt 04 / 02 / 2012</p> <p>Transaction ID : SA11AI.247711</p> <p>Amount of Each Receipt this Period 70.76</p> | |
| <p>Full Name (Last, First, Middle Initial) C. JIMMIE HEARNS</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. C</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 ▼ 253.47</p> | | | <p>Date of Receipt 04 / 03 / 2012</p> <p>Transaction ID : SA11AI.247509</p> <p>Amount of Each Receipt this Period 36.21</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | 163.67 | |
| <p>TOTAL 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 103 OF 316

☒ 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. 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 ▼

289.68

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 17 / 2012

Transaction ID : SA11AI.247558

Amount of Each Receipt this Period

36.21

Full Name (Last, First, Middle Initial)

B. PHILIP W. HELMS

Mailing Address 4108 Menton

City State Zip Code
 Flint MI 48507

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

EDITOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 03 / 2012

Transaction ID : SA11AI.247510

Amount of Each Receipt this Period

54.31

Full Name (Last, First, Middle Initial)

C. PHILIP W. HELMS

Mailing Address 4108 Menton

City State Zip Code
 Flint MI 48507

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

EDITOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

434.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 17 / 2012

Transaction ID : SA11AI.247559

Amount of Each Receipt this Period

54.31

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

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

144.83

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 104 OF 316

☒ 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) A. DAVID J. HENDERSON</p> <p>Mailing Address 2040 Spring Valley Road</p> <p>City State Zip Code Pittsburgh PA 15243-1422</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 458.16</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.246945</p> <p>Amount of Each Receipt this Period 114.54</p> | |
| <p>Full Name (Last, First, Middle Initial) B. KAY HENDERSON</p> <p>Mailing Address 624 S. Winnifred Street</p> <p>City State Zip Code Tacoma WA 98465</p> <p>FEC ID number of contributing federal political committee. C</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 04 / 10 / 2012 Transaction ID : SA11AI.248842</p> <p>Amount of Each Receipt this Period 30.00</p> | |
| <p>Full Name (Last, First, Middle Initial) C. KAY HENDERSON</p> <p>Mailing Address 624 S. Winnifred Street</p> <p>City State Zip Code Tacoma WA 98465</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 240.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 25 / 2012 Transaction ID : SA11AI.249140</p> <p>Amount of Each Receipt this Period 30.00</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>174.54</p> | |
| <p>TOTAL 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 105 OF 316

☒ 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) A. RICK HENSON</p> <p>Mailing Address 317 South F Street</p> <p>City Springfield State OR Zip Code 97477</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OR CN 75 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 ▼ 340.00</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.249567</p> <p>Amount of Each Receipt this Period 85.00</p> |
| <p>Full Name (Last, First, Middle Initial) B. ERIC D. HERTZOG</p> <p>Mailing Address 141 174th Street E.</p> <p>City Spanaway State WA Zip Code 98387</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 216.00</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 25 / 2012 Transaction ID : SA11AI.249145</p> <p>Amount of Each Receipt this Period 27.00</p> |
| <p>Full Name (Last, First, Middle Initial) C. DENNIS HILL</p> <p>Mailing Address 4 Hickory Street</p> <p>City Farmington State MN Zip Code 55024-9124</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 450.00</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 25 / 2012 Transaction ID : SA11AI.248202</p> <p>Amount of Each Receipt this Period 100.00</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | <p>212.00</p> |
| <p>TOTAL 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 106 OF 316
(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) A. KEVIN E. HILL</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. C</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 ▼ 316.68</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245844 </p> <p>Amount of Each Receipt this Period 50.00</p> |
| <p>Full Name (Last, First, Middle Initial) B. KEVIN E. HILL</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. C</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 ▼ 366.68</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246045 </p> <p>Amount of Each Receipt this Period 50.00</p> |
| <p>Full Name (Last, First, Middle Initial) C. SEAN HINGA</p> <p>Mailing Address 3137 Fulton Street</p> <p>City State Zip Code Denver CO 80238</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 266.77</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245845 </p> <p>Amount of Each Receipt this Period 38.11</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | 138.11 |
| <p>TOTAL 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 107 OF 316
(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

Full Name (Last, First, Middle Initial)

A. 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 ▼

304.97

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11AI.246046

Amount of Each Receipt this Period

86.00 38.20

Full Name (Last, First, Middle Initial)

B. CATHERINE E. HIRSCHMAN

Mailing Address 609 Euclid

City State Zip Code
 Cherokee IA 51012

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IOWA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.16

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 23 / 2012

Transaction ID : SA11AI.247615

Amount of Each Receipt this Period

30.88

Full Name (Last, First, Middle Initial)

C. SAMUEL L. HISLE

Mailing Address 3660 Third Avenue

City State Zip Code
 Grove City OH 43123

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/COLUMBUS CITY

Occupation

CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 23 / 2012

Transaction ID : SA11AI.246860

Amount of Each Receipt this Period

25.00

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

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

94.08

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 108 OF 316

☒ 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) A. ELIZABETH C. HO</p> <p>Mailing Address 1511 Kalaniewai Street</p> <p>City Honolulu State HI Zip Code 96821</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 323.82</p> | | | <p>Date of Receipt 04 / 13 / 2012 Transaction ID : SA11AI.245847 </p> <p>Amount of Each Receipt this Period 46.26 </p> | | |
| <p>Full Name (Last, First, Middle Initial) B. ELIZABETH C. HO</p> <p>Mailing Address 1511 Kalaniewai Street</p> <p>City Honolulu State HI Zip Code 96821</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 370.08</p> | | | <p>Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.246048 </p> <p>Amount of Each Receipt this Period 46.26 </p> | | |
| <p>Full Name (Last, First, Middle Initial) C. MARGARET HOAK</p> <p>Mailing Address P.O. Box 264</p> <p>City Warren State PA Zip Code 16365</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 298.08</p> | | | <p>Date of Receipt 04 / 10 / 2012 Transaction ID : SA11AI.246947 </p> <p>Amount of Each Receipt this Period 74.52 </p> | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>167.04</p> | | |
| <p>TOTAL 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 109 OF 316

☒ 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. 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 ▼

292.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.246948

Amount of Each Receipt this Period

73.16

Full Name (Last, First, Middle Initial)

B. JOHN HOHLHEPP

Mailing Address 615 S. 2nd Street

City

Springfield

State

IL

Zip Code

62705

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IL CN 31

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.22

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 02 / 2012

Transaction ID : SA11AI.247712

Amount of Each Receipt this Period

67.74

Full Name (Last, First, Middle Initial)

C. KAREN S HOLDRIDGE

Mailing Address 3511 Huntingbrook Drive
#207

City

Columbus

State

OH

Zip Code

43213

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/COLUMBUS CITY

Occupation

BUS DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 23 / 2012

Transaction ID : SA11AI.246861

Amount of Each Receipt this Period

25.00

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

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

165.90

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

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

FOR LINE NUMBER:
(check only one)

PAGE 110 OF 316

☒ 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) A. DANNY J. HOMAN</p> <p>Mailing Address 3000 Isabella</p> <p>City State Zip Code Sioux City IA 51103-2134</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IA CN 61 PRESIDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 530.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.247601</p> <p>Amount of Each Receipt this Period 80.00</p> | |
| <p>Full Name (Last, First, Middle Initial) B. DANNY J. HOMAN</p> <p>Mailing Address 3000 Isabella</p> <p>City State Zip Code Sioux City IA 51103-2134</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IA CN 61 PRESIDENT</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 04 / 30 / 2012 Transaction ID : SA11AI.246185</p> <p>Amount of Each Receipt this Period 70.00</p> | |
| <p>Full Name (Last, First, Middle Initial) C. TIMOTHY M. HOSHAL</p> <p>Mailing Address P.O. Box 239</p> <p>City State Zip Code Coleraine MN 55722</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 263.52</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 09 / 2012 Transaction ID : SA11AI.249447</p> <p>Amount of Each Receipt this Period 65.88</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>215.88</p> | |
| <p>TOTAL 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 111 OF 316

☒ 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) A. CHRISTINE R. HOSKINS</p> <p>Mailing Address 8306 James Street</p> <p>City State Zip Code Upper Marlboro MD 20772</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 275.10</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245848</p> <p>Amount of Each Receipt this Period 39.30</p> | | |
| <p>Full Name (Last, First, Middle Initial) B. CHRISTINE R. HOSKINS</p> <p>Mailing Address 8306 James Street</p> <p>City State Zip Code Upper Marlboro MD 20772</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 314.40</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246049</p> <p>Amount of Each Receipt this Period 39.30</p> | | |
| <p>Full Name (Last, First, Middle Initial) C. JACK E. HUGHES</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. C</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 ▼ 203.36</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 05 / 2012 Transaction ID : SA11AI.247655</p> <p>Amount of Each Receipt this Period 50.84</p> | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>129.44</p> | | |
| <p>TOTAL 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 112 OF 316

☒ 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) A. JEFFREY HUGHES</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. C</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 ▼ 227.36</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 05 / 2012 Transaction ID : SA11AI.247656</p> <p>Amount of Each Receipt this Period 56.84</p> |
| <p>Full Name (Last, First, Middle Initial) B. CHUNG HUI</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. C</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 ▼ 289.31</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245850</p> <p>Amount of Each Receipt this Period 41.33</p> |
| <p>Full Name (Last, First, Middle Initial) C. CHUNG HUI</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. C</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 ▼ 330.64</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246051</p> <p>Amount of Each Receipt this Period 41.33</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | 139.50 |
| <p>TOTAL 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 113 OF 316

☒ 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) A. CARLA INSINGA-MINSER</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. C</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 ▼ 388.88</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.246949</p> <p>Amount of Each Receipt this Period 97.22</p> | |
| <p>Full Name (Last, First, Middle Initial) B. ANNE IRVING</p> <p>Mailing Address 5243 N. Lind Avenue</p> <p>City State Zip Code Chicago IL 60630</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IL CN 31 DIRECTOR OF PUBLIC POLICY</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.02</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247716</p> <p>Amount of Each Receipt this Period 73.34</p> | |
| <p>Full Name (Last, First, Middle Initial) C. WILLIAM ISLER</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. C</p> <p>Name of Employer Occupation AFSCME INT'L ASST DIRECTOR, 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 ▼ 297.64</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245851</p> <p>Amount of Each Receipt this Period 42.52</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>213.08</p> | |
| <p>TOTAL 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 114 OF 316

☒ 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) A. WILLIAM ISLER</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. C</p> <p>Name of Employer Occupation AFSCME INT'L ASST DIRECTOR, 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 ▼ 340.16</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246052</p> <p>Amount of Each Receipt this Period 42.52</p> | |
| <p>Full Name (Last, First, Middle Initial) B. JUSTUS JAMES</p> <p>Mailing Address 1705 Platt Court</p> <p>City State Zip Code Allentown PA 18104</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 246.08</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.246950</p> <p>Amount of Each Receipt this Period 61.52</p> | |
| <p>Full Name (Last, First, Middle Initial) C. EDWIN S. JAYNE</p> <p>Mailing Address 3304 Alabama Avenue</p> <p>City State Zip Code Alexandria VA 22305</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSOCIATE DIRECTOR, LEGISLATION</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 398.58</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245853</p> <p>Amount of Each Receipt this Period 56.94</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>160.98</p> | |
| <p>TOTAL This Period (last page this line number only)..... ▶</p> | | | | |

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

PAGE 115 OF 316

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <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. EDWIN S. JAYNE

Mailing Address 3304 Alabama Avenue

City

Alexandria

State

VA

Zip Code

22305

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, LEGISLATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.52

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 3 | 0 | | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.246054

Amount of Each Receipt this Period

56.94

Full Name (Last, First, Middle Initial)

B. PAMELA L. JENKINS

Mailing Address 47604 Sandbank Square

City

Sterling

State

VA

Zip Code

20165

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.88

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 3 | | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.245854

Amount of Each Receipt this Period

50.84

Full Name (Last, First, Middle Initial)

C. PAMELA L. JENKINS

Mailing Address 47604 Sandbank Square

City

Sterling

State

VA

Zip Code

20165

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.72

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 3 | 0 | | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.246055

Amount of Each Receipt this Period

50.84

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

158.62

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 116 OF 316

(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) A. FRANK X. JEREZ</p> <p>Mailing Address 460 Center Street Apt. #3</p> <p>City Nutley State NJ Zip Code 07110-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation 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 ▼ 319.66</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245855</p> <p>Amount of Each Receipt this Period 41.38</p> |
| <p>Full Name (Last, First, Middle Initial) B. FRANK X. JEREZ</p> <p>Mailing Address 460 Center Street Apt. #3</p> <p>City Nutley State NJ Zip Code 07110-0000</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation 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 ▼ 361.04</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246056</p> <p>Amount of Each Receipt this Period 41.38</p> |
| <p>Full Name (Last, First, Middle Initial) C. SETH M JOHNSON</p> <p>Mailing Address 1311 Delaware Avenue SW #S-841</p> <p>City Washington State DC Zip Code 20024</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASSISTANT 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 ▼ 706.43</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245856</p> <p>Amount of Each Receipt this Period 102.20</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | 184.96 |
| <p>TOTAL 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

| | 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 |
|--|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|----|
|--|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|----|

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

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

FOR LINE NUMBER:
(check only one)

PAGE 118 OF 316

☒ 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. TERRA F. JOHNSON

Mailing Address 807 Nome Avenue

City State Zip Code
 Akron OH 44320

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/AKRON SUMMIT

Occupation

TEACHER AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.56

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 23 / 2012

Transaction ID : SA11AI.246637

Amount of Each Receipt this Period

26.32

Full Name (Last, First, Middle Initial)

B. WINSTON JOHNSON

Mailing Address 14574 Longacre

City State Zip Code
 Detroit MI 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 ▼

203.84

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 03 / 2012

Transaction ID : SA11AI.247513

Amount of Each Receipt this Period

29.12

Full Name (Last, First, Middle Initial)

C. WINSTON JOHNSON

Mailing Address 14574 Longacre

City State Zip Code
 Detroit MI 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 ▼

232.96

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 17 / 2012

Transaction ID : SA11AI.247562

Amount of Each Receipt this Period

29.12

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

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

84.56

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

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

FOR LINE NUMBER: PAGE 119 OF 316
(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) A. JOANN JOHNTONY</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. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/GIRARD CSD CUSTODIAN</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 213.16</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246693</p> <p>Amount of Each Receipt this Period 19.24</p> | | |
| <p>Full Name (Last, First, Middle Initial) B. STEVEN JOINER</p> <p>Mailing Address 247 Maple Street</p> <p>City State Zip Code Chester IL 62233</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IL CN 31 CONTRACT ADMINISTRATOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 209.28</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247717</p> <p>Amount of Each Receipt this Period 69.76</p> | | |
| <p>Full Name (Last, First, Middle Initial) C. MICHAEL J. JONES</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. C</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 ▼ 374.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 25 / 2012 Transaction ID : SA11AI.245743</p> <p>Amount of Each Receipt this Period 68.00</p> | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>157.00</p> | | |
| <p>TOTAL 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 120 OF 316

☒ 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. JAMIE A. JORDAN

Mailing Address 11522 ST. Route 588

City

Bidwell

State

OH

Zip Code

45614

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/GALLIPOLIS CITY

Occupation

CUSTODIAN

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.16

Date of Receipt

04 / 30 / 2012

Transaction ID : SA11AI.246694

Amount of Each Receipt this Period

19.24

Full Name (Last, First, Middle Initial)

B. CHARLES JURGONIS

Mailing Address 11704 Bobs Ford Road

City

Fairfax

State

VA

Zip Code

22030

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, FINANCIAL SERVICES

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.16

Date of Receipt

04 / 13 / 2012

Transaction ID : SA11AI.245858

Amount of Each Receipt this Period

163.88

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

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1311.04

Date of Receipt

04 / 30 / 2012

Transaction ID : SA11AI.246059

Amount of Each Receipt this Period

163.88

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

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

347.00

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 121 OF 316

☒ 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) A. STUART KATZENBERG</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. C</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 ▼ 223.36</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 05 / 2012 Transaction ID : SA11AI.247660</p> <p>Amount of Each Receipt this Period 55.84</p> |
| <p>Full Name (Last, First, Middle Initial) B. JASON KAY</p> <p>Mailing Address 2000 Cleveland</p> <p>City Evanston State IL Zip Code 60202</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME IL CN 31 Occupation POLITICAL ACTION DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.02</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247718</p> <p>Amount of Each Receipt this Period 73.34</p> |
| <p>Full Name (Last, First, Middle Initial) C. ALAN E. KEARNEY</p> <p>Mailing Address 9254 Highland Creek Road</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 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 ▼ 241.36</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.247905</p> <p>Amount of Each Receipt this Period 60.34</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | 189.52 |
| <p>TOTAL 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 122 OF 316

☒ 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. 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
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

206.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.247906

Amount of Each Receipt this Period

51.70

Full Name (Last, First, Middle Initial)

B. 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 ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2012

Transaction ID : SA11AI.249507

Amount of Each Receipt this Period

24.00

Full Name (Last, First, Middle Initial)

C. 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 ▼

284.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.247907

Amount of Each Receipt this Period

71.12

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

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

146.82

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

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

FOR LINE NUMBER:
(check only one)

PAGE 123 OF 316

☒ 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. GREGORY J. KING

Mailing Address 147 W Linvale Street

City
Baltimore

State Zip Code
MD 21217

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, COMMUNICATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.58

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245860

Amount of Each Receipt this Period

56.94

Full Name (Last, First, Middle Initial)

B. GREGORY J. KING

Mailing Address 147 W Linvale Street

City
Baltimore

State Zip Code
MD 21217

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, COMMUNICATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.52

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246061

Amount of Each Receipt this Period

56.94

Full Name (Last, First, Middle Initial)

C. CAROLYN KLINGLESMTIH

Mailing Address 2812 Windsor Forest Drive

City
Louisville

State Zip Code
KY 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 ▼

507.20

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245861

Amount of Each Receipt this Period

103.09

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

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

216.97

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 124 OF 316
(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

| | | |
|--|--|---|
| A. CAROLYN KLINGLESMTIH Full Name (Last, First, Middle Initial) Mailing Address 2812 Windsor Forest Drive City Louisville State KY Zip Code 40272 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation AREA ORGANIZING DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 610.29 | | Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246062 Amount of Each Receipt this Period 103.09 |
| B. BRIAN W. KLOPP Full Name (Last, First, Middle Initial) Mailing Address 6711 Queens Chapel Road City University Park State MD Zip Code 20782 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation LABOR ECONOMIST III Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 281.61 | | Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245862 Amount of Each Receipt this Period 40.23 |
| C. BRIAN W. KLOPP Full Name (Last, First, Middle Initial) Mailing Address 6711 Queens Chapel Road City University Park State MD Zip Code 20782 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation LABOR ECONOMIST III Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 321.84 | | Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246063 Amount of Each Receipt this Period 40.23 |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | 183.55 |
| TOTAL This Period (last page this line number only)..... ▶ | | |

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

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

FOR LINE NUMBER: PAGE 125 OF 316
(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) A. NANCY KNEPP</p> <p>Mailing Address 22 Edgewood Drive</p> <p>City Mechanicsburg State PA Zip Code 17055</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 292.64</p> | | | <p>Date of Receipt 04 / 10 / 2012 Transaction ID : SA11AI.246951 </p> <p>Amount of Each Receipt this Period 73.16 </p> | |
| <p>Full Name (Last, First, Middle Initial) B. MARCIA R. KNOX</p> <p>Mailing Address 1660 Newton Avenue</p> <p>City Dayton State OH Zip Code 45406-4110</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 279.41</p> | | | <p>Date of Receipt 04 / 03 / 2012 Transaction ID : SA11AI.247251 </p> <p>Amount of Each Receipt this Period 88.56 </p> | |
| <p>Full Name (Last, First, Middle Initial) C. MARCIA R. KNOX</p> <p>Mailing Address 1660 Newton Avenue</p> <p>City Dayton State OH Zip Code 45406-4110</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 284.41</p> | | | <p>Date of Receipt 04 / 16 / 2012 Transaction ID : SA11AI.247290 </p> <p>Amount of Each Receipt this Period 5.00 </p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>166.72</p> | |
| <p>TOTAL 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 316

☒ 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. STEVE KOFFROTH

Mailing Address 17824 Autry Ct

City

Chino Hills

State

CA

Zip Code

91709

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME CA CN 36

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.249535

Amount of Each Receipt this Period

62.40

Full Name (Last, First, Middle Initial)

B. KERRY KORPI

Mailing Address 8913 First Avenue

City

Silver Spring

State

MD

Zip Code

20910

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, RESEARCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245863

Amount of Each Receipt this Period

72.96

Full Name (Last, First, Middle Initial)

C. KERRY KORPI

Mailing Address 8913 First Avenue

City

Silver Spring

State

MD

Zip Code

20910

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, RESEARCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.68

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246064

Amount of Each Receipt this Period

72.96

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

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

208.32

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 316
(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) A. STEVEN KREISBERG</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. C</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 ▼ 398.58</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245864</p> <p>Amount of Each Receipt this Period 56.94</p> | | |
| <p>Full Name (Last, First, Middle Initial) B. STEVEN KREISBERG</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. C</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 ▼ 455.52</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246065</p> <p>Amount of Each Receipt this Period 56.94</p> | | |
| <p>Full Name (Last, First, Middle Initial) C. BARBARA KREMP</p> <p>Mailing Address 302 Donnelly Avenue</p> <p>City State Zip Code Aston PA 19014</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 292.64</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.246952</p> <p>Amount of Each Receipt this Period 73.16</p> | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>187.04</p> | | |
| <p>TOTAL 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 128 OF 316
(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

| | | | | |
|---|--|--|--|--|
| A. RONALD D. KUCHLER Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 3019 City Port Angeles State WA Zip Code 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: <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 Y 04 / 10 / 2012 Transaction ID : SA11AI.248870 Amount of Each Receipt this Period 35.00 | |
| B. RONALD D. KUCHLER Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 3019 City Port Angeles State WA Zip Code 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00 | | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 25 / 2012 Transaction ID : SA11AI.249167 Amount of Each Receipt this Period 35.00 | |
| C. JAMIE G. KUHNER Full Name (Last, First, Middle Initial) Mailing Address 390 Worthington Road City Westerville State OH Zip Code 43082 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 11 Occupation STAFF REPRESENTATIVE Receipt For: <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 Y 04 / 25 / 2012 Transaction ID : SA11AI.245746 Amount of Each Receipt this Period 40.00 | |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | | 110.00 | |
| TOTAL This Period (last page this line number only)..... ▶ | | | | |

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

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

FOR LINE NUMBER: PAGE 129 OF 316

(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

Full Name (Last, First, Middle Initial)

A. RANDALL KURTZ

Mailing Address 8019 64th Drive NE

City
Marysville

State Zip Code
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 ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.248871

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. RANDALL KURTZ

Mailing Address 8019 64th Drive NE

City
Marysville

State Zip Code
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 ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 25 / 2012

Transaction ID : SA11AI.249168

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. PATRICIA K. KWIATKOWSKI

Mailing Address 17420 Aquasco Farm Road

City
Aquasco

State Zip Code
MD 20608

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation
EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.35

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245865

Amount of Each Receipt this Period

39.05

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

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

119.05

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

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

FOR LINE NUMBER: PAGE 130 OF 316
(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) A. PATRICIA K. KWIATKOWSKI</p> <p>Mailing Address 17420 Aquasco Farm Road</p> <p>City Aquasco State MD Zip Code 20608</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 312.40</p> | | | <p>Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.246066</p> <p>Amount of Each Receipt this Period 39.05</p> | |
| <p>Full Name (Last, First, Middle Initial) B. FRANCIS M. LALLY III</p> <p>Mailing Address 5 Vansant Rd., Deacon's Walk</p> <p>City Newark State DE Zip Code 19711</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME DE CN 81 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 ▼ 264.76</p> | | | <p>Date of Receipt 04 / 09 / 2012 Transaction ID : SA11AI.249415</p> <p>Amount of Each Receipt this Period 64.70</p> | |
| <p>Full Name (Last, First, Middle Initial) C. JOSE A. LALUZ JR.</p> <p>Mailing Address 16 E 98 Street Apt. 6F</p> <p>City New York State NY Zip Code 10029</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 421.33</p> | | | <p>Date of Receipt 04 / 13 / 2012 Transaction ID : SA11AI.245866</p> <p>Amount of Each Receipt this Period 60.19</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>163.94</p> | |
| <p>TOTAL 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 131 OF 316

(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. JOSE A. LALUZ JR.
 Mailing Address 16 E 98 Street
 Apt. 6F

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| New York | NY | 10029 |

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.52

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 30 | / | 2012 |

Transaction ID : SA11AI.246067

Amount of Each Receipt this Period

60.19

Full Name (Last, First, Middle Initial)

B. MATTHEW L. LAPIERRE

Mailing Address 1173 Regent Drive

| | | |
|-----------|-------|------------|
| City | State | Zip Code |
| Mundelein | IL | 60060-2000 |

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME IL CN 31

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.28

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 02 | / | 2012 |

Transaction ID : SA11AI.247720

Amount of Each Receipt this Period

69.76

Full Name (Last, First, Middle Initial)

C. RHONDA L LATHON

Mailing Address 8446 Oak Bush Terrace

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Columbia | MD | 21045 |

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

BUSINESS ANALYST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 13 | / | 2012 |

Transaction ID : SA11AI.245867

Amount of Each Receipt this Period

30.00

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

159.95

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER: PAGE 132 OF 316
 (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. RHONDA L LATHON | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246068 | |
| Mailing Address 8446 Oak Bush Terrace | | Amount of Each Receipt this Period 30.00 | |
| City Columbia | State MD | Zip Code 21045 | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer AFSCME INT'L | Occupation BUSINESS ANALYST III | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 340.00 | | |
| Full Name (Last, First, Middle Initial) B. JOSEPH LAWRENCE | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245868 | |
| Mailing Address 2724 St. Paul Street #1 | | Amount of Each Receipt this Period 47.31 | |
| City Baltimore | State MD | Zip Code 21218 | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer AFSCME INT'L | Occupation COMMUNICATIONS SPECIALIST III | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 331.17 | | |
| Full Name (Last, First, Middle Initial) C. JOSEPH LAWRENCE | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246069 | |
| Mailing Address 2724 St. Paul Street #1 | | Amount of Each Receipt this Period 47.31 | |
| City Baltimore | State MD | Zip Code 21218 | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer AFSCME INT'L | Occupation COMMUNICATIONS SPECIALIST III | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 378.48 | | |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | 124.62 | |
| TOTAL This Period (last page this line number only)..... ▶ | | | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 133 OF 316

☒ 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) A. JEANETTE LEBRECHT</p> <p>Mailing Address 6071 Ravenswicke Terrace</p> <p>City State Zip Code Davie FL 33331</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 315.21</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245869</p> <p>Amount of Each Receipt this Period 45.03</p> | |
| <p>Full Name (Last, First, Middle Initial) B. JEANETTE LEBRECHT</p> <p>Mailing Address 6071 Ravenswicke Terrace</p> <p>City State Zip Code Davie FL 33331</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 360.24</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246070</p> <p>Amount of Each Receipt this Period 45.03</p> | |
| <p>Full Name (Last, First, Middle Initial) C. ALAN L LEE</p> <p>Mailing Address 11206 Joliet</p> <p>City State Zip Code Henderson CO 80640</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT TO 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 ▼ 297.24</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245870</p> <p>Amount of Each Receipt this Period 43.45</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | 133.51 | |
| <p>TOTAL 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 134 OF 316

☒ 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. ALAN L LEE

Mailing Address 11206 Joliet

City

Henderson

State

CO

Zip Code

80640

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 ▼

340.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246071

Amount of Each Receipt this Period

43.45

Full Name (Last, First, Middle Initial)

B. SUE C. LEE-ALLEN

Mailing Address 7935 SW Santolina Place

City

Beaverton

State

OR

Zip Code

97008-6272

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OR CN 75

Occupation

ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.249568

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

Duluth

State

MN

Zip Code

55086

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.247909

Amount of Each Receipt this Period

103.22

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

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

216.67

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

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

FOR LINE NUMBER: PAGE 135 OF 316
(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) A. JACKIE D. LEISURE</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. C</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 ▼ 213.07</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012</p> <p>Transaction ID : SA11AI.246698</p> <p>Amount of Each Receipt this Period 19.23</p> | |
| <p>Full Name (Last, First, Middle Initial) B. DINO LEONE</p> <p>Mailing Address 9115 Turkey Hollow Rd.</p> <p>City State Zip Code Taylor Ridge IL 61284-9646</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IL CN 31 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 ▼ 209.28</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2012</p> <p>Transaction ID : SA11AI.247723</p> <p>Amount of Each Receipt this Period 69.76</p> | |
| <p>Full Name (Last, First, Middle Initial) C. SUSAN T. LEVITAN</p> <p>Mailing Address 2650 Worrell Court</p> <p>City State Zip Code Crofton MD 21114</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT 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 ▼ 329.84</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012</p> <p>Transaction ID : SA11AI.245871</p> <p>Amount of Each Receipt this Period 47.12</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>136.11</p> | |
| <p>TOTAL This Period (last page this line number only)..... ▶</p> | | | <p></p> | |

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

PAGE 136 OF 316

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

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

NAME OF COMMITTEE (In Full)

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

| | | | |
|---|--|--|--|
| A. SUSAN T. LEVITAN Full Name (Last, First, Middle Initial) Mailing Address 2650 Worrell Court City Crofton State MD Zip Code 21114 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, POLITICAL ACTION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 376.96 | | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246072 Amount of Each Receipt this Period 47.12 |
| B. SARAH LEWERENZ Full Name (Last, First, Middle Initial) Mailing Address 6997 West Van Road City Duluth State MN Zip Code 55803-9359 FEC ID number of contributing federal political committee. C Name of Employer AFSCME MN CN 65 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.48 | | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 09 / 2012 Transaction ID : SA11AI.249450 Amount of Each Receipt this Period 70.12 |
| C. GREG LEWIS Full Name (Last, First, Middle Initial) Mailing Address 1816 E. 22nd Street City Des Moines State IA Zip Code 50317 FEC ID number of contributing federal political committee. C Name of Employer AFSCME IA CN 61 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00 | | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.247602 Amount of Each Receipt this Period 60.00 |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | | 177.24 |
| 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 137 OF 316
(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) A. JENNIE A. LEWIS</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. C</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 ▼ 220.00</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 25 / 2012 Transaction ID : SA11AI.245747</p> <p>Amount of Each Receipt this Period 40.00</p> |
| <p>Full Name (Last, First, Middle Initial) B. MICHELE LEWIS</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. C</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 ▼ 331.17</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245872</p> <p>Amount of Each Receipt this Period 47.31</p> |
| <p>Full Name (Last, First, Middle Initial) C. MICHELE LEWIS</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. C</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 ▼ 378.48</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246073</p> <p>Amount of Each Receipt this Period 47.31</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | 134.62 |
| <p>TOTAL 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 138 OF 316

☒ 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. MARGARET R. LEWIS-SIDIME

Mailing Address 722 S Lyman Avenue

City State Zip Code
Oak Park IL 60304

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IL CN 31

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.22

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 02 / 2012

Transaction ID : SA11AI.247724

Amount of Each Receipt this Period

67.74

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 ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.246955

Amount of Each Receipt this Period

77.50

Full Name (Last, First, Middle Initial)
C. ANDERS LINDALL

Mailing Address 2524 West Hutchinson

City State Zip Code
Chicago IL 60618

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IL CN 31

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.08

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 02 / 2012

Transaction ID : SA11AI.247725

Amount of Each Receipt this Period

75.36

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

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

220.60

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

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

FOR LINE NUMBER:
(check only one)

PAGE 139 OF 316

☒ 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) A. BRIAN J. LINDHOLT</p> <p>Mailing Address 2311 McKinley Street NE</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Minneapolis</td> <td style="width: 33%;">State MN</td> <td style="width: 33%;">Zip Code 55418</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</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 ▼ 225.00</p> | | | City Minneapolis | State MN | Zip Code 55418 | Name of Employer AFSCME MN CN 5/STATE OF MN | Occupation STAFF REPRESENTATIVE | <p>Date of Receipt 04 / 25 / 2012</p> <p>Transaction ID : SA11AI.248233</p> <p>Amount of Each Receipt this Period 50.00</p> | |
| City Minneapolis | State MN | Zip Code 55418 | | | | | | | |
| Name of Employer AFSCME MN CN 5/STATE OF MN | Occupation STAFF REPRESENTATIVE | | | | | | | | |
| <p>Full Name (Last, First, Middle Initial) B. MICHAEL LINDHOLT</p> <p>Mailing Address 2752 Randolph Street NE</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Minneapolis</td> <td style="width: 33%;">State MN</td> <td style="width: 33%;">Zip Code 55418-2622</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</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 ▼ 540.00</p> | | | City Minneapolis | State MN | Zip Code 55418-2622 | Name of Employer AFSCME MN CN 5/STATE OF MN | Occupation STAFF REPRESENTATIVE | <p>Date of Receipt 04 / 25 / 2012</p> <p>Transaction ID : SA11AI.248234</p> <p>Amount of Each Receipt this Period 120.00</p> | |
| City Minneapolis | State MN | Zip Code 55418-2622 | | | | | | | |
| Name of Employer AFSCME MN CN 5/STATE OF MN | Occupation STAFF REPRESENTATIVE | | | | | | | | |
| <p>Full Name (Last, First, Middle Initial) C. THERESA LIPKO</p> <p>Mailing Address 117 South Main Street</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Carbondale</td> <td style="width: 33%;">State PA</td> <td style="width: 33%;">Zip Code 18407</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</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 ▼ 226.80</p> | | | City Carbondale | State PA | Zip Code 18407 | Name of Employer AFSCME PA CN 13 | Occupation STAFF REPRESENTATIVE | <p>Date of Receipt 04 / 10 / 2012</p> <p>Transaction ID : SA11AI.246956</p> <p>Amount of Each Receipt this Period 56.70</p> | |
| City Carbondale | State PA | Zip Code 18407 | | | | | | | |
| Name of Employer AFSCME PA CN 13 | Occupation STAFF REPRESENTATIVE | | | | | | | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | 226.70 | | | | | | |
| <p>TOTAL 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 316

☒ 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. 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 ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 25 / 2012

Transaction ID : SA11AI.245748

Amount of Each Receipt this Period

60.00

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 ▼

292.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.246958

Amount of Each Receipt this Period

73.16

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 ▼

302.21

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.249498

Amount of Each Receipt this Period

67.62

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

200.78

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER: PAGE 141 OF 316
 (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. KENNETH H LOEFFLER-KEMP | | | Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td>/</td> <td>10</td> <td>/</td> <td>2012</td> </tr> </table> Transaction ID : SA11AI.247910 | | M M | / | D D | / | Y Y Y Y | 04 | / | 10 | / | 2012 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | | |
| 04 | / | 10 | / | 2012 | | | | | | | | | | |
| Mailing Address 2902 Bald Eagle Trail | | | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">65.74</td> </tr> </table> | | 65.74 | | | | | | | | | |
| 65.74 | | | | | | | | | | | | | | |
| City Duluth | State MN | Zip Code 55804 | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td colspan="4"></td> </tr> </table> | | | C | | | | | | | | | | | |
| C | | | | | | | | | | | | | | |
| 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 ▼ <table border="1"> <tr> <td colspan="5">262.96</td> </tr> </table> | | | 262.96 | | | | | | | | | |
| 262.96 | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) B. JAMES N. LOMONACO | | | Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td>/</td> <td>24</td> <td>/</td> <td>2012</td> </tr> </table> Transaction ID : SA11AI.249501 | | M M | / | D D | / | Y Y Y Y | 04 | / | 24 | / | 2012 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | | |
| 04 | / | 24 | / | 2012 | | | | | | | | | | |
| Mailing Address 107 Wormwood Hill Rd. | | | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">25.00</td> </tr> </table> | | 25.00 | | | | | | | | | |
| 25.00 | | | | | | | | | | | | | | |
| City Mansfield | State CT | Zip Code 06250-0000 | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td colspan="4"></td> </tr> </table> | | | C | | | | | | | | | | | |
| C | | | | | | | | | | | | | | |
| Name of Employer AFSCME CT CN 4/STATE OF CT | | 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 colspan="5">225.00</td> </tr> </table> | | | 225.00 | | | | | | | | | |
| 225.00 | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) C. CHARLES M. LOVELESS | | | Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td>/</td> <td>13</td> <td>/</td> <td>2012</td> </tr> </table> Transaction ID : SA11AI.245874 | | M M | / | D D | / | Y Y Y Y | 04 | / | 13 | / | 2012 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | | |
| 04 | / | 13 | / | 2012 | | | | | | | | | | |
| Mailing Address 1112 Euclid Street NW | | | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">77.81</td> </tr> </table> | | 77.81 | | | | | | | | | |
| 77.81 | | | | | | | | | | | | | | |
| City Washington | State DC | Zip Code 20009 | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td colspan="4"></td> </tr> </table> | | | C | | | | | | | | | | | |
| C | | | | | | | | | | | | | | |
| Name of Employer AFSCME INT'L | | Occupation DIRECTOR, FED GOVT AFFAIRS | | | | | | | | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="5">544.67</td> </tr> </table> | | | 544.67 | | | | | | | | | |
| 544.67 | | | | | | | | | | | | | | |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | | <table border="1"> <tr> <td colspan="5">168.55</td> </tr> </table> | | 168.55 | | | | | | | | | |
| 168.55 | | | | | | | | | | | | | | |
| TOTAL This Period (last page this line number only)..... ▶ | | | <table border="1"> <tr> <td colspan="5"></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 142 OF 316
 (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. CHARLES M. LOVELESS

Mailing Address 1112 Euclid Street NW

City

Washington

State

DC

Zip Code

20009

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, FED GOVT AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 | | 3 | 0 | | 2 | 0 | 1 | 2 | | |

Transaction ID : SA11AI.246075

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. GEORGE LOVELL

Mailing Address RR 3 Box 3403

City

Goshen

State

VT

Zip Code

05733-0000

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME MA CN 93

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 | | 0 | 3 | | 2 | 0 | 1 | 2 | | |

Transaction ID : SA11AI.247636

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. SALVATORE LUCIANO

Mailing Address 947 Bunker Hill Road

City

Watertown

State

CT

Zip Code

06795-3231

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME CT CN 4

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 4 | | 1 | 0 | | 2 | 0 | 1 | 2 | | |

Transaction ID : SA11AI.249502

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: PAGE 143 OF 316
 (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. SALVATORE LUCIANO | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246186 | |
| Mailing Address 947 Bunker Hill Road City Watertown State CT Zip Code 06795-3231 | | Amount of Each Receipt this Period 14.00 | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer AFSCME CT CN 4 Occupation EXECUTIVE DIRECTOR | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 506.00 | |
| Full Name (Last, First, Middle Initial) B. WILLIAM LUCY | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 03 / 2012 Transaction ID : SA11AI.246888 | |
| Mailing Address 1831 Sudbury Lane NW City Washington State DC Zip Code 20012-2202 | | Amount of Each Receipt this Period 176.32 | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer AFSCME INT'L/STATE STREET Occupation RETIREE | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 705.28 | |
| Full Name (Last, First, Middle Initial) C. CHARLES H. LUNDY | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245875 | |
| Mailing Address 2024 SW 173 Avenue City Miramar State FL Zip Code 33029 | | Amount of Each Receipt this Period 41.52 | |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer AFSCME INT'L Occupation AREA ORGANIZING DIRECTOR | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 288.88 | |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | 231.84 | |
| TOTAL This Period (last page this line number only)..... ▶ | | | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 144 OF 316
(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 | | | |

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. CHARLES H. LUNDY | | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246076 | |
| Mailing Address 2024 SW 173 Avenue | | | Amount of Each Receipt this Period 145.52 | |
| 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 330.40 | | |
| Full Name (Last, First, Middle Initial) B. JOHN A. LYALL | | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 03 / 2012 Transaction ID : SA11AI.247254 | |
| Mailing Address 383 Ashmoore Circle East | | | Amount of Each Receipt this Period 127.56 | |
| City Powell | State OH | Zip Code 43065 | | |
| FEC ID number of contributing federal political committee. C | | | | |
| Name of Employer AFSCME OH CN 8 | | Occupation PRESIDENT | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 424.68 | | |
| Full Name (Last, First, Middle Initial) C. JOHN A. LYALL | | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246187 | |
| Mailing Address 383 Ashmoore Circle East | | | Amount of Each Receipt this Period 14.00 | |
| City Powell | State OH | Zip Code 43065 | | |
| FEC ID number of contributing federal political committee. C | | | | |
| Name of Employer AFSCME OH CN 8 | | Occupation PRESIDENT | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 438.68 | | |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | | 183.08 | |
| 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 145 OF 316
(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) A. RANDELL LYNCH</p> <p>Mailing Address P.O. Box 3311</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Peoria</td> <td style="width: 33%;">State IL</td> <td style="width: 33%;">Zip Code 61612</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME IL CN 31</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 ▼ 203.22</p> | | | City Peoria | State IL | Zip Code 61612 | Name of Employer AFSCME IL CN 31 | Occupation STAFF REPRESENTATIVE | <p>Date of Receipt 04 / 02 / 2012 Transaction ID : SA11AI.247727</p> <p>Amount of Each Receipt this Period 67.74</p> | | |
| City Peoria | State IL | Zip Code 61612 | | | | | | | | |
| Name of Employer AFSCME IL CN 31 | Occupation STAFF REPRESENTATIVE | | | | | | | | | |
| <p>Full Name (Last, First, Middle Initial) B. ROBERTA LYNCH</p> <p>Mailing Address 4650 N. Hermitage Street</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Chicago</td> <td style="width: 33%;">State IL</td> <td style="width: 33%;">Zip Code 60640</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME IL CN 31</td> <td style="width: 66%;">Occupation DEPUTY 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 ▼ 368.28</p> | | | City Chicago | State IL | Zip Code 60640 | Name of Employer AFSCME IL CN 31 | Occupation DEPUTY DIRECTOR | <p>Date of Receipt 04 / 02 / 2012 Transaction ID : SA11AI.247728</p> <p>Amount of Each Receipt this Period 108.76</p> | | |
| City Chicago | State IL | Zip Code 60640 | | | | | | | | |
| Name of Employer AFSCME IL CN 31 | Occupation DEPUTY DIRECTOR | | | | | | | | | |
| <p>Full Name (Last, First, Middle Initial) C. ROBERTA LYNCH</p> <p>Mailing Address 4650 N. Hermitage Street</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Chicago</td> <td style="width: 33%;">State IL</td> <td style="width: 33%;">Zip Code 60640</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME IL CN 31</td> <td style="width: 66%;">Occupation DEPUTY 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 ▼ 382.28</p> | | | City Chicago | State IL | Zip Code 60640 | Name of Employer AFSCME IL CN 31 | Occupation DEPUTY DIRECTOR | <p>Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.246188</p> <p>Amount of Each Receipt this Period 14.00</p> | | |
| City Chicago | State IL | Zip Code 60640 | | | | | | | | |
| Name of Employer AFSCME IL CN 31 | Occupation DEPUTY DIRECTOR | | | | | | | | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | 190.50 | | | | | | | |
| <p>TOTAL 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 316

☒ 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) A. MICHAEL P. MAGUIRE</p> <p>Mailing Address 20 Duffield Drive</p> <p>City State Zip Code Lititz PA 17543</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 310.00</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.246960</p> <p>Amount of Each Receipt this Period 77.50</p> |
| <p>Full Name (Last, First, Middle Initial) B. DEANGELO MALCOLM</p> <p>Mailing Address 1034 N. Washington Avenue</p> <p>City State Zip Code Lansing MI 48906</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 203.84</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 03 / 2012 Transaction ID : SA11AI.247515</p> <p>Amount of Each Receipt this Period 29.12</p> |
| <p>Full Name (Last, First, Middle Initial) C. DEANGELO MALCOLM</p> <p>Mailing Address 1034 N. Washington Avenue</p> <p>City State Zip Code Lansing MI 48906</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 232.96</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 17 / 2012 Transaction ID : SA11AI.247564</p> <p>Amount of Each Receipt this Period 29.12</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> <p>TOTAL This Period (last page this line number only)..... ▶</p> | | <p>135.74</p> |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER: PAGE 147 OF 316
 (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. ALETHA L. MALINDA

Mailing Address P.O. Box 1642

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Medical Lake | WA | 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 ▼

216.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 25 | / | 2012 |

Transaction ID : SA11AI.249179

Amount of Each Receipt this Period

27.00

Full Name (Last, First, Middle Initial)

B. KATHRYN S. MALONE

Mailing Address 5185 Horseshoe Falls Drive

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Dublin | OH | 43016 |

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 02 | / | 2012 |

Transaction ID : SA11AI.246764

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

C. KATHRYN S. MALONE

Mailing Address 5185 Horseshoe Falls Drive

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Dublin | OH | 43016 |

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.50

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 03 | / | 2012 |

Transaction ID : SA11AI.246238

Amount of Each Receipt this Period

38.50

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

145.50

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 148 OF 316
(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) A. KATHRYN S. MALONE</p> <p>Mailing Address 5185 Horseshoe Falls Drive</p> <p>City State Zip Code Dublin OH 43016</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 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 ▼ 388.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 16 / 2012 Transaction ID : SA11AI.246298</p> <p>Amount of Each Receipt this Period 38.50</p> | |
| <p>Full Name (Last, First, Middle Initial) B. KATHRYN S. MALONE</p> <p>Mailing Address 5185 Horseshoe Falls Drive</p> <p>City State Zip Code Dublin OH 43016</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 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 ▼ 438.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 23 / 2012 Transaction ID : SA11AI.246765</p> <p>Amount of Each Receipt this Period 50.00</p> | |
| <p>Full Name (Last, First, Middle Initial) C. KATHRYN S. MALONE</p> <p>Mailing Address 5185 Horseshoe Falls Drive</p> <p>City State Zip Code Dublin OH 43016</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 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 ▼ 476.50</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246357</p> <p>Amount of Each Receipt this Period 38.50</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>127.00</p> | |
| <p>TOTAL 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 149 OF 316
(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) A. LARRY MALONE</p> <p>Mailing Address 5185 Horseshoe Falls Drive</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Dublin</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43016</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</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 ▼ 269.50 </p> | | | City Dublin | State OH | Zip Code 43016 | Name of Employer AFSCME OH LOC 4 | Occupation FIELD REPRESENTATIVE | <p>Date of Receipt</p> <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y 04 / 03 / 2012 </div> <p>Transaction ID : SA11AI.246239</p> <p>Amount of Each Receipt this Period</p> <div style="border: 1px solid black; padding: 2px;"> 38.50 </div> |
| City Dublin | State OH | Zip Code 43016 | | | | | | |
| Name of Employer AFSCME OH LOC 4 | Occupation FIELD REPRESENTATIVE | | | | | | | |
| <p>Full Name (Last, First, Middle Initial) B. LARRY MALONE</p> <p>Mailing Address 5185 Horseshoe Falls Drive</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Dublin</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43016</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</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 ▼ 308.00 </p> | | | City Dublin | State OH | Zip Code 43016 | Name of Employer AFSCME OH LOC 4 | Occupation FIELD REPRESENTATIVE | <p>Date of Receipt</p> <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y 04 / 16 / 2012 </div> <p>Transaction ID : SA11AI.246299</p> <p>Amount of Each Receipt this Period</p> <div style="border: 1px solid black; padding: 2px;"> 38.50 </div> |
| City Dublin | State OH | Zip Code 43016 | | | | | | |
| Name of Employer AFSCME OH LOC 4 | Occupation FIELD REPRESENTATIVE | | | | | | | |
| <p>Full Name (Last, First, Middle Initial) C. LARRY MALONE</p> <p>Mailing Address 5185 Horseshoe Falls Drive</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Dublin</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43016</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</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 ▼ 346.50 </p> | | | City Dublin | State OH | Zip Code 43016 | Name of Employer AFSCME OH LOC 4 | Occupation FIELD REPRESENTATIVE | <p>Date of Receipt</p> <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y 04 / 30 / 2012 </div> <p>Transaction ID : SA11AI.246358</p> <p>Amount of Each Receipt this Period</p> <div style="border: 1px solid black; padding: 2px;"> 38.50 </div> |
| City Dublin | State OH | Zip Code 43016 | | | | | | |
| Name of Employer AFSCME OH LOC 4 | Occupation FIELD REPRESENTATIVE | | | | | | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <div style="border: 1px solid black; padding: 2px;"> 115.50 </div> | | | | | |
| <p>TOTAL This Period (last page this line number only)..... ▶</p> | | | <div style="border: 1px solid black; padding: 2px;"> </div> | | | | | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 150 OF 316

☒ 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

| | | | |
|---|--|--|--|
| A. MICHAEL A. MARETTE Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 314 City Charlestown State WV Zip Code 25414 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation ASST. DIRECTOR, ORG & FIELD SERVICES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 367.50 | | | Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245876 Amount of Each Receipt this Period 52.50 |
| B. MICHAEL A. MARETTE Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 314 City Charlestown State WV Zip Code 25414 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation ASST. DIRECTOR, ORG & FIELD SERVICES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 420.00 | | | Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246077 Amount of Each Receipt this Period 52.50 |
| C. ALIXETTA M. MARLOW Full Name (Last, First, Middle Initial) Mailing Address 3937 Blueberry Hollow Road City Gahanna State OH Zip Code 43230 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation ADMINISTRATIVE ASSISTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 269.50 | | | Date of Receipt M M / D D / Y Y Y Y Y 04 / 03 / 2012 Transaction ID : SA11AI.246240 Amount of Each Receipt this Period 38.50 |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | | 143.50 |
| 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 151 OF 316

(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) A. ALIXETTA M. MARLOW</p> <p>Mailing Address 3937 Blueberry Hollow Road</p> <p>City State Zip Code Gahanna OH 43230</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 ADMINISTRATIVE ASSISTANT</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 04 / 16 / 2012 Transaction ID : SA11AI.246300</p> <p>Amount of Each Receipt this Period 38.50</p> | |
| <p>Full Name (Last, First, Middle Initial) B. ALIXETTA M. MARLOW</p> <p>Mailing Address 3937 Blueberry Hollow Road</p> <p>City State Zip Code Gahanna OH 43230</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 ADMINISTRATIVE ASSISTANT</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 04 / 30 / 2012 Transaction ID : SA11AI.246359</p> <p>Amount of Each Receipt this Period 38.50</p> | |
| <p>Full Name (Last, First, Middle Initial) C. DAVID MARLOW</p> <p>Mailing Address 1040 W Adams Street Unit 432</p> <p>City State Zip Code Chicago IL 60607</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IL CN 31 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 ▼ 224.34</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247729</p> <p>Amount of Each Receipt this Period 74.78</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>151.78</p> | |
| <p>TOTAL 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 152 OF 316

☒ 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. CHARLES H. MARTIN

Mailing Address 707 Russell Avenue N.

City

Minneapolis

State

MN

Zip Code

55411

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 ▼

284.54

Date of Receipt

04 / 10 / 2012

Transaction ID : SA11AI.247911

Amount of Each Receipt this Period

71.13

Full Name (Last, First, Middle Initial)

B. GARY MARTIN

Mailing Address 255 Trail East

City

Pataskala

State

OH

Zip Code

43062

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ASSOCIATE DIRECTOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

04 / 03 / 2012

Transaction ID : SA11AI.246241

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. GARY MARTIN

Mailing Address 255 Trail East

City

Pataskala

State

OH

Zip Code

43062

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

ASSOCIATE DIRECTOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

04 / 16 / 2012

Transaction ID : SA11AI.246301

Amount of Each Receipt this Period

40.00

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

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

151.13

SCHEDULE A (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 316

☒ 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) A. GARY MARTIN</p> <p>Mailing Address 255 Trail East</p> <p>City Pataskala State OH Zip Code 43062</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation ASSOCIATE DIRECTOR</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 04 / 30 / 2012 Transaction ID : SA11AI.246360 </p> <p>Amount of Each Receipt this Period 40.00 </p> | |
| <p>Full Name (Last, First, Middle Initial) B. LISA G. MARTIN</p> <p>Mailing Address 3207 Forest Terrace</p> <p>City Anderson State IN Zip Code 46013</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ADMINISTRATIVE 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 ▼ 250.53</p> | | | <p>Date of Receipt 04 / 13 / 2012 Transaction ID : SA11AI.245878 </p> <p>Amount of Each Receipt this Period 35.79 </p> | |
| <p>Full Name (Last, First, Middle Initial) C. LISA G. MARTIN</p> <p>Mailing Address 3207 Forest Terrace</p> <p>City Anderson State IN Zip Code 46013</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ADMINISTRATIVE 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 ▼ 286.32</p> | | | <p>Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.246079 </p> <p>Amount of Each Receipt this Period 35.79 </p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>111.58</p> | |
| <p>TOTAL 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 154 OF 316
 (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. PAULA MARTINEZ | | | 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>4</td><td></td> <td>2</td><td>3</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.247618 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 2 | 3 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 4 | | 2 | 3 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | | | |
| Mailing Address 3963 200th Avenue | | | 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>30.00</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 30.00 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 30.00 | | | | | | | | | | | | | | | | |
| City Carlisle | State IA | Zip Code 50047 | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | | |
| 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 ▼ <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>210.00</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | 210.00 | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 210.00 | | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) B. KIMBERLY A. MASSENGILL-BERNARDIN | | | 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>4</td><td></td> <td>0</td><td>3</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.247256 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 0 | 3 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 4 | | 0 | 3 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | | | |
| Mailing Address 8000 Brookpoint Place | | | 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>71.58</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 71.58 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 71.58 | | | | | | | | | | | | | | | | |
| City Westerville | State OH | Zip Code 43081 | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | | |
| C | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer AFSCME OH CN 8 | | Occupation ASSOCIATE COUNSEL | | | | | | | | | | | | | | | | | | | | | | | |
| 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>213.68</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | 213.68 | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 213.68 | | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) C. JILLIAN J MATUNDAN | | | 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>4</td><td></td> <td>1</td><td>3</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.245879 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 1 | 3 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 4 | | 1 | 3 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | | | |
| Mailing Address 134 North Pine Avenue | | | 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>51.37</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 51.37 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 51.37 | | | | | | | | | | | | | | | | |
| City Albany | State NY | Zip Code 12203 | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | | |
| 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 ▼ <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>342.47</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | 342.47 | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 342.47 | | | | | | | | | | | | | | | | |
| SUBTOTAL 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>152.95</td> </tr> </table> | | | | | | | | | | | | 152.95 | | | | | | | | | | |
| | | | | | | | | | 152.95 | | | | | | | | | | | | | | | | |
| TOTAL 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 155 OF 316

(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

| | | | | |
|---|--|--|--|--|
| A. JILLIAN J MATUNDAN Full Name (Last, First, Middle Initial) Mailing Address 134 North Pine Avenue City Albany State NY Zip Code 12203 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation FIELD COORDINATOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 393.84 | | | Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246080 Amount of Each Receipt this Period 51.37 | |
| B. CLYDE F. MAUK Full Name (Last, First, Middle Initial) Mailing Address 5580 Spoonbill Court City Huber Heights State OH Zip Code 45424 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation REGIONAL DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00 | | | Date of Receipt M M / D D / Y Y Y Y Y 04 / 03 / 2012 Transaction ID : SA11AI.246242 Amount of Each Receipt this Period 40.00 | |
| C. CLYDE F. MAUK Full Name (Last, First, Middle Initial) Mailing Address 5580 Spoonbill Court City Huber Heights State OH Zip Code 45424 FEC ID number of contributing federal political committee. C Name of Employer AFSCME OH LOC 4 Occupation REGIONAL DIRECTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 320.00 | | | Date of Receipt M M / D D / Y Y Y Y Y 04 / 16 / 2012 Transaction ID : SA11AI.246302 Amount of Each Receipt this Period 40.00 | |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | | 131.37 | |
| TOTAL This Period (last page this line number only)..... ▶ | | | | |

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

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

FOR LINE NUMBER: PAGE 156 OF 316

(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) A. CLYDE F. MAUK</p> <p>Mailing Address 5580 Spoonbill Court</p> <p>City State Zip Code Huber Heights OH 45424</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 400.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 16 / 2012 Transaction ID : SA11AI.246766</p> <p>Amount of Each Receipt this Period 80.00</p> | |
| <p>Full Name (Last, First, Middle Initial) B. CLYDE F. MAUK</p> <p>Mailing Address 5580 Spoonbill Court</p> <p>City State Zip Code Huber Heights OH 45424</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 440.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246361</p> <p>Amount of Each Receipt this Period 40.00</p> | |
| <p>Full Name (Last, First, Middle Initial) C. MATTHEW MAYERS</p> <p>Mailing Address 1833 Ontario Place NW</p> <p>City State Zip Code Washington DC 20009</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L MANAGER, STRATEGIC RESEARCH</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 317.73</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245880</p> <p>Amount of Each Receipt this Period 45.39</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>165.39</p> | |
| <p>TOTAL 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 157 OF 316
 (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. 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 ▼

363.12

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 30 | / | 2012 |

Transaction ID : SA11AI.246081

Amount of Each Receipt this Period

45.39

Full Name (Last, First, Middle Initial)

B. JEFF MAZUR

Mailing Address 503 Redwing Drive

City

Ashland

State

MO

Zip Code

65010

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MO CN 72

Occupation

BUSINESS MANAGER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

212.52

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 13 | / | 2012 |

Transaction ID : SA11AI.249431

Amount of Each Receipt this Period

35.42

Full Name (Last, First, Middle Initial)

C. JEFF MAZUR

Mailing Address 503 Redwing Drive

City

Ashland

State

MO

Zip Code

65010

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MO CN 72

Occupation

BUSINESS MANAGER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

247.94

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 18 | / | 2012 |

Transaction ID : SA11AI.249439

Amount of Each Receipt this Period

35.42

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

116.23

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 158 OF 316

(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) A. ELISSA MCBRIDE</p> <p>Mailing Address 9 Sherman Avenue</p> <p>City State Zip Code Takoma Park MD 20912</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L 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 ▼ 766.08</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245881</p> <p>Amount of Each Receipt this Period 109.44</p> | |
| <p>Full Name (Last, First, Middle Initial) B. ELISSA MCBRIDE</p> <p>Mailing Address 9 Sherman Avenue</p> <p>City State Zip Code Takoma Park MD 20912</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L 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 ▼ 875.52</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246082</p> <p>Amount of Each Receipt this Period 109.44</p> | |
| <p>Full Name (Last, First, Middle Initial) C. CYNTHIA R. MCCABE</p> <p>Mailing Address 4608 Harvard Road</p> <p>City State Zip Code College Park MD 20740</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSIST. DIRECTOR, EDITORIAL/PRODUCTI</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 321.09</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245882</p> <p>Amount of Each Receipt this Period 45.87</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | 264.75 | |
| <p>TOTAL 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 159 OF 316

☒ 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. 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 ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246083

Amount of Each Receipt this Period

45.87

Full Name (Last, First, Middle Initial)

B. BOYD B. MCCAMISH

Mailing Address 1004 Woodtown Drive

City

Gahanna

State

OH

Zip Code

43230

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD EDUCATION COORDINATOR II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.97

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245883

Amount of Each Receipt this Period

43.71

Full Name (Last, First, Middle Initial)

C. BOYD B. MCCAMISH

Mailing Address 1004 Woodtown Drive

City

Gahanna

State

OH

Zip Code

43230

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD EDUCATION COORDINATOR II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.68

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246084

Amount of Each Receipt this Period

43.71

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

133.29

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 160 OF 316

☒ 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) A. MARGARET MCCANN</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. C</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 ▼ 423.50</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245884</p> <p>Amount of Each Receipt this Period 60.50</p> | |
| <p>Full Name (Last, First, Middle Initial) B. MARGARET MCCANN</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. C</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 ▼ 484.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246085</p> <p>Amount of Each Receipt this Period 60.50</p> | |
| <p>Full Name (Last, First, Middle Initial) C. TARA MCCAULEY</p> <p>Mailing Address 29 N. Wacker Drive Suite 800</p> <p>City State Zip Code Chicago IL 60606</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IL CN 31 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 ▼ 203.22</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247730</p> <p>Amount of Each Receipt this Period 67.74</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>188.74</p> | |
| <p>TOTAL This Period (last page this line number only)..... ▶</p> | | | | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 161 OF 316
(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. GARY MCCAULLEY

Mailing Address 84 Mic Nan Drive

City

Londonberry

State

PA

Zip Code

17057

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

ASSISTANT DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.88

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 0 | | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.246961

Amount of Each Receipt this Period

97.22

Full Name (Last, First, Middle Initial)

B. SUZANNE MCCORMICK

Mailing Address 32 Harvest Lane

City

West Grove

State

PA

Zip Code

19390

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.08

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 0 | | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.246962

Amount of Each Receipt this Period

61.52

Full Name (Last, First, Middle Initial)

C. TONY MCCUBBIN

Mailing Address 7740 Cordova Road

City

Erie

State

IL

Zip Code

61250

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IL CN 31

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.22

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 0 | 2 | | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.247731

Amount of Each Receipt this Period

67.74

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

226.48

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 162 OF 316

☒ 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) A. JENNIFER A. MCCULLEY</p> <p>Mailing Address 509 Ashton Drive</p> <p>City Fitchburg State WI Zip Code 53593</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME WI CN 40 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 M M / D D / Y Y Y Y Y 04 / 03 / 2012 Transaction ID : SA11AI.249513</p> <p>Amount of Each Receipt this Period 55.00</p> |
| <p>Full Name (Last, First, Middle Initial) B. BRIAN P. MCDONNELL</p> <p>Mailing Address 1322 Myron Street</p> <p>City Niskayuna State NY Zip Code 12309</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation 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 ▼ 338.87</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245886</p> <p>Amount of Each Receipt this Period 48.41</p> |
| <p>Full Name (Last, First, Middle Initial) C. BRIAN P. MCDONNELL</p> <p>Mailing Address 1322 Myron Street</p> <p>City Niskayuna State NY Zip Code 12309</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation 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 ▼ 387.28</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246087</p> <p>Amount of Each Receipt this Period 48.41</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | 151.82 |
| <p>TOTAL 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 163 OF 316

☒ 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. GERALD MCENTEE

Mailing Address 800 25th Street NW
Apt. #406

City Washington State DC Zip Code 20037-2207

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1130.71

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245887

Amount of Each Receipt this Period

161.53

Full Name (Last, First, Middle Initial)

B. GERALD MCENTEE

Mailing Address 800 25th Street NW
Apt. #406

City Washington State DC Zip Code 20037-2207

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1292.24

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246088

Amount of Each Receipt this Period

161.53

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 ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 02 / 2012

Transaction ID : SA11AI.246767

Amount of Each Receipt this Period

80.00

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

403.06

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 164 OF 316
(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) A. LYNNE E. MCGRAW</p> <p>Mailing Address 1258 Smerset way</p> <p>City Pickerington State OH Zip Code 43147</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation DIRECTOR OF ACCOUNTING</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 290.00</p> | | | <p>Date of Receipt 04 / 03 / 2012 Transaction ID : SA11AI.246243 </p> <p>Amount of Each Receipt this Period 30.00</p> | |
| <p>Full Name (Last, First, Middle Initial) B. LYNNE E. MCGRAW</p> <p>Mailing Address 1258 Smerset way</p> <p>City Pickerington State OH Zip Code 43147</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation DIRECTOR OF ACCOUNTING</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 04 / 16 / 2012 Transaction ID : SA11AI.246303 </p> <p>Amount of Each Receipt this Period 30.00</p> | |
| <p>Full Name (Last, First, Middle Initial) C. LYNNE E. MCGRAW</p> <p>Mailing Address 1258 Smerset way</p> <p>City Pickerington State OH Zip Code 43147</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation DIRECTOR OF ACCOUNTING</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 370.00</p> | | | <p>Date of Receipt 04 / 23 / 2012 Transaction ID : SA11AI.246768 </p> <p>Amount of Each Receipt this Period 50.00</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | 110.00 | |
| <p>TOTAL 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 165 OF 316
(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) A. LYNNE E. MCGRAW</p> <p>Mailing Address 1258 Smersset way</p> <p>City Pickerington State OH Zip Code 43147</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation DIRECTOR OF ACCOUNTING</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 400.00</p> | | | <p>Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.246362 </p> <p>Amount of Each Receipt this Period 30.00 </p> | | |
| <p>Full Name (Last, First, Middle Initial) B. PETER M. MCLINDEN</p> <p>Mailing Address 935 Pamela Road</p> <p>City Cincinnati State OH Zip Code 45255</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH CN 8 Occupation 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 ▼ 260.65</p> | | | <p>Date of Receipt 04 / 03 / 2012 Transaction ID : SA11AI.247258 </p> <p>Amount of Each Receipt this Period 87.32 </p> | | |
| <p>Full Name (Last, First, Middle Initial) C. EDWARD MCNEIL</p> <p>Mailing Address 2546 Edison</p> <p>City Detroit State MI Zip Code 48206</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 287.07</p> | | | <p>Date of Receipt 04 / 03 / 2012 Transaction ID : SA11AI.247517 </p> <p>Amount of Each Receipt this Period 41.01 </p> | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>158.33</p> | | |
| <p>TOTAL 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 166 OF 316

(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. EDWARD MCNEIL

Mailing Address 2546 Edison

City

Detroit

State

MI

Zip Code

48206

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.08

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 17 | / | 2012 |

Transaction ID : SA11AI.247566

Amount of Each Receipt this Period

41.01

Full Name (Last, First, Middle Initial)

B. SALLY MECKLING

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 ▼

371.03

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 25 | / | 2012 |

Transaction ID : SA11AI.245749

Amount of Each Receipt this Period

67.46

Full Name (Last, First, Middle Initial)

C. NANINE MEIKLEJOHN

Mailing Address 4909 Aurora Drive

City

Kensington

State

MD

Zip Code

20895

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

LEGISLATIVE AFFAIRS SPECIALIST III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.17

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 13 | / | 2012 |

Transaction ID : SA11AI.245889

Amount of Each Receipt this Period

47.31

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

155.78

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER:
 (check only one)

PAGE 167 OF 316

| | | | |
|---|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <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. NANINE MEIKLEJOHN | | | 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>04</td> <td></td> <td>30</td> <td></td> <td>2012</td> </tr> </table> Transaction ID : SA11AI.246090 | | | M M M | / | D D D | / | Y Y Y Y Y Y | 04 | | 30 | | 2012 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | | | | |
| 04 | | 30 | | 2012 | | | | | | | | | | | |
| Mailing Address 4909 Aurora Drive | | | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">47.31</td> </tr> </table> | | | 47.31 | | | | | | | | | |
| 47.31 | | | | | | | | | | | | | | | |
| City Kensington | State MD | Zip Code 20895 | | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td colspan="5"></td> </tr> </table> | | | C | | | | | | | | | | | | |
| C | | | | | | | | | | | | | | | |
| Name of Employer AFSCME INT'L | | Occupation LEGISLATIVE AFFAIRS SPECIALIST III | | | | | | | | | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="5">378.48</td> </tr> </table> | | | | 378.48 | | | | | | | | | |
| 378.48 | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) B. JONATHAN D. MELEGRITO | | | 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>04</td> <td></td> <td>13</td> <td></td> <td>2012</td> </tr> </table> Transaction ID : SA11AI.245890 | | | M M M | / | D D D | / | Y Y Y Y Y Y | 04 | | 13 | | 2012 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | | | | |
| 04 | | 13 | | 2012 | | | | | | | | | | | |
| Mailing Address 3511 Frederick Place | | | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">37.41</td> </tr> </table> | | | 37.41 | | | | | | | | | |
| 37.41 | | | | | | | | | | | | | | | |
| City Kensington | State MD | Zip Code 20895 | | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td colspan="5"></td> </tr> </table> | | | C | | | | | | | | | | | | |
| C | | | | | | | | | | | | | | | |
| Name of Employer AFSCME INT'L | | Occupation PUBLICATIONS ASSOCIATE | | | | | | | | | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="5">261.87</td> </tr> </table> | | | | 261.87 | | | | | | | | | |
| 261.87 | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) C. JONATHAN D. MELEGRITO | | | 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>04</td> <td></td> <td>30</td> <td></td> <td>2012</td> </tr> </table> Transaction ID : SA11AI.246091 | | | M M M | / | D D D | / | Y Y Y Y Y Y | 04 | | 30 | | 2012 |
| M M M | / | D D D | / | Y Y Y Y Y Y | | | | | | | | | | | |
| 04 | | 30 | | 2012 | | | | | | | | | | | |
| Mailing Address 3511 Frederick Place | | | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">37.41</td> </tr> </table> | | | 37.41 | | | | | | | | | |
| 37.41 | | | | | | | | | | | | | | | |
| City Kensington | State MD | Zip Code 20895 | | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td colspan="5"></td> </tr> </table> | | | C | | | | | | | | | | | | |
| C | | | | | | | | | | | | | | | |
| Name of Employer AFSCME INT'L | | Occupation PUBLICATIONS ASSOCIATE | | | | | | | | | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="5">299.28</td> </tr> </table> | | | | 299.28 | | | | | | | | | |
| 299.28 | | | | | | | | | | | | | | | |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | | <table border="1"> <tr> <td colspan="5">122.13</td> </tr> </table> | | | 122.13 | | | | | | | | | |
| 122.13 | | | | | | | | | | | | | | | |
| TOTAL This Period (last page this line number only)..... ▶ | | | <table border="1"> <tr> <td colspan="5"></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 168 OF 316
(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) A. DAVID A MENDOZA</p> <p>Mailing Address 4301 N. 21st Street Unit # 7</p> <p>City State Zip Code Phoenix AZ 85016</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 321.73</p> | | | <p>Date of Receipt 04 / 13 / 2012</p> <p>Transaction ID : SA11AI.245891</p> <p>Amount of Each Receipt this Period 46.05</p> | |
| <p>Full Name (Last, First, Middle Initial) B. DAVID A MENDOZA</p> <p>Mailing Address 4301 N. 21st Street Unit # 7</p> <p>City State Zip Code Phoenix AZ 85016</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 367.78</p> | | | <p>Date of Receipt 04 / 30 / 2012</p> <p>Transaction ID : SA11AI.246092</p> <p>Amount of Each Receipt this Period 46.05</p> | |
| <p>Full Name (Last, First, Middle Initial) C. JOYE E. MERCER-BARKSDALE</p> <p>Mailing Address 5103 Janesdale Court</p> <p>City State Zip Code Glenn Dale MD 20769</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L SENIOR SPEECH WRITER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 331.17</p> | | | <p>Date of Receipt 04 / 13 / 2012</p> <p>Transaction ID : SA11AI.245892</p> <p>Amount of Each Receipt this Period 47.31</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>139.41</p> | |
| <p>TOTAL 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 169 OF 316
 (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. JOYE E. MERCER-BARKSDALE | | | 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>4</td><td></td> <td>3</td><td>0</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.246093 | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 3 | 0 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | |
| 0 | 4 | | 3 | 0 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | | |
| Mailing Address 5103 Janesdale 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>47.31</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | 47.31 |
| | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 47.31 | | | | | | | | | | | | | | | |
| City Glenn Dale | State MD | Zip Code 20769 | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | |
| C | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer AFSCME INT'L | | Occupation SENIOR SPEECH WRITER | | | | | | | | | | | | | | | | | | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ <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>378.48</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 378.48 |
| | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 378.48 | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) B. MICHAEL MEREDITH | | | 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>4</td><td></td> <td>0</td><td>5</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.247663 | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 0 | 5 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | |
| 0 | 4 | | 0 | 5 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | | |
| Mailing Address 1415 Ivy Hill Road | | | 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>50.84</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | 50.84 |
| | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 50.84 | | | | | | | | | | | | | | | |
| City Cockeysville | State MD | Zip Code 21030 | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | |
| C | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer AFSCME MD CN 982 | | Occupation ORGANIZER | | | | | | | | | | | | | | | | | | | | | | |
| 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>203.36</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 203.36 |
| | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 203.36 | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) C. LAURIE L. MERTA | | | 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>4</td><td></td> <td>1</td><td>1</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.249394 | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 1 | 1 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | |
| 0 | 4 | | 1 | 1 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | | |
| Mailing Address 9829 59th Street Court W | | | 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>130.00</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | 130.00 |
| | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 130.00 | | | | | | | | | | | | | | | |
| City Tacoma | State WA | Zip Code 98467 | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | |
| C | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer AFSCME WA CN 28 | | Occupation DIRECTOR OF FIELD SERVICES | | | | | | | | | | | | | | | | | | | | | | |
| 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>520.00</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 520.00 |
| | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 520.00 | | | | | | | | | | | | | | | |
| SUBTOTAL 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></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>228.15</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | 228.15 |
| | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 228.15 | | | | | | | | | | | | | | | |
| TOTAL 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> <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 170 OF 316
(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) A. MICHAEL J. MESSINA</p> <p>Mailing Address 752 Silver Spring Avenue</p> <p>City State Zip Code Silver Spring MD 20910</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 270.00</p> | | | <p>Date of Receipt 04 / 13 / 2012</p> <p>Transaction ID : SA11AI.245893</p> <p>Amount of Each Receipt this Period 35.00</p> | |
| <p>Full Name (Last, First, Middle Initial) B. MICHAEL J. MESSINA</p> <p>Mailing Address 752 Silver Spring Avenue</p> <p>City State Zip Code Silver Spring MD 20910</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 305.00</p> | | | <p>Date of Receipt 04 / 30 / 2012</p> <p>Transaction ID : SA11AI.246094</p> <p>Amount of Each Receipt this Period 35.00</p> | |
| <p>Full Name (Last, First, Middle Initial) C. GLEN MIDDLETON</p> <p>Mailing Address 5108 Yellowwood Ave</p> <p>City State Zip Code Baltimore MD 21209-4611</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MD CN 67 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 ▼ 866.00</p> | | | <p>Date of Receipt 04 / 30 / 2012</p> <p>Transaction ID : SA11AI.246189</p> <p>Amount of Each Receipt this Period 14.00</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | 84.00 | |
| <p>TOTAL 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 171 OF 316
(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) A. MATTHEW A. MILLER</p> <p>Mailing Address 207 W Marshall Street</p> <p>City Marshall State MN Zip Code 56852</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 236.88</p> | | | <p>Date of Receipt 04 / 09 / 2012 Transaction ID : SA11AI.249451 </p> <p>Amount of Each Receipt this Period 59.22 </p> | | |
| <p>Full Name (Last, First, Middle Initial) B. SCOTT D. MILLER</p> <p>Mailing Address 2056 W Hutchinson 2nd Fl.</p> <p>City Chicago State IL Zip Code 60618</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME IL CN 31 Occupation LEGAL COUNSEL</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 226.08</p> | | | <p>Date of Receipt 04 / 02 / 2012 Transaction ID : SA11AI.247732 </p> <p>Amount of Each Receipt this Period 75.36 </p> | | |
| <p>Full Name (Last, First, Middle Initial) C. TIMOTHY MILLER</p> <p>Mailing Address 2724 Pine Avenue</p> <p>City Altoona State PA Zip Code 16601</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 292.64</p> | | | <p>Date of Receipt 04 / 10 / 2012 Transaction ID : SA11AI.246964 </p> <p>Amount of Each Receipt this Period 73.16 </p> | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>207.74</p> | | |
| <p>TOTAL 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 172 OF 316
 (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. HAROLD F. MITCHELL | | | 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>4</td><td></td> <td>0</td><td>3</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.247261 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 0 | 3 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 4 | | 0 | 3 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | | | |
| Mailing Address 3999 Kensingwood Drive | | | 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>113.42</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 113.42 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 113.42 | | | | | | | | | | | | | | | | |
| City Columbus | State OH | Zip Code 43230 | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | | |
| C | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer AFSCME OH CN 8 | | Occupation ASSISTANT ORGANIZING DIRECTOR | | | | | | | | | | | | | | | | | | | | | | | |
| 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>340.26</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | | 340.26 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 340.26 | | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) B. HARRY MOBLEY | | | 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>4</td><td></td> <td>1</td><td>0</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.246965 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 1 | 0 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 4 | | 1 | 0 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | | | |
| Mailing Address 2635 Cranberry Circle | | | 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>73.16</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 73.16 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 73.16 | | | | | | | | | | | | | | | | |
| City Harrisburg | State PA | Zip Code 17110 | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | | |
| 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 ▼ <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>292.64</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | | 292.64 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 292.64 | | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) C. MATTHEW J. MOLEK | | | 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>4</td><td></td> <td>3</td><td>0</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.246707 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 3 | 0 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 4 | | 3 | 0 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | | | |
| Mailing Address 29140 Barjode Road | | | 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>41.68</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 41.68 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 41.68 | | | | | | | | | | | | | | | | |
| City Willowick | State OH | Zip Code 44095 | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | | |
| 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 ▼ <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>206.72</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | | 206.72 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 206.72 | | | | | | | | | | | | | | | | |
| SUBTOTAL 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>228.26</td> </tr> </table> | | | | | | | | | | | | 228.26 | | | | | | | | | | |
| | | | | | | | | | 228.26 | | | | | | | | | | | | | | | | |
| TOTAL 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 173 OF 316
 (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. TRINA MOLNAR-BOCK | | | 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>4</td><td></td> <td>3</td><td>0</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.246366 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 3 | 0 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 4 | | 3 | 0 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | | | |
| Mailing Address 14-8 Meadowlawn Drive | | | 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>23.08</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 23.08 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 23.08 | | | | | | | | | | | | | | | | |
| City Mentor | State OH | Zip Code 44060 | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | | |
| 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 ▼ <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>207.72</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | | 207.72 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 207.72 | | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) B. KAREN MOMBERGER | | | 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>4</td><td></td> <td>1</td><td>0</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.246966 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 1 | 0 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 4 | | 1 | 0 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | | | |
| Mailing Address 102 Manor Road | | | 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>90.84</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 90.84 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 90.84 | | | | | | | | | | | | | | | | |
| City New Kensington | State PA | Zip Code 15068 | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | | |
| 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 ▼ <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>363.36</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | | 363.36 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 363.36 | | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) C. DOUGLAS MOORE | | | 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>4</td><td></td> <td>0</td><td>2</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.249495 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 0 | 2 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 4 | | 0 | 2 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | | | |
| Mailing Address 10176 Foothill 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>40.00</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 40.00 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 40.00 | | | | | | | | | | | | | | | | |
| City Spring Valley | State CA | Zip Code 91977 | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | | |
| C | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer AFSCME CA LOC 3930 | | Occupation INT'L VICE PRESIDENT | | | | | | | | | | | | | | | | | | | | | | | |
| 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>202.00</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | | 202.00 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 202.00 | | | | | | | | | | | | | | | | |
| SUBTOTAL 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>153.92</td> </tr> </table> | | | | | | | | | | | | 153.92 | | | | | | | | | | |
| | | | | | | | | | 153.92 | | | | | | | | | | | | | | | | |
| TOTAL 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 PageFOR LINE NUMBER:
(check only one)

PAGE 174 OF 316

| | | | |
|---|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <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. DOUGLAS MOORE

Mailing Address 10176 Foothill Court

City

Spring Valley

State

CA

Zip Code

91977

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME CA LOC 3930

Occupation

INT'L VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 30 | / | 2012 |

Transaction ID : SA11AI.246190

Amount of Each Receipt this Period

14.00

Full Name (Last, First, Middle Initial)

B. KRISTINE L. MOORE

Mailing Address 2365 W Cedar Loop

City

Cherokee

State

IA

Zip Code

51012

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IOWA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.32

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 02 | / | 2012 |

Transaction ID : SA11AI.247621

Amount of Each Receipt this Period

38.22

Full Name (Last, First, Middle Initial)

C. KRISTINE L. MOORE

Mailing Address 2365 W Cedar Loop

City

Cherokee

State

IA

Zip Code

51012

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IOWA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.54

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 23 | / | 2012 |

Transaction ID : SA11AI.247622

Amount of Each Receipt this Period

38.22

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

90.44

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 175 OF 316

☒ 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. PATRICK G. MORAN

Mailing Address 415 U Street NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

501.67

Date of Receipt

04 / 13 / 2012

Transaction ID : SA11AI.245895

Amount of Each Receipt this Period

75.25

Full Name (Last, First, Middle Initial)

B. PATRICK G. MORAN

Mailing Address 415 U Street NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

578.98

Date of Receipt

04 / 30 / 2012

Transaction ID : SA11AI.246096

Amount of Each Receipt this Period

77.31

Full Name (Last, First, Middle Initial)

C. JAMES P. MORGAN

Mailing Address 102 Colony Drive

City

Cherokee

State

IA

Zip Code

51012

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IOWA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

203.46

Date of Receipt

04 / 02 / 2012

Transaction ID : SA11AI.247625

Amount of Each Receipt this Period

33.91

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

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

186.47

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

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

FOR LINE NUMBER: PAGE 176 OF 316

(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 P. MORGAN

Mailing Address 102 Colony Drive

City

Cherokee

State

IA

Zip Code

51012

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IA CN 61/STATE OF IOWA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.37

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 23 | / | 2012 |

Transaction ID : SA11AI.247626

Amount of Each Receipt this Period

33.91

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 ▼

246.08

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 10 | / | 2012 |

Transaction ID : SA11AI.246967

Amount of Each Receipt this Period

61.52

Full Name (Last, First, Middle Initial)

C. MICHELLE MULHERIN

Mailing Address 2462 Cleveland Avenue

City

Reading

State

PA

Zip Code

19609

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.64

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 10 | / | 2012 |

Transaction ID : SA11AI.246969

Amount of Each Receipt this Period

73.16

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

168.59

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

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

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

FOR LINE NUMBER: PAGE 177 OF 316
(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) A. STEVEN C. MULLEN</p> <p>Mailing Address 544 Clermont Drive</p> <p>City Harrisburg State PA Zip Code 17112</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME PA CN 13 Occupation TRADES LABORER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 369.20</p> | | <p>Date of Receipt 04 / 10 / 2012 Transaction ID : SA11AI.246970</p> <p>Amount of Each Receipt this Period 92.30</p> |
| <p>Full Name (Last, First, Middle Initial) B. MARK MURPHY</p> <p>Mailing Address 2133 Farrington Avenue</p> <p>City Alexandria State VA Zip Code 22303</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation 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 ▼ 276.30</p> | | <p>Date of Receipt 04 / 13 / 2012 Transaction ID : SA11AI.245896</p> <p>Amount of Each Receipt this Period 46.05</p> |
| <p>Full Name (Last, First, Middle Initial) C. MARK MURPHY</p> <p>Mailing Address 2133 Farrington Avenue</p> <p>City Alexandria State VA Zip Code 22303</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation 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 ▼ 322.35</p> | | <p>Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.246097</p> <p>Amount of Each Receipt this Period 46.05</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> <p>TOTAL This Period (last page this line number only)..... ▶</p> | | <p>184.40</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 178 OF 316

☒ 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) A. MICHAEL P. MURPHY</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. C</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 ▼ 327.00</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012</p> <p>Transaction ID : SA11AI.247118</p> <p>Amount of Each Receipt this Period 82.00</p> |
| <p>Full Name (Last, First, Middle Initial) B. STEVEN L. MYERS</p> <p>Mailing Address 696 Hull Road</p> <p>City Mansfield State OH Zip Code 44907</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 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 ▼ 280.00</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 03 / 2012</p> <p>Transaction ID : SA11AI.246249</p> <p>Amount of Each Receipt this Period 40.00</p> |
| <p>Full Name (Last, First, Middle Initial) C. STEVEN L. MYERS</p> <p>Mailing Address 696 Hull Road</p> <p>City Mansfield State OH Zip Code 44907</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 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 ▼ 320.00</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 16 / 2012</p> <p>Transaction ID : SA11AI.246309</p> <p>Amount of Each Receipt this Period 40.00</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> <p>TOTAL This Period (last page this line number only)..... ▶</p> | | <p>162.00</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 179 OF 316

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <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. 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 ▼

360.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 30 | | 2012 |

Transaction ID : SA11AI.246368

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. 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 ▼

229.04

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 11 | | 2012 |

Transaction ID : SA11AI.249396

Amount of Each Receipt this Period

52.26

Full Name (Last, First, Middle Initial)

C. REBECCA NASSARRE

Mailing Address 1701 S Norfolk Street

City

San Mateo

State

CA

Zip Code

94403

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME CA CN 57/SAN MATEO CNTY

Occupation

SOCIAL WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 04 | | 2012 |

Transaction ID : SA11AI.249490

Amount of Each Receipt this Period

75.00

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

167.26

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 180 OF 316

☒ 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) A. RACHEL E. NAUMAN</p> <p>Mailing Address 11021 Horseshoe Drive</p> <p>City State Zip Code Frederick MD 21701-3397</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 295.19</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245897</p> <p>Amount of Each Receipt this Period 42.17</p> |
| <p>Full Name (Last, First, Middle Initial) B. RACHEL E. NAUMAN</p> <p>Mailing Address 11021 Horseshoe Drive</p> <p>City State Zip Code Frederick MD 21701-3397</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 337.36</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246098</p> <p>Amount of Each Receipt this Period 42.17</p> |
| <p>Full Name (Last, First, Middle Initial) C. JAMES NEBLETT</p> <p>Mailing Address 17635 Greenview</p> <p>City State Zip Code Detroit MI 48219-3588</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MI CN 25 ADMINISTRATIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 262.01</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 03 / 2012 Transaction ID : SA11AI.247519</p> <p>Amount of Each Receipt this Period 37.43</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | <p>121.77</p> |
| <p>TOTAL 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 181 OF 316

(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) A. JAMES NEBLETT</p> <p>Mailing Address 17635 Greenview</p> <p>City State Zip Code Detroit MI 48219-3588</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MI CN 25 ADMINISTRATIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 299.44</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 17 / 2012 Transaction ID : SA11AI.247568</p> <p>Amount of Each Receipt this Period 37.43</p> | |
| <p>Full Name (Last, First, Middle Initial) B. NORMAN NEELY</p> <p>Mailing Address 108 Iliad Drive</p> <p>City State Zip Code Tinley Park IL 60477</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IL CN 31 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 ▼ 203.22</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247733</p> <p>Amount of Each Receipt this Period 67.74</p> | |
| <p>Full Name (Last, First, Middle Initial) C. CYNTHIA NELSON</p> <p>Mailing Address 2648 Garfield Street, N.E.</p> <p>City State Zip Code Minneapolis MN 55418</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 5/CN14 BUSINESS REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 284.56</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.247915</p> <p>Amount of Each Receipt this Period 71.14</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>176.31</p> | |
| <p>TOTAL 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 182 OF 316
 (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. JESSE NEWCOMER IV | | | 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>4</td><td></td> <td>1</td><td>0</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.246971 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 1 | 0 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 4 | | 1 | 0 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | | | |
| Mailing Address 2109 Circle Road | | | 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>90.84</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 90.84 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 90.84 | | | | | | | | | | | | | | | | |
| City Carlisle | State PA | Zip Code 17013 | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | | |
| 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 ▼ <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>363.36</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | | 363.36 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 363.36 | | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) B. MICHAEL NEWMAN | | | 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>4</td><td></td> <td>0</td><td>2</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.247735 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 0 | 2 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 4 | | 0 | 2 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | | | |
| Mailing Address 4031 N. Hermitage Avenue | | | 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>94.80</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 94.80 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 94.80 | | | | | | | | | | | | | | | | |
| City Chicago | State IL | Zip Code 60613 | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | | |
| C | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer AFSCME IL CN 31 | | Occupation ASSOCIATE DIRECTOR | | | | | | | | | | | | | | | | | | | | | | | |
| 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>284.40</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | | 284.40 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 284.40 | | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) C. CATHY L. NEWTON | | | 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>4</td><td></td> <td>0</td><td>6</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.245218 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 0 | 6 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 4 | | 0 | 6 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | | | |
| Mailing Address 221 E. Mulberry Street | | | 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>30.00</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 30.00 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 30.00 | | | | | | | | | | | | | | | | |
| City Bryan | State OH | Zip Code 43506 | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | | |
| C | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer AFSCME OH LOC 11/STATE OF OH | | Occupation ODJFS CUSTOMER SERVICES | | | | | | | | | | | | | | | | | | | | | | | |
| 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>210.00</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | | 210.00 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 210.00 | | | | | | | | | | | | | | | | |
| SUBTOTAL 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>215.64</td> </tr> </table> | | | | | | | | | | | | 215.64 | | | | | | | | | | |
| | | | | | | | | | 215.64 | | | | | | | | | | | | | | | | |
| TOTAL 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:
(check only one)

PAGE 183 OF 316

☒ 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. CATHY L. NEWTON

Mailing Address 221 E. Mulberry Street

City State Zip Code
Bryan OH 43506

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 11/STATE OF OH

Occupation

ODJFS CUSTOMER SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 20 / 2012

Transaction ID : SA11AI.245597

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. JAMES B. NILAND

Mailing Address 2728 Pleasant Ave

City State Zip Code
Minneapolis MN 55408

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.247917

Amount of Each Receipt this Period

160.00

Full Name (Last, First, Middle Initial)

C. KAREN NORWOOD

Mailing Address 8810 - 1/2 Belford Avenue

City State Zip Code
Bradley Int'l CA 90045

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME CA CN 36/LOCAL 3302

Occupation

TECH INSTRUCTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.249563

Amount of Each Receipt this Period

50.00

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

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

240.00

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 184 OF 316

☒ 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. DIONE O. NOVAIS ROCHA

Mailing Address 43361 Citation

City

Novi

State

MI

Zip Code

48375

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD COORDINATOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

349.49

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245898

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. DIONE O. NOVAIS ROCHA

Mailing Address 43361 Citation

City

Novi

State

MI

Zip Code

48375

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD COORDINATOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

399.49

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246099

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. VICTORIA M. NUZZI

Mailing Address 26737 Hampton Woods
Drive

City

Elkhart

State

IN

Zip Code

46514

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

REGIONAL FIELD ADMINISTRATOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

226.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246100

Amount of Each Receipt this Period

28.34

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

128.34

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 185 OF 316

☒ 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. 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 ▼

388.88

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.246972

Amount of Each Receipt this Period

97.22

Full Name (Last, First, Middle Initial)

B. ERIN S. OKANTEY

Mailing Address 2100 Washington Avenue
#7A

City

Silver Spring

State

MD

Zip Code

20910

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 ▼

275.38

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245901

Amount of Each Receipt this Period

39.34

Full Name (Last, First, Middle Initial)

C. ERIN S. OKANTEY

Mailing Address 2100 Washington Avenue
#7A

City

Silver Spring

State

MD

Zip Code

20910

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 ▼

314.72

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246102

Amount of Each Receipt this Period

39.34

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

175.90

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 186 OF 316

☒ 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. RUSSELL K. OKATA

Mailing Address 1015 Wilder Avenue #203

City

Honolulu

State

HI

Zip Code

96822-2655

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME HI LOC 152

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 05 / 2012

Transaction ID : SA11AI.247197

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. HOLLY OLSON

Mailing Address 15443 Martins Hundred Drive

City

Centerville

State

VA

Zip Code

20120

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, GENERAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245902

Amount of Each Receipt this Period

62.60

Full Name (Last, First, Middle Initial)

C. HOLLY OLSON

Mailing Address 15443 Martins Hundred Drive

City

Centerville

State

VA

Zip Code

20120

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, GENERAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246103

Amount of Each Receipt this Period

62.60

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

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

225.20

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER: PAGE 187 OF 316
 (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. KARMEN ORTLOFF | | | Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>02</td> <td></td> <td>2012</td> </tr> </table> Transaction ID : SA11AI.247737 | | | M M | / | D D | / | Y Y Y Y | 04 | | 02 | | 2012 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | | | |
| 04 | | 02 | | 2012 | | | | | | | | | | | |
| Mailing Address 3042 N. Christiana | | | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">67.74</td> </tr> </table> | | | 67.74 | | | | | | | | | |
| 67.74 | | | | | | | | | | | | | | | |
| City Chicago | State IL | Zip Code 60618 | | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td colspan="4"></td> </tr> </table> | | | C | | | | | | | | | | | | |
| C | | | | | | | | | | | | | | | |
| Name of Employer AFSCME IL CN 31 | | Occupation STAFF REPRESENTATIVE | | | | | | | | | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="5">203.22</td> </tr> </table> | | | | 203.22 | | | | | | | | | |
| 203.22 | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) B. SUSAN M. OSTHUS | | | Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>02</td> <td></td> <td>2012</td> </tr> </table> Transaction ID : SA11AI.247738 | | | M M | / | D D | / | Y Y Y Y | 04 | | 02 | | 2012 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | | | |
| 04 | | 02 | | 2012 | | | | | | | | | | | |
| Mailing Address 5200 Deerwood Lake Drive | | | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">75.36</td> </tr> </table> | | | 75.36 | | | | | | | | | |
| 75.36 | | | | | | | | | | | | | | | |
| City Springfield | State IL | Zip Code 62703 | | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td colspan="4"></td> </tr> </table> | | | C | | | | | | | | | | | | |
| C | | | | | | | | | | | | | | | |
| Name of Employer AFSCME IL CN 31 | | Occupation LEGAL COUNSEL | | | | | | | | | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="5">226.08</td> </tr> </table> | | | | 226.08 | | | | | | | | | |
| 226.08 | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) C. CURT A. OSTRANDER | | | Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td></td> <td>13</td> <td></td> <td>2012</td> </tr> </table> Transaction ID : SA11AI.245903 | | | M M | / | D D | / | Y Y Y Y | 04 | | 13 | | 2012 |
| M M | / | D D | / | Y Y Y Y | | | | | | | | | | | |
| 04 | | 13 | | 2012 | | | | | | | | | | | |
| Mailing Address 25 J. Braden Thompson Road | | | Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5">47.31</td> </tr> </table> | | | 47.31 | | | | | | | | | |
| 47.31 | | | | | | | | | | | | | | | |
| City Forestdale | State MA | Zip Code 02644-0000 | | | | | | | | | | | | | |
| FEC ID number of contributing federal political committee. <table border="1"> <tr> <td>C</td> <td colspan="4"></td> </tr> </table> | | | C | | | | | | | | | | | | |
| C | | | | | | | | | | | | | | | |
| Name of Employer AFSCME INT'L | | Occupation INT'L UNION BARGAINING REP. | | | | | | | | | | | | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ <table border="1"> <tr> <td colspan="5">331.17</td> </tr> </table> | | | | 331.17 | | | | | | | | | |
| 331.17 | | | | | | | | | | | | | | | |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | | <table border="1"> <tr> <td colspan="5">190.41</td> </tr> </table> | | | 190.41 | | | | | | | | | |
| 190.41 | | | | | | | | | | | | | | | |
| TOTAL This Period (last page this line number only)..... ▶ | | | <table border="1"> <tr> <td colspan="5"></td> </tr> </table> | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 188 OF 316

☒ 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. CURT A. OSTRANDER

Mailing Address 25 J. Braden Thompson Road

City State Zip Code
Forestdale MA 02644-0000

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 ▼

378.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246104

Amount of Each Receipt this Period

47.31

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 ▼

297.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245904

Amount of Each Receipt this Period

42.52

Full Name (Last, First, Middle Initial)

C. 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 ▼

340.16

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246105

Amount of Each Receipt this Period

42.52

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

132.35

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 189 OF 316

☒ 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. ALLISON L. PADGETT

Mailing Address 10115 Jeffreys Street
2009

City State Zip Code
Las Vegas NV 89183

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

COMMUNICATIONS SPECIALIST I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.28

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246106

Amount of Each Receipt this Period

27.66

Full Name (Last, First, Middle Initial)

B. WILLIAM M. PADISAK Jr.

Mailing Address 4886 Pine Trace Drive

City State Zip Code
Austintown OH 44515

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.16

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246369

Amount of Each Receipt this Period

23.24

Full Name (Last, First, Middle Initial)

C. HAROLD A. PALMER

Mailing Address 7565 Liddesdale Blvd.

City State Zip Code
Blacklick OH 43004

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 02 / 2012

Transaction ID : SA11AI.246773

Amount of Each Receipt this Period

40.00

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

90.90

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 190 OF 316
(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) A. HAROLD A. PALMER</p> <p>Mailing Address 7565 Liddesdale Blvd.</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Blacklick</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43004</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH LOC 4</td> <td style="width: 66%;">Occupation REGIONAL 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 ▼ 320.00 </p> | | | City Blacklick | State OH | Zip Code 43004 | Name of Employer AFSCME OH LOC 4 | Occupation REGIONAL DIRECTOR | <p>Date of Receipt</p> <table style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">M M / D D / Y Y Y Y Y Y 04 / 03 / 2012</td> <td style="width: 66%;"></td> </tr> </table> <p>Transaction ID : SA11AI.246251</p> <p>Amount of Each Receipt this Period 40.00 </p> | | M M / D D / Y Y Y Y Y Y 04 / 03 / 2012 | |
| City Blacklick | State OH | Zip Code 43004 | | | | | | | | | |
| Name of Employer AFSCME OH LOC 4 | Occupation REGIONAL DIRECTOR | | | | | | | | | | |
| M M / D D / Y Y Y Y Y Y 04 / 03 / 2012 | | | | | | | | | | | |
| <p>Full Name (Last, First, Middle Initial) B. HAROLD A. PALMER</p> <p>Mailing Address 7565 Liddesdale Blvd.</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Blacklick</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43004</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH LOC 4</td> <td style="width: 66%;">Occupation REGIONAL 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 ▼ 360.00 </p> | | | City Blacklick | State OH | Zip Code 43004 | Name of Employer AFSCME OH LOC 4 | Occupation REGIONAL DIRECTOR | <p>Date of Receipt</p> <table style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">M M / D D / Y Y Y Y Y Y 04 / 16 / 2012</td> <td style="width: 66%;"></td> </tr> </table> <p>Transaction ID : SA11AI.246311</p> <p>Amount of Each Receipt this Period 40.00 </p> | | M M / D D / Y Y Y Y Y Y 04 / 16 / 2012 | |
| City Blacklick | State OH | Zip Code 43004 | | | | | | | | | |
| Name of Employer AFSCME OH LOC 4 | Occupation REGIONAL DIRECTOR | | | | | | | | | | |
| M M / D D / Y Y Y Y Y Y 04 / 16 / 2012 | | | | | | | | | | | |
| <p>Full Name (Last, First, Middle Initial) C. HAROLD A. PALMER</p> <p>Mailing Address 7565 Liddesdale Blvd.</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Blacklick</td> <td style="width: 33%;">State OH</td> <td style="width: 33%;">Zip Code 43004</td> </tr> </table> <p>FEC ID number of contributing federal political committee. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH LOC 4</td> <td style="width: 66%;">Occupation REGIONAL 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 ▼ 400.00 </p> | | | City Blacklick | State OH | Zip Code 43004 | Name of Employer AFSCME OH LOC 4 | Occupation REGIONAL DIRECTOR | <p>Date of Receipt</p> <table style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">M M / D D / Y Y Y Y Y Y 04 / 30 / 2012</td> <td style="width: 66%;"></td> </tr> </table> <p>Transaction ID : SA11AI.246370</p> <p>Amount of Each Receipt this Period 40.00 </p> | | M M / D D / Y Y Y Y Y Y 04 / 30 / 2012 | |
| City Blacklick | State OH | Zip Code 43004 | | | | | | | | | |
| Name of Employer AFSCME OH LOC 4 | Occupation REGIONAL DIRECTOR | | | | | | | | | | |
| M M / D D / Y Y Y Y Y Y 04 / 30 / 2012 | | | | | | | | | | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | 120.00 | | | | | | | | |
| <p>TOTAL This Period (last page this line number only)..... ▶</p> | | | | | | | | | | | |

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

PAGE 191 OF 316

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

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

NAME OF COMMITTEE (In Full)

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

| | | | | |
|--|--|--|--|--|
| A. WILLIAM R. PALMQUIST Full Name (Last, First, Middle Initial) Mailing Address 733 -37th Avenue City State Zip Code Seattle WA 98122-5222 FEC ID number of contributing federal political committee. C Name of Employer Occupation AFSCME WA CN 28 STRATEGIC COORDINATOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 413.05 | | | Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 04 11 2012 </div> Transaction ID : SA11AI.249397 Amount of Each Receipt this Period 55.08 | |
| B. RACHEL S. PANCIERA Full Name (Last, First, Middle Initial) Mailing Address 5210 Biddison Avenue City State Zip Code Baltimore MD 21206 FEC ID number of contributing federal political committee. C Name of Employer Occupation AFSCME INT'L FIELD COORDINATOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 286.20 | | | Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 04 13 2012 </div> Transaction ID : SA11AI.245906 Amount of Each Receipt this Period 57.24 | |
| C. RACHEL S. PANCIERA Full Name (Last, First, Middle Initial) Mailing Address 5210 Biddison Avenue City State Zip Code Baltimore MD 21206 FEC ID number of contributing federal political committee. C Name of Employer Occupation AFSCME INT'L FIELD COORDINATOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 343.44 | | | Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> M M / D D / Y Y Y Y Y Y </div> <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-around;"> 04 30 2012 </div> Transaction ID : SA11AI.246107 Amount of Each Receipt this Period 57.24 | |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | | 169.56 | |
| TOTAL This Period (last page this line number only)..... ▶ | | | | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 192 OF 316

☒ 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. CHERYL PARISI

Mailing Address 1932 Walcott Way

City State Zip Code
Los Angeles CA 90039

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME CA CN 36

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.249538

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

B. DEBORAH JO PATTON

Mailing Address 29 N Wacker

City State Zip Code
Chicago IL 60606

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IL CN 31

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.02

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 02 / 2012

Transaction ID : SA11AI.247739

Amount of Each Receipt this Period

73.34

Full Name (Last, First, Middle Initial)

C. BARRY PEARCE

Mailing Address 130 N. Wilson Street

City State Zip Code
Bellefonte PA 16823

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.246974

Amount of Each Receipt this Period

73.16

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

216.50

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 193 OF 316

(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) A. WILLIE L. PELOTE</p> <p>Mailing Address 351 Ross Way</p> <p>City State Zip Code Sacramento CA 95864</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT 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 ▼ 367.50</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245907</p> <p>Amount of Each Receipt this Period 52.50</p> | | |
| <p>Full Name (Last, First, Middle Initial) B. WILLIE L. PELOTE</p> <p>Mailing Address 351 Ross Way</p> <p>City State Zip Code Sacramento CA 95864</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT 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 ▼ 420.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246108</p> <p>Amount of Each Receipt this Period 52.50</p> | | |
| <p>Full Name (Last, First, Middle Initial) C. JOANNE M. PELS</p> <p>Mailing Address 6987 County 38 NW</p> <p>City State Zip Code Walker MN 56484</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 326.96</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.247918</p> <p>Amount of Each Receipt this Period 81.74</p> | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>186.74</p> | | |
| <p>TOTAL 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 194 OF 316
(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) A. PAMELA PERILLO</p> <p>Mailing Address 9270 Billingsley Road</p> <p>City State Zip Code White Plains MD 20695</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ADMINISTRATIVE ASSISTANT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 248.15</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245908</p> <p>Amount of Each Receipt this Period 35.45</p> | |
| <p>Full Name (Last, First, Middle Initial) B. PAMELA PERILLO</p> <p>Mailing Address 9270 Billingsley Road</p> <p>City State Zip Code White Plains MD 20695</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ADMINISTRATIVE ASSISTANT</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 04 / 30 / 2012 Transaction ID : SA11AI.246109</p> <p>Amount of Each Receipt this Period 35.45</p> | |
| <p>Full Name (Last, First, Middle Initial) C. RANDOLPH P. PERREIRA</p> <p>Mailing Address 1044 Mokuhanu Street</p> <p>City State Zip Code Honolulu HI 96825</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME HI LOC 152 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 ▼ 442.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 05 / 2012 Transaction ID : SA11AI.247200</p> <p>Amount of Each Receipt this Period 100.00</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>170.90</p> | |
| <p>TOTAL 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 195 OF 316

☒ 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) A. RANDOLPH P. PERREIRA</p> <p>Mailing Address 1044 Mokuhanu Street</p> <p>City Honolulu State HI Zip Code 96825</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME HI LOC 152 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 ▼ 456.00</p> | | <p>Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.246193</p> <p>Amount of Each Receipt this Period 14.00</p> |
| <p>Full Name (Last, First, Middle Initial) B. ELIZABETH PERROW</p> <p>Mailing Address 958 N. Harrison Street</p> <p>City Arlington State VA Zip Code 22205</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation 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 ▼ 417.24</p> | | <p>Date of Receipt 04 / 13 / 2012 Transaction ID : SA11AI.245909</p> <p>Amount of Each Receipt this Period 65.88</p> |
| <p>Full Name (Last, First, Middle Initial) C. ELIZABETH PERROW</p> <p>Mailing Address 958 N. Harrison Street</p> <p>City Arlington State VA Zip Code 22205</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation 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 ▼ 483.12</p> | | <p>Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.246110</p> <p>Amount of Each Receipt this Period 65.88</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | <p>145.76</p> |
| <p>TOTAL 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 196 OF 316

☒ 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) A. MICHAEL S. PERRY</p> <p>Mailing Address 313 Sheridan Road</p> <p>City State Zip Code Wilmette IL 60091</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IL CN 31 DIRECTOR EMP. INV. DEV. & TRAINING</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.02</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247740</p> <p>Amount of Each Receipt this Period 73.34</p> |
| <p>Full Name (Last, First, Middle Initial) B. IVA PETERS</p> <p>Mailing Address 1939 Salem School Road</p> <p>City State Zip Code Rineyville KY 40162-9314</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 389.97</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245910</p> <p>Amount of Each Receipt this Period 55.71</p> |
| <p>Full Name (Last, First, Middle Initial) C. IVA PETERS</p> <p>Mailing Address 1939 Salem School Road</p> <p>City State Zip Code Rineyville KY 40162-9314</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 445.68</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246111</p> <p>Amount of Each Receipt this Period 55.71</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | 184.76 |
| <p>TOTAL 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 197 OF 316

☒ 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) A. KOLBY PETERSON</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. C</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 ▼ 338.87</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245911</p> <p>Amount of Each Receipt this Period 48.41</p> | | |
| <p>Full Name (Last, First, Middle Initial) B. KOLBY PETERSON</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. C</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 ▼ 387.28</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246112</p> <p>Amount of Each Receipt this Period 48.41</p> | | |
| <p>Full Name (Last, First, Middle Initial) C. RONNIE D PETERSON</p> <p>Mailing Address 1146 Rue Willette Blvd.</p> <p>City State Zip Code Ypsilanti MI 48198</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 975.92</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245912</p> <p>Amount of Each Receipt this Period 141.92</p> | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>238.74</p> | | |
| <p>TOTAL 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 316

☒ 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) A. RONNIE D PETERSON</p> <p>Mailing Address 1146 Rue Willette Blvd.</p> <p>City Ypsilanti State MI Zip Code 48198</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation 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 ▼ 1117.84</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246113</p> <p>Amount of Each Receipt this Period 141.92</p> | |
| <p>Full Name (Last, First, Middle Initial) B. RICHARD L. PETTIT</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. C</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 ▼ 363.72</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245913</p> <p>Amount of Each Receipt this Period 60.62</p> | |
| <p>Full Name (Last, First, Middle Initial) C. RICHARD L. PETTIT</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. C</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 ▼ 424.34</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246114</p> <p>Amount of Each Receipt this Period 60.62</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | 263.16 | |
| <p>TOTAL 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 199 OF 316

☒ 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. STACY PFLUGMACHER

Mailing Address 4679 Timberview Drive

City State Zip Code
Auburn IL 62615

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IL CN 31

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.52

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 02 / 2012

Transaction ID : SA11AI.247742

Amount of Each Receipt this Period

70.84

Full Name (Last, First, Middle Initial)

B. CATHERINE PHILLIPS

Mailing Address 15707 Manning Street

City State Zip Code
Detroit MI 48205

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.84

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 03 / 2012

Transaction ID : SA11AI.247522

Amount of Each Receipt this Period

29.12

Full Name (Last, First, Middle Initial)

C. CATHERINE PHILLIPS

Mailing Address 15707 Manning Street

City State Zip Code
Detroit MI 48205

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.96

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 17 / 2012

Transaction ID : SA11AI.247571

Amount of Each Receipt this Period

29.12

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

129.08

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 200 OF 316

(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

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 ▼

363.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 25 / 2012

Transaction ID : SA11AI.245751

Amount of Each Receipt this Period

66.00

Full Name (Last, First, Middle Initial)

B. 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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 03 / 2012

Transaction ID : SA11AI.246457

Amount of Each Receipt this Period

62.50

Full Name (Last, First, Middle Initial)

C. JEFFREY PITTMN

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 ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 05 / 2012

Transaction ID : SA11AI.247667

Amount of Each Receipt this Period

80.00

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

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

208.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

 FOR LINE NUMBER: PAGE 201 OF 316
 (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. RONALD W PITTS

Mailing Address 2001-A Industrial Drive

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Marion | IL | 62959 |

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME IL CN 31

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | | 02 | | 2012 |

Transaction ID : SA11AI.247743

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. JOSEPH PLUGER

Mailing Address 605 South Jackson

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Gardner | IL | 60424 |

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME IL CN 31

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | | 02 | | 2012 |

Transaction ID : SA11AI.247744

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. KEVAN L. PLUMLEE

Mailing Address 14039 Allen Road

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| Carterville | IL | 62918 |

FEC ID number of contributing federal political committee.

Name of Employer

AFSCME IL CN 31

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | | 02 | | 2012 |

Transaction ID : SA11AI.247745

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: PAGE 202 OF 316

(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) A. CLIFFORD T. POEHLER</p> <p>Mailing Address 565 Glendale Street</p> <p>City State Zip Code Minneapolis MN 55104</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MN CN 5/HENNEPIN COUNTY 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 ▼ 217.35</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 19 / 2012</p> <p>Transaction ID : SA11AI.249573</p> <p>Amount of Each Receipt this Period 24.15</p> | |
| <p>Full Name (Last, First, Middle Initial) B. CHRISTOPHER D. POLICANO</p> <p>Mailing Address 2480 16th Street NW Apt. 314</p> <p>City State Zip Code Washington DC 20009</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L 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 ▼ 525.72</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012</p> <p>Transaction ID : SA11AI.245914</p> <p>Amount of Each Receipt this Period 72.96</p> | |
| <p>Full Name (Last, First, Middle Initial) C. CHRISTOPHER D. POLICANO</p> <p>Mailing Address 2480 16th Street NW Apt. 314</p> <p>City State Zip Code Washington DC 20009</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L 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 ▼ 598.68</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012</p> <p>Transaction ID : SA11AI.246115</p> <p>Amount of Each Receipt this Period 72.96</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>170.07</p> | |
| <p>TOTAL 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 203 OF 316
 (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. NICOLE R. POLLARD

Mailing Address 9404 Nicklaus Lane

City

Laurel

State

MD

Zip Code

20708

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE GENERAL COUNSEL II

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

423.50

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 3 | | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.245915

Amount of Each Receipt this Period

60.50

Full Name (Last, First, Middle Initial)

B. NICOLE R. POLLARD

Mailing Address 9404 Nicklaus Lane

City

Laurel

State

MD

Zip Code

20708

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE GENERAL COUNSEL II

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

484.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 3 | 0 | | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.246116

Amount of Each Receipt this Period

60.50

Full Name (Last, First, Middle Initial)

C. GEORGE POPYACK

Mailing Address 919 Ocean Drive

City

Mass Beach

State

CA

Zip Code

94038

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME CA CN 57

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

217.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 2 | 3 | | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.249491

Amount of Each Receipt this Period

10.00

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

131.00

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

SCHEDULE A (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 316

☒ 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. GEORGE POPYACK

Mailing Address 919 Ocean Drive

City State Zip Code
 Mass Beach CA 94038

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME CA CN 57

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11AI.246194

Amount of Each Receipt this Period

14.00

Full Name (Last, First, Middle Initial)

B. 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 ▼

270.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 10 / 2012

Transaction ID : SA11AI.246976

Amount of Each Receipt this Period

67.68

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 ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 10 / 2012

Transaction ID : SA11AI.247885

Amount of Each Receipt this Period

80.00

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

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

161.68

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

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

FOR LINE NUMBER: PAGE 205 OF 316

(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

Full Name (Last, First, Middle Initial)

A. 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 ▼

580.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246195

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. 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 ▼

381.84

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 09 / 2012

Transaction ID : SA11AI.249455

Amount of Each Receipt this Period

90.46

Full Name (Last, First, Middle Initial)

C. DELBERT 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 INT'L

Occupation
INTERNATIONAL UNION REP.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.97

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245916

Amount of Each Receipt this Period

43.71

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

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

234.17

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 206 OF 316

☒ 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. DELBERT G. PRICE

Mailing Address 885 Haverhill Drive

City

Hamilton

State

OH

Zip Code

45013

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

INTERNATIONAL UNION REP.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.68

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246117

Amount of Each Receipt this Period

43.71

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 ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 25 / 2012

Transaction ID : SA11AI.248257

Amount of Each Receipt this Period

48.00

Full Name (Last, First, Middle Initial)

C. DEVORRUS PRYOR

Mailing Address 514 Shatto Place
3rd Floor

City

Los Angeles

State

CA

Zip Code

90020

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME CA CN 36/LOCAL 685

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 Y
04 / 13 / 2012

Transaction ID : SA11AI.249564

Amount of Each Receipt this Period

200.00

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

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

291.71

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 316
(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) A. JANET R. PULLEN</p> <p>Mailing Address 8003 Alcoa Drive</p> <p>City State Zip Code Fort Washington MD 20744</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ADMINISTRATIVE ASSISTANT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 212.70</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246118</p> <p>Amount of Each Receipt this Period 35.45</p> | |
| <p>Full Name (Last, First, Middle Initial) B. LLOYD L. RAINS</p> <p>Mailing Address 15829 Narraganset Oval</p> <p>City State Zip Code Middleburg Hts OH 44130</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 280.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 03 / 2012 Transaction ID : SA11AI.246252</p> <p>Amount of Each Receipt this Period 40.00</p> | |
| <p>Full Name (Last, First, Middle Initial) C. LLOYD L. RAINS</p> <p>Mailing Address 15829 Narraganset Oval</p> <p>City State Zip Code Middleburg Hts OH 44130</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 320.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 16 / 2012 Transaction ID : SA11AI.246312</p> <p>Amount of Each Receipt this Period 40.00</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>115.45</p> | |
| <p>TOTAL 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 208 OF 316
(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

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 ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246371

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. ZACHARY J RAMSEY

Mailing Address 6161 Stevens Forest Road

City State Zip Code
Columbia MD 21045

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

EXECUTIVE ASST TO SECRETARY TREASU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

568.20

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245918

Amount of Each Receipt this Period

62.60

Full Name (Last, First, Middle Initial)

C. ZACHARY J RAMSEY

Mailing Address 6161 Stevens Forest Road

City State Zip Code
Columbia MD 21045

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

EXECUTIVE ASST TO SECRETARY TREASU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.80

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246119

Amount of Each Receipt this Period

62.60

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

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

165.20

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

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

FOR LINE NUMBER: PAGE 209 OF 316

(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

Full Name (Last, First, Middle Initial)

A. 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 ▼

233.28

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 05 / 2012

Transaction ID : SA11AI.247668

Amount of Each Receipt this Period

58.32

Full Name (Last, First, Middle Initial)

B. PAMELA L. RAY

Mailing Address 16 Asbury Road

City State Zip Code
Charleston WV 25312

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 ▼

305.97

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245919

Amount of Each Receipt this Period

43.71

Full Name (Last, First, Middle Initial)

C. PAMELA L. RAY

Mailing Address 16 Asbury Road

City State Zip Code
Charleston WV 25312

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 ▼

349.68

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246120

Amount of Each Receipt this Period

43.71

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

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

145.74

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

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

FOR LINE NUMBER:
(check only one)

PAGE 210 OF 316

☒ 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. 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 ▼

292.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 10 / 2012

Transaction ID : SA11AI.246977

Amount of Each Receipt this Period

73.16

Full Name (Last, First, Middle Initial)

B. TERRY M. REED

Mailing Address 2737 Yellowoak Place

City State Zip Code
 Hilliard OH 43026

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 03 / 2012

Transaction ID : SA11AI.247266

Amount of Each Receipt this Period

98.50

Full Name (Last, First, Middle Initial)

C. EMMANUEL L. REEVES

Mailing Address 6615 150th Street SW
 Apt. 28

City State Zip Code
 Lakewood WA 98439

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME WA CN 28/STATE OF WA

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 25 / 2012

Transaction ID : SA11AI.249249

Amount of Each Receipt this Period

26.00

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

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

197.66

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 316

(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

Full Name (Last, First, Middle Initial)

A. STEPHEN REGENSTREIF

Mailing Address 3214 38th Street NW

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing
federal political committee.

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, RETIREE PROGRAMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.245920

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. STEPHEN REGENSTREIF

Mailing Address 3214 38th Street NW

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing
federal political committee.

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, RETIREE PROGRAMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.246121

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. DEAN REYNOLDS III

Mailing Address 1025 Delaware Avenue

City

Crawford

State

PA

Zip Code

17740

FEC ID number of contributing
federal political committee.

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 / /

Transaction ID : SA11AI.246978

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 212 OF 316

☒ 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. 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 ▼

208.80

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.246979

Amount of Each Receipt this Period

52.20

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 ▼

274.47

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245921

Amount of Each Receipt this Period

39.21

Full Name (Last, First, Middle Initial)

C. 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 ▼

313.68

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246122

Amount of Each Receipt this Period

39.21

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

130.62

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 213 OF 316

(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) A. SHAWN E. RICHARDSON</p> <p>Mailing Address 6688 Markwood Street</p> <p>City State Zip Code Worthington OH 43085</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH TRANSPORTATION TECHN</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 04 / 06 / 2012</p> <p>Transaction ID : SA11AI.245248</p> <p>Amount of Each Receipt this Period 40.00</p> | |
| <p>Full Name (Last, First, Middle Initial) B. SHAWN E. RICHARDSON</p> <p>Mailing Address 6688 Markwood Street</p> <p>City State Zip Code Worthington OH 43085</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 11/STATE OF OH TRANSPORTATION TECHN</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 04 / 20 / 2012</p> <p>Transaction ID : SA11AI.245629</p> <p>Amount of Each Receipt this Period 40.00</p> | |
| <p>Full Name (Last, First, Middle Initial) C. WILLIAM R. RICHARDSON</p> <p>Mailing Address 1731 Delia Avenue</p> <p>City State Zip Code Akron OH 44320</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/AKRON PS 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 04 / 03 / 2012</p> <p>Transaction ID : SA11AI.246464</p> <p>Amount of Each Receipt this Period 50.00</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | 130.00 | |
| <p>TOTAL 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 214 OF 316

☒ 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) A. WILLIAM R. RICHARDSON</p> <p>Mailing Address 1731 Delia Avenue</p> <p>City State Zip Code Akron OH 44320</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/AKRON PS 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 04 / 16 / 2012 Transaction ID : SA11AI.246598</p> <p>Amount of Each Receipt this Period 50.00</p> | |
| <p>Full Name (Last, First, Middle Initial) B. WILLIAM R. RICHARDSON</p> <p>Mailing Address 1731 Delia Avenue</p> <p>City State Zip Code Akron OH 44320</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/AKRON PS 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 ▼ 400.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246718</p> <p>Amount of Each Receipt this Period 50.00</p> | |
| <p>Full Name (Last, First, Middle Initial) C. MICHELLE RIDER</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. C</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 ▼ 417.60</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.246980</p> <p>Amount of Each Receipt this Period 104.40</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>204.40</p> | |
| <p>TOTAL 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 215 OF 316
 (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. THOMAS J. RITCHIE Sr. | | | 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>4</td><td></td> <td>0</td><td>3</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.247269 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 0 | 3 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 4 | | 0 | 3 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | | | |
| Mailing Address 1644 Spaulding Road | | | 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>99.76</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 99.76 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 99.76 | | | | | | | | | | | | | | | | |
| City Dayton | State OH | Zip Code 45432 | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | | |
| 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 ▼ <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>297.81</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | | 297.81 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 297.81 | | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) B. CLAUDIA ROBERSON | | | 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>4</td><td></td> <td>0</td><td>2</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.247749 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 0 | 2 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 4 | | 0 | 2 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | | | |
| Mailing Address 7340 S. Yates 2nd Fl. | | | 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>94.80</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 94.80 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 94.80 | | | | | | | | | | | | | | | | |
| City Chicago | State IL | Zip Code 60649 | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | | |
| C | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer AFSCME IL CN 31 | | Occupation ASSOCIATE DIRECTOR | | | | | | | | | | | | | | | | | | | | | | | |
| 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>284.40</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | | 284.40 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 284.40 | | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) C. TIMOTHY W. ROBERTS | | | 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>4</td><td></td> <td>2</td><td>5</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.245756 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 2 | 5 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 4 | | 2 | 5 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | | | |
| Mailing Address 5033 Ridgewood Road E. | | | 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>40.00</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 40.00 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 40.00 | | | | | | | | | | | | | | | | |
| City Springfield | State OH | Zip Code 45503 | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | | |
| 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 ▼ <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>220.00</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | | 220.00 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 220.00 | | | | | | | | | | | | | | | | |
| SUBTOTAL 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></td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>234.56</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 234.56 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 234.56 | | | | | | | | | | | | | | | | |
| TOTAL 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> <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:
(check only one)

PAGE 216 OF 316

☒ 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

| | | |
|--|--|--|
| A. JESSICA R. ROBINSON Full Name (Last, First, Middle Initial) Mailing Address 7901 Chicago Avenue City SilverSpring State MD Zip Code 20910 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation ASSOCIATE GENERAL COUNSEL II Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 548.73 | | Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245922 Amount of Each Receipt this Period 78.39 |
| B. JESSICA R. ROBINSON Full Name (Last, First, Middle Initial) Mailing Address 7901 Chicago Avenue City SilverSpring State MD Zip Code 20910 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation ASSOCIATE GENERAL COUNSEL II Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 627.12 | | Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246123 Amount of Each Receipt this Period 78.39 |
| C. LYNN ANN RODENHUIS Full Name (Last, First, Middle Initial) Mailing Address 9135 Cowenton Avenue City Perry Hall State MD Zip Code 21128 FEC ID number of contributing federal political committee. C Name of Employer AFSCME INT'L Occupation ASSOC. DIRECTOR, ORGNZNG & FLD SVCS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 398.58 | | Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245923 Amount of Each Receipt this Period 56.94 |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | 213.72 |
| 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 217 OF 316

(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

Full Name (Last, First, Middle Initial)

A. LYNN ANN RODENHUIS

Mailing Address 9135 Cowenton Avenue

City State Zip Code
Perry Hall MD 21128

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOC. DIRECTOR, ORGNZNG & FLD SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.52

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246124

Amount of Each Receipt this Period

56.94

Full Name (Last, First, Middle Initial)

B. JUANITA M. RODRIGUEZ

Mailing Address 4024 Wellington Drive

City State Zip Code
Oakdale PA 15071

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 ▼

468.72

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245924

Amount of Each Receipt this Period

66.96

Full Name (Last, First, Middle Initial)

C. JUANITA M. RODRIGUEZ

Mailing Address 4024 Wellington Drive

City State Zip Code
Oakdale PA 15071

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 ▼

535.68

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246125

Amount of Each Receipt this Period

66.96

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

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

190.86

SCHEDULE A (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 316

☒ 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) A. LAWRENCE ROEHRIG</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. C</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 ▼ 958.16</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 03 / 2012 Transaction ID : SA11AI.247524</p> <p>Amount of Each Receipt this Period 106.88</p> | |
| <p>Full Name (Last, First, Middle Initial) B. LAWRENCE ROEHRIG</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. C</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 ▼ 1065.04</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 17 / 2012 Transaction ID : SA11AI.247573</p> <p>Amount of Each Receipt this Period 106.88</p> | |
| <p>Full Name (Last, First, Middle Initial) C. LAWRENCE ROEHRIG</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. C</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 ▼ 1135.04</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246198</p> <p>Amount of Each Receipt this Period 70.00</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | 283.76 | |
| <p>TOTAL 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 219 OF 316

☒ 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) A. CHARLES ROGINSKI</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. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH LOC 4</td> <td style="width: 66%;">Occupation REGIONAL 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 ▼ 280.00</p> | | | City Galena | State OH | Zip Code 43021 | Name of Employer AFSCME OH LOC 4 | Occupation REGIONAL DIRECTOR | <p>Date of Receipt 04 / 02 / 2012</p> <p>Transaction ID : SA11AI.246775</p> <p>Amount of Each Receipt this Period 40.00</p> | |
| City Galena | State OH | Zip Code 43021 | | | | | | | |
| Name of Employer AFSCME OH LOC 4 | Occupation REGIONAL DIRECTOR | | | | | | | | |
| <p>Full Name (Last, First, Middle Initial) B. CHARLES ROGINSKI</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. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH LOC 4</td> <td style="width: 66%;">Occupation REGIONAL 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 ▼ 320.00</p> | | | City Galena | State OH | Zip Code 43021 | Name of Employer AFSCME OH LOC 4 | Occupation REGIONAL DIRECTOR | <p>Date of Receipt 04 / 03 / 2012</p> <p>Transaction ID : SA11AI.246253</p> <p>Amount of Each Receipt this Period 40.00</p> | |
| City Galena | State OH | Zip Code 43021 | | | | | | | |
| Name of Employer AFSCME OH LOC 4 | Occupation REGIONAL DIRECTOR | | | | | | | | |
| <p>Full Name (Last, First, Middle Initial) C. CHARLES ROGINSKI</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. C</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer AFSCME OH LOC 4</td> <td style="width: 66%;">Occupation REGIONAL 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 ▼ 360.00</p> | | | City Galena | State OH | Zip Code 43021 | Name of Employer AFSCME OH LOC 4 | Occupation REGIONAL DIRECTOR | <p>Date of Receipt 04 / 16 / 2012</p> <p>Transaction ID : SA11AI.246313</p> <p>Amount of Each Receipt this Period 40.00</p> | |
| City Galena | State OH | Zip Code 43021 | | | | | | | |
| Name of Employer AFSCME OH LOC 4 | Occupation REGIONAL DIRECTOR | | | | | | | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | 120.00 | | | | | | |
| <p>TOTAL 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 220 OF 316

☒ 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) A. CHARLES ROGINSKI</p> <p>Mailing Address 6124 Crystal Valley Drive</p> <p>City State Zip Code Galena OH 43021</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 400.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246372</p> <p>Amount of Each Receipt this Period 400.00</p> | |
| <p>Full Name (Last, First, Middle Initial) B. MICHAEL C. ROSS</p> <p>Mailing Address 9432 S. Harding</p> <p>City State Zip Code Evergreen Park IL 60805</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IL CN 31 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 ▼ 206.22</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247751</p> <p>Amount of Each Receipt this Period 68.74</p> | |
| <p>Full Name (Last, First, Middle Initial) C. JOSEPH P. RUGOLA</p> <p>Mailing Address 4771 Powderhorn Lane</p> <p>City State Zip Code Westerville OH 43081</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 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 ▼ 742.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 03 / 2012 Transaction ID : SA11AI.246254</p> <p>Amount of Each Receipt this Period 100.00</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>208.74</p> | |
| <p>TOTAL 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 221 OF 316

☒ 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) A. JOSEPH P. RUGOLA</p> <p>Mailing Address 4771 Powderhorn Lane</p> <p>City State Zip Code Westerville OH 43081</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 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 ▼ 842.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 16 / 2012 Transaction ID : SA11AI.246314</p> <p>Amount of Each Receipt this Period 100.00</p> | |
| <p>Full Name (Last, First, Middle Initial) B. JOSEPH P. RUGOLA</p> <p>Mailing Address 4771 Powderhorn Lane</p> <p>City State Zip Code Westerville OH 43081</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 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 ▼ 856.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246199</p> <p>Amount of Each Receipt this Period 14.00</p> | |
| <p>Full Name (Last, First, Middle Initial) C. JOSEPH P. RUGOLA</p> <p>Mailing Address 4771 Powderhorn Lane</p> <p>City State Zip Code Westerville OH 43081</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 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 ▼ 956.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246373</p> <p>Amount of Each Receipt this Period 100.00</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>214.00</p> | |
| <p>TOTAL 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 222 OF 316

☒ 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. BLAINE J RUMMEL

Mailing Address 5 E. Glebe Road
Apt. D

City State Zip Code
Alexandria VA 22305

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, COMMUNICATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.07

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245925

Amount of Each Receipt this Period

105.01

Full Name (Last, First, Middle Initial)

B. BLAINE J RUMMEL

Mailing Address 5 E. Glebe Road
Apt. D

City State Zip Code
Alexandria VA 22305

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, COMMUNICATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.08

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246126

Amount of Each Receipt this Period

105.01

Full Name (Last, First, Middle Initial)

C. GEORGE SACHARIAN

Mailing Address 126 S. Lynn Blvd.

City State Zip Code
Upper Darby PA 19082

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.64

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.246981

Amount of Each Receipt this Period

73.16

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

283.18

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 223 OF 316

☒ 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) A. JOHN SALSBURY</p> <p>Mailing Address 100 I Street SE Apt. 506</p> <p>City Washington State DC Zip Code 20003</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation FIELD 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 ▼ 245.55</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245927</p> <p>Amount of Each Receipt this Period 36.15</p> |
| <p>Full Name (Last, First, Middle Initial) B. JOHN SALSBURY</p> <p>Mailing Address 100 I Street SE Apt. 506</p> <p>City Washington State DC Zip Code 20003</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation FIELD 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 ▼ 281.70</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246128</p> <p>Amount of Each Receipt this Period 36.15</p> |
| <p>Full Name (Last, First, Middle Initial) C. LEE A. SAUNDERS</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. C</p> <p>Name of Employer AFSCME INT'L Occupation SECRETARY TREASURER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 904.54</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245928</p> <p>Amount of Each Receipt this Period 129.22</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | 201.52 |
| <p>TOTAL 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 224 OF 316
(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

Full Name (Last, First, Middle Initial)

A. LEE A. SAUNDERS

Mailing Address 7510 Alaska Avenue NW

City State Zip Code
 Washington DC 20012

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 ▼

1033.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11AI.246129

Amount of Each Receipt this Period

129.22

Full Name (Last, First, Middle Initial)

B. MARIANNE SAUNDERS

Mailing Address 48 Mullen Street

City State Zip Code
 Uniontown PA 15401-4060

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 10 / 2012

Transaction ID : SA11AI.246982

Amount of Each Receipt this Period

73.16

Full Name (Last, First, Middle Initial)

C. SHELLIE A. SAVAGE

Mailing Address 11540 Waddell Creek Rd. SW

City State Zip Code
 Olympia WA 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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 10 / 2012

Transaction ID : SA11AI.248967

Amount of Each Receipt this Period

30.00

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

232.38

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 225 OF 316

☒ 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. 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 ▼

240.00

Date of Receipt

04 / 25 / 2012

Transaction ID : SA11AI.249262

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. BELINDA C. SAVERINO

Mailing Address 11007 Pompey Drive

City Upper Malboro State MD Zip Code 20772

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

EXECUTIVE OFFICE ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.11

Date of Receipt

04 / 13 / 2012

Transaction ID : SA11AI.245929

Amount of Each Receipt this Period

57.73

Full Name (Last, First, Middle Initial)

C. BELINDA C. SAVERINO

Mailing Address 11007 Pompey Drive

City Upper Malboro State MD Zip Code 20772

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

EXECUTIVE OFFICE ADMINISTRATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.84

Date of Receipt

04 / 30 / 2012

Transaction ID : SA11AI.246130

Amount of Each Receipt this Period

57.73

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

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

145.46

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 316
(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

Full Name (Last, First, Middle Initial)

A. LAWRENCE SCANLON

Mailing Address 1108 Duke Street

City

Alexandria

State

VA

Zip Code

22314-3514

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

544.67

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245930

Amount of Each Receipt this Period

77.81

Full Name (Last, First, Middle Initial)

B. LAWRENCE SCANLON

Mailing Address 1108 Duke Street

City

Alexandria

State

VA

Zip Code

22314-3514

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

622.48

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246131

Amount of Each Receipt this Period

77.81

Full Name (Last, First, Middle Initial)

C. ALBERT SCHNAUFER

Mailing Address 400 South Flower
#65

City

Orange

State

CA

Zip Code

92868

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME CA CN 36

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

280.96

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.249541

Amount of Each Receipt this Period

70.24

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

225.86

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

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

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

FOR LINE NUMBER: PAGE 227 OF 316

(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) A. DARL D. SCHOSSOW</p> <p>Mailing Address 1910 2nd Avenue P.O. Box 189</p> <p>City State Zip Code Newport MN 55055-0189</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 450.00</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 25 / 2012 Transaction ID : SA11AI.248270</p> <p>Amount of Each Receipt this Period 100.00</p> |
| <p>Full Name (Last, First, Middle Initial) B. ERIC SCHUBERT</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. C</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 ▼ 246.08</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.246984</p> <p>Amount of Each Receipt this Period 61.52</p> |
| <p>Full Name (Last, First, Middle Initial) C. MARY SCHWANGER</p> <p>Mailing Address 419 Valley Street</p> <p>City State Zip Code Marysville PA 17053</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 458.16</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.246985</p> <p>Amount of Each Receipt this Period 114.54</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | 276.06 |
| <p>TOTAL 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 228 OF 316

☒ 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. CATHERINE SCOTT

Mailing Address 1005 Chandler Street

City

Philadelphia

State

PA

Zip Code

19111

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 47

Occupation

PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2012

Transaction ID : SA11AI.249583

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. SHARON A SCROGGINS

Mailing Address 626 Greenway Road

City

Henderson

State

NV

Zip Code

89002

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

205.93

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245931

Amount of Each Receipt this Period

30.74

Full Name (Last, First, Middle Initial)

C. SHARON A SCROGGINS

Mailing Address 626 Greenway Road

City

Henderson

State

NV

Zip Code

89002

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

FIELD ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

236.67

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246132

Amount of Each Receipt this Period

30.74

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

91.48

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 229 OF 316

☒ 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) A. CHARLES SCUDDER</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. C</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 ▼ 220.00</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 05 / 2012</p> <p>Transaction ID : SA11AI.247670</p> <p>Amount of Each Receipt this Period 55.00</p> |
| <p>Full Name (Last, First, Middle Initial) B. SHELLEY K. SEEBERG</p> <p>Mailing Address 13096 Charlston Way</p> <p>City Rosemount State MN Zip Code 55068</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 343.82</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012</p> <p>Transaction ID : SA11AI.245932</p> <p>Amount of Each Receipt this Period 46.26</p> |
| <p>Full Name (Last, First, Middle Initial) C. SHELLEY K. SEEBERG</p> <p>Mailing Address 13096 Charlston Way</p> <p>City Rosemount State MN Zip Code 55068</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 390.08</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012</p> <p>Transaction ID : SA11AI.246133</p> <p>Amount of Each Receipt this Period 46.26</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | <p>147.52</p> |
| <p>TOTAL 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 230 OF 316

☒ 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. JOHN SEFERIAN

Mailing Address 1425 Foxhall Road NW

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

CHAIRPERSON, JUDICIAL PANEL

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

248.72

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245933

Amount of Each Receipt this Period

13.30

Full Name (Last, First, Middle Initial)

B. JOHN SEFERIAN

Mailing Address 1425 Foxhall Road NW

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

CHAIRPERSON, JUDICIAL PANEL

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

262.02

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246134

Amount of Each Receipt this Period

13.30

Full Name (Last, First, Middle Initial)

C. ELIOT A. SEIDE

Mailing Address 300 Hardman Avenue South

City

South St. Paul

State

MN

Zip Code

55075

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

413.28

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.247921

Amount of Each Receipt this Period

92.82

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:
 (check only one)

PAGE 231 OF 316

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <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. ELIOT A. SEIDE

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

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.28

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 30 | / | 2012 |

Transaction ID : SA11AI.246201

Amount of Each Receipt this Period

14.00

Full Name (Last, First, Middle Initial)

B. MICHELLE A SFORZA

Mailing Address 415 U Street NW

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20001 |

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASST. DIRECTOR, CORPORATE AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

357.70

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 13 | / | 2012 |

Transaction ID : SA11AI.245934

Amount of Each Receipt this Period

51.10

Full Name (Last, First, Middle Initial)

C. MICHELLE A SFORZA

Mailing Address 415 U Street NW

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20001 |

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASST. DIRECTOR, CORPORATE AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.80

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 30 | / | 2012 |

Transaction ID : SA11AI.246135

Amount of Each Receipt this Period

51.10

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

116.20

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 232 OF 316

☒ 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. 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 ▼

458.16

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 10 / 2012

Transaction ID : SA11AI.246986

Amount of Each Receipt this Period

114.54

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 ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 25 / 2012

Transaction ID : SA11AI.245757

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

C. GARY SHIMER

Mailing Address 5421 Marcy Street

City State Zip Code
 Warren MI 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 ▼

203.84

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 03 / 2012

Transaction ID : SA11AI.247528

Amount of Each Receipt this Period

29.12

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

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

213.66

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

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

FOR LINE NUMBER:
(check only one)

PAGE 233 OF 316

☒ 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) A. GARY SHIMER</p> <p>Mailing Address 5421 Marcy Street</p> <p>City Warren State MI Zip Code 48091</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 232.96</p> | | <p>Date of Receipt 04 / 17 / 2012 Transaction ID : SA11AI.247577 </p> <p>Amount of Each Receipt this Period 29.12</p> |
| <p>Full Name (Last, First, Middle Initial) B. SANDRA S. SHONBORN</p> <p>Mailing Address P.O. Box 123</p> <p>City Jacksonville State OH Zip Code 45740</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 260.65</p> | | <p>Date of Receipt 04 / 03 / 2012 Transaction ID : SA11AI.247274 </p> <p>Amount of Each Receipt this Period 87.32</p> |
| <p>Full Name (Last, First, Middle Initial) C. JASON T. SIDENER</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. C</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 ▼ 220.00</p> | | <p>Date of Receipt 04 / 03 / 2012 Transaction ID : SA11AI.249515 </p> <p>Amount of Each Receipt this Period 55.00</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | 171.44 |
| <p>TOTAL 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 234 OF 316

☒ 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) A. BETTY J. SIMMONS-TALLEY</p> <p>Mailing Address 2189 Lexington Avenue</p> <p>City State Zip Code Columbus OH 43211</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/COLUMBUS CITY 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 ▼ 215.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2012</p> <p>Transaction ID : SA11AI.246878</p> <p>Amount of Each Receipt this Period 40.00</p> | |
| <p>Full Name (Last, First, Middle Initial) B. BETTY J. SIMMONS-TALLEY</p> <p>Mailing Address 2189 Lexington Avenue</p> <p>City State Zip Code Columbus OH 43211</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/COLUMBUS CITY 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 ▼ 240.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 09 / 2012</p> <p>Transaction ID : SA11AI.246837</p> <p>Amount of Each Receipt this Period 25.00</p> | |
| <p>Full Name (Last, First, Middle Initial) C. BETTY J. SIMMONS-TALLEY</p> <p>Mailing Address 2189 Lexington Avenue</p> <p>City State Zip Code Columbus OH 43211</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4/COLUMBUS CITY 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 ▼ 265.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 23 / 2012</p> <p>Transaction ID : SA11AI.246868</p> <p>Amount of Each Receipt this Period 25.00</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>90.00</p> | |
| <p>TOTAL 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 316
(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) A. ISSA J. SIMPSON</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. C</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 ▼ 240.00</p> | | <p>Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.249570 </p> <p>Amount of Each Receipt this Period 60.00 </p> |
| <p>Full Name (Last, First, Middle Initial) B. ROBERTA J. SKOK</p> <p>Mailing Address 775 Township Road #2204</p> <p>City Perrysville State OH Zip Code 44864</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 257.07</p> | | <p>Date of Receipt 04 / 03 / 2012 Transaction ID : SA11AI.247275 </p> <p>Amount of Each Receipt this Period 87.32 </p> |
| <p>Full Name (Last, First, Middle Initial) C. TERRY SKULTETY</p> <p>Mailing Address 222 Meade Street</p> <p>City Homer City State PA Zip Code 15748</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 246.08</p> | | <p>Date of Receipt 04 / 10 / 2012 Transaction ID : SA11AI.246988 </p> <p>Amount of Each Receipt this Period 61.52 </p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | 208.84 |
| <p>TOTAL 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 236 OF 316

☒ 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. BETTY SMITH

Mailing Address 19292 Archer

City

Detroit

State

MI

Zip Code

48219

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

232.82

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 03 / 2012

Transaction ID : SA11AI.247529

Amount of Each Receipt this Period

33.26

Full Name (Last, First, Middle Initial)

B. BETTY SMITH

Mailing Address 19292 Archer

City

Detroit

State

MI

Zip Code

48219

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

266.08

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 17 / 2012

Transaction ID : SA11AI.247578

Amount of Each Receipt this Period

33.26

Full Name (Last, First, Middle Initial)

C. CONNIE SMITH

Mailing Address 1739 E 24th Street

City

Capitol Heights

State

IA

Zip Code

50317

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IA CN 61

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

234.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.247608

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 237 OF 316

(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) A. DEREK L. SMITH</p> <p>Mailing Address 4306 Broken Arrow Court</p> <p>City State Zip Code Clinton MD 20735</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT DIRECTOR, GENERAL SVCS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 315.89</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245937</p> <p>Amount of Each Receipt this Period 45.39</p> | | |
| <p>Full Name (Last, First, Middle Initial) B. DEREK L. SMITH</p> <p>Mailing Address 4306 Broken Arrow Court</p> <p>City State Zip Code Clinton MD 20735</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT DIRECTOR, GENERAL SVCS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 361.28</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246138</p> <p>Amount of Each Receipt this Period 45.39</p> | | |
| <p>Full Name (Last, First, Middle Initial) C. NEFERTITI SMITH</p> <p>Mailing Address 2013 S. 16th Avenue</p> <p>City State Zip Code Broadview IL 60155</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IL CN 31 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 ▼ 250.98</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247752</p> <p>Amount of Each Receipt this Period 83.66</p> | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>174.44</p> | | |
| <p>TOTAL 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 238 OF 316

(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

Full Name (Last, First, Middle Initial)

A. PEARL ALICE SMITH

Mailing Address 29 Hope Road

City

Cranston

State

RI

Zip Code

02921-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

PEOPLE COORDINATOR III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.10

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245938

Amount of Each Receipt this Period

44.82

Full Name (Last, First, Middle Initial)

B. PEARL ALICE SMITH

Mailing Address 29 Hope Road

City

Cranston

State

RI

Zip Code

02921-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

PEOPLE COORDINATOR III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.92

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246139

Amount of Each Receipt this Period

44.82

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER SMUDDE

Mailing Address 1821 Clearview Drive

City

Springfield

State

IL

Zip Code

62704

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IL CN 31

Occupation

MIS SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.02

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 02 / 2012

Transaction ID : SA11AI.247753

Amount of Each Receipt this Period

73.34

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

162.98

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 239 OF 316
(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. NORMAN L. SNYDERMailing Address 139 Sycamore Street East
#4

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| St. Paul | MN | 55117 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 5/RAMSEY COUNTY

Occupation

COUNSELOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 1 | 8 | / | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.249574

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

B. SHARON SOBER

Mailing Address 212 5th Street

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Catawissa | PA | 17820 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.16

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 1 | 0 | / | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.246990

Amount of Each Receipt this Period

114.54

Full Name (Last, First, Middle Initial)

C. DARRIN SPANNMailing 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 ▼

403.88

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 1 | 0 | / | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.246991

Amount of Each Receipt this Period

97.22

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

246.76

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 240 OF 316

☒ 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) A. JAMES L. SPEARS JR.</p> <p>Mailing Address 7537 Claiborne Woods Road</p> <p>City State Zip Code Charlotte NC 28216</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 233.38</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245939</p> <p>Amount of Each Receipt this Period 33.34</p> | | |
| <p>Full Name (Last, First, Middle Initial) B. JAMES L. SPEARS JR.</p> <p>Mailing Address 7537 Claiborne Woods Road</p> <p>City State Zip Code Charlotte NC 28216</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 266.72</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246140</p> <p>Amount of Each Receipt this Period 33.34</p> | | |
| <p>Full Name (Last, First, Middle Initial) C. BEVERLY J. SPETZ</p> <p>Mailing Address 112 Elmwood Street</p> <p>City State Zip Code Delta OH 43515</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME OH LOC 4 ORGANIZER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 409.36</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 03 / 2012 Transaction ID : SA11AI.246257</p> <p>Amount of Each Receipt this Period 58.48</p> | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>125.16</p> | | |
| <p>TOTAL 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 241 OF 316
(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

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 ▼

467.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 16 / 2012

Transaction ID : SA11AI.246317

Amount of Each Receipt this Period

58.48

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 ▼

507.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 16 / 2012

Transaction ID : SA11AI.246776

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. 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 ▼

566.32

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246376

Amount of Each Receipt this Period

58.48

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

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

156.96

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 316

(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

Full Name (Last, First, Middle Initial)

A. LARRY SPIVACK

Mailing Address 733 S. Lombard Avenue

City

Oak Park

State

IL

Zip Code

60304-1607

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IL CN 31

Occupation

COLLECTIVE BARGAINING SUPERVISOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 02 / 2012

Transaction ID : SA11AI.247754

Amount of Each Receipt this Period

83.66

Full Name (Last, First, Middle Initial)

B. KAMALA B. SRIKAR

Mailing Address 9908 Colebrook Avenue

City

Potomac

State

MD

Zip Code

20854

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOC. DIRECTOR, CONF & TRAVEL SVCS

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

434.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245940

Amount of Each Receipt this Period

51.10

Full Name (Last, First, Middle Initial)

C. KAMALA B. SRIKAR

Mailing Address 9908 Colebrook Avenue

City

Potomac

State

MD

Zip Code

20854

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOC. DIRECTOR, CONF & TRAVEL SVCS

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

485.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246141

Amount of Each Receipt this Period

51.10

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

185.86

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

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

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

FOR LINE NUMBER: PAGE 243 OF 316

(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) A. ARTHUR JAMES STANLEY</p> <p>Mailing Address 2939 Graham Road</p> <p>City Falls Church State VA Zip Code 22842</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 206.08</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245941</p> <p>Amount of Each Receipt this Period 29.44</p> | |
| <p>Full Name (Last, First, Middle Initial) B. ARTHUR JAMES STANLEY</p> <p>Mailing Address 2939 Graham Road</p> <p>City Falls Church State VA Zip Code 22842</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 236.06</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246142</p> <p>Amount of Each Receipt this Period 29.98</p> | |
| <p>Full Name (Last, First, Middle Initial) C. RUTH M STEINMETZ</p> <p>Mailing Address 3835 North 9th Street #309E</p> <p>City Arlington State VA Zip Code 22203</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASSIST. DIRECTOR, CONF. & TRVL SVCS</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 04 / 13 / 2012 Transaction ID : SA11AI.245942</p> <p>Amount of Each Receipt this Period 98.42</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>98.42</p> | |
| <p>TOTAL 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 244 OF 316

☒ 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) A. RUTH M STEINMETZ</p> <p>Mailing Address 3835 North 9th Street #309E</p> <p>City State Zip Code Arlington VA 22203</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSIST. DIRECTOR, CONF. & TRVL SVCS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 312.00</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246143</p> <p>Amount of Each Receipt this Period 39.00</p> |
| <p>Full Name (Last, First, Middle Initial) B. JUDY R STEVENS</p> <p>Mailing Address 7006 Stone Mill Place</p> <p>City State Zip Code Alexandria VA 22306</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 313.74</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245943</p> <p>Amount of Each Receipt this Period 44.82</p> |
| <p>Full Name (Last, First, Middle Initial) C. JUDY R STEVENS</p> <p>Mailing Address 7006 Stone Mill Place</p> <p>City State Zip Code Alexandria VA 22306</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 358.56</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246144</p> <p>Amount of Each Receipt this Period 44.82</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | <p>128.64</p> |
| <p>TOTAL 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 245 OF 316
(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) A. WILLIAM STOUFFER</p> <p>Mailing Address 29B - 2nd Street</p> <p>City North Irwin State PA Zip Code 15642</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 292.64</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.246993 </p> <p>Amount of Each Receipt this Period 73.16 </p> | |
| <p>Full Name (Last, First, Middle Initial) B. CHUCK B. STOUT</p> <p>Mailing Address 3073 Twin Lakes Drive</p> <p>City Springfield State IL Zip Code 62707-9312</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME IL CN 31 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 ▼ 203.22</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247756 </p> <p>Amount of Each Receipt this Period 67.74 </p> | |
| <p>Full Name (Last, First, Middle Initial) C. ANDREA STRADER</p> <p>Mailing Address 1234 Massachusetts Avenue NW #524</p> <p>City Washington State DC Zip Code 20005</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation 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 ▼ 341.11</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245944 </p> <p>Amount of Each Receipt this Period 48.73 </p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>189.63</p> | |
| <p>TOTAL 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 246 OF 316

☒ 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. 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 ▼

389.84

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246145

Amount of Each Receipt this Period

48.73

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 ▼

209.60

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246146

Amount of Each Receipt this Period

26.20

Full Name (Last, First, Middle Initial)

C. TIMOTHY J. STRECKER

Mailing Address 1603 E 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 DIRECTOR, INFORMATION SYS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.54

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245946

Amount of Each Receipt this Period

55.42

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

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

130.35

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 316

(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) A. TIMOTHY J. STRECKER</p> <p>Mailing Address 1603 E Street SE</p> <p>City Washington State DC Zip Code 20003</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ASSOCIATE DIRECTOR, INFORMATION SYS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 435.96</p> | | | <p>Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.246147 </p> <p>Amount of Each Receipt this Period 55.42 </p> | |
| <p>Full Name (Last, First, Middle Initial) B. MICHAEL E. SUKAL</p> <p>Mailing Address 852 Darlington Drive</p> <p>City Avon State IN Zip Code 46123</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 510.72</p> | | | <p>Date of Receipt 04 / 13 / 2012 Transaction ID : SA11AI.245948 </p> <p>Amount of Each Receipt this Period 72.96 </p> | |
| <p>Full Name (Last, First, Middle Initial) C. MICHAEL E. SUKAL</p> <p>Mailing Address 852 Darlington Drive</p> <p>City Avon State IN Zip Code 46123</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 583.68</p> | | | <p>Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.246149 </p> <p>Amount of Each Receipt this Period 72.96 </p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>201.34</p> | |
| <p>TOTAL 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 248 OF 316

☒ 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) A. MARY E. SULLIVAN</p> <p>Mailing Address 61 Woodside Drive</p> <p>City Albany State NY Zip Code 12208-1157</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME NY LOC 1000 Occupation 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 ▼ 500.00</p> | | | <p>Date of Receipt 04 / 10 / 2012 Transaction ID : SA11AI.249466 </p> <p>Amount of Each Receipt this Period 25.00 </p> | |
| <p>Full Name (Last, First, Middle Initial) B. MARY E. SULLIVAN</p> <p>Mailing Address 61 Woodside Drive</p> <p>City Albany State NY Zip Code 12208-1157</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME NY LOC 1000 Occupation 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 ▼ 525.00</p> | | | <p>Date of Receipt 04 / 26 / 2012 Transaction ID : SA11AI.249467 </p> <p>Amount of Each Receipt this Period 25.00 </p> | |
| <p>Full Name (Last, First, Middle Initial) C. MARY E. SULLIVAN</p> <p>Mailing Address 61 Woodside Drive</p> <p>City Albany State NY Zip Code 12208-1157</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME NY LOC 1000 Occupation 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 ▼ 625.00</p> | | | <p>Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.246202 </p> <p>Amount of Each Receipt this Period 100.00 </p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | 150.00 | |
| <p>TOTAL 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 249 OF 316
 (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. MICHAEL SVEDA

Mailing Address 439 Willow Circle

City

Allentown

State

PA

Zip Code

18102

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

208.80

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 0 | | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.246994

Amount of Each Receipt this Period

52.20

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 ▼

201.95

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 0 | 3 | | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.246258

Amount of Each Receipt this Period

28.85

Full Name (Last, First, Middle Initial)

C. 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 ▼

230.80

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 6 | | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.246318

Amount of Each Receipt this Period

28.85

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

109.90

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

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

PAGE 250 OF 316

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <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 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 ▼

259.65

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 30 | / | 2012 |

Transaction ID : SA11AI.246377

Amount of Each Receipt this Period

28.85

Full Name (Last, First, Middle Initial)

B. JEFFREY M. TAGGARTMailing 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 ▼

844.32

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 13 | / | 2012 |

Transaction ID : SA11AI.245949

Amount of Each Receipt this Period

121.85

Full Name (Last, First, Middle Initial)

C. JEFFREY M. TAGGARTMailing 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 ▼

966.17

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 30 | / | 2012 |

Transaction ID : SA11AI.246150

Amount of Each Receipt this Period

121.85

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

272.55

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 251 OF 316

☒ 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) A. MIGUEL TAMAYO</p> <p>Mailing Address 2201 Broadway Suite 715</p> <p>City State Zip Code Oakland CA 94612</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME LOC 3299, HED 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 Y 04 / 30 / 2012 Transaction ID : SA11AI.249493</p> <p>Amount of Each Receipt this Period 65.00</p> |
| <p>Full Name (Last, First, Middle Initial) B. MOHAMMED TEHRANI</p> <p>Mailing Address 1424 Wakeforest Drive</p> <p>City State Zip Code Gaithersburg MD 20879</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT DIRECTOR, OPERATIONS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 335.00</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245950</p> <p>Amount of Each Receipt this Period 48.41</p> |
| <p>Full Name (Last, First, Middle Initial) C. MOHAMMED TEHRANI</p> <p>Mailing Address 1424 Wakeforest Drive</p> <p>City State Zip Code Gaithersburg MD 20879</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L ASSISTANT DIRECTOR, OPERATIONS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 383.41</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246151</p> <p>Amount of Each Receipt this Period 48.41</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | <p>161.82</p> |
| <p>TOTAL 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 252 OF 316

(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

Full Name (Last, First, Middle Initial)

A. DAVID TESTER

Mailing Address 6955 H New Oxford Road

City State Zip Code
Harrisburg PA 17112

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

TRANSPORTATION TECHNICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.32

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.246995

Amount of Each Receipt this Period

61.52

Full Name (Last, First, Middle Initial)

B. 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 ▼

203.84

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 03 / 2012

Transaction ID : SA11AI.247531

Amount of Each Receipt this Period

29.12

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 ▼

232.96

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 17 / 2012

Transaction ID : SA11AI.247580

Amount of Each Receipt this Period

29.12

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

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

119.76

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 316

(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

Full Name (Last, First, Middle Initial)

A. ROBERT L. THOMPSON

Mailing Address 927 Gibbs Avenue, NE

City State Zip Code
Canton OH 44705-1074

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.65

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 03 / 2012

Transaction ID : SA11AI.247282

Amount of Each Receipt this Period

87.32

Full Name (Last, First, Middle Initial)

B. FRANK THORNTON JR.

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 ▼

203.36

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 05 / 2012

Transaction ID : SA11AI.247673

Amount of Each Receipt this Period

50.84

Full Name (Last, First, Middle Initial)

C. HELEN THORNTON

Mailing Address 500 N. Elmwood

City State Zip Code
Oak Park IL 60302

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME IL CN 31

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.08

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 02 / 2012

Transaction ID : SA11AI.247759

Amount of Each Receipt this Period

75.36

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

213.52

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 254 OF 316

(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

Full Name (Last, First, Middle Initial)

A. JOHN THORSON

Mailing Address 555 Selby Avenue

City

Saint Paul

State

MN

Zip Code

55102

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MN CN 5/CN14

Occupation

POLITICAL ACTION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.29

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.247922

Amount of Each Receipt this Period

71.14

Full Name (Last, First, Middle Initial)

B. TAMARA L. TOCHER

Mailing Address 321 E. 19th Street

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.76

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245951

Amount of Each Receipt this Period

70.68

Full Name (Last, First, Middle Initial)

C. TAMARA L. TOCHER

Mailing Address 321 E. 19th Street

City

Olympia

State

WA

Zip Code

98501

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.44

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246152

Amount of Each Receipt this Period

70.68

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

212.50

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 255 OF 316

(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) A. LEIGH TOMLINSON</p> <p>Mailing Address 930 Stag Thicket Lane</p> <p>City State Zip Code Mason MI 48854-1400</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MI CN 25 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 ▼ 267.82</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 03 / 2012 Transaction ID : SA11AI.247533</p> <p>Amount of Each Receipt this Period 38.26</p> |
| <p>Full Name (Last, First, Middle Initial) B. LEIGH TOMLINSON</p> <p>Mailing Address 930 Stag Thicket Lane</p> <p>City State Zip Code Mason MI 48854-1400</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME MI CN 25 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 ▼ 306.08</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 17 / 2012 Transaction ID : SA11AI.247582</p> <p>Amount of Each Receipt this Period 38.26</p> |
| <p>Full Name (Last, First, Middle Initial) C. TOM TOSTI</p> <p>Mailing Address 327 Lincoln Avenue</p> <p>City State Zip Code Bristol PA 19007</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 458.16</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.246996</p> <p>Amount of Each Receipt this Period 114.54</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> <p>TOTAL This Period (last page this line number only)..... ▶</p> | | <p>191.06</p> |

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 316
(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) A. DOROTHY TOWNSEND</p> <p>Mailing Address 6837 SW 39th Drive</p> <p>City Miramar State FL Zip Code 33023</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 446.11</p> | | | <p>Date of Receipt 04 / 13 / 2012 Transaction ID : SA11AI.245952</p> <p>Amount of Each Receipt this Period 63.73</p> | | |
| <p>Full Name (Last, First, Middle Initial) B. DOROTHY TOWNSEND</p> <p>Mailing Address 6837 SW 39th Drive</p> <p>City Miramar State FL Zip Code 33023</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 509.84</p> | | | <p>Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.246153</p> <p>Amount of Each Receipt this Period 63.73</p> | | |
| <p>Full Name (Last, First, Middle Initial) C. VON TREAS</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. C</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 ▼ 208.80</p> | | | <p>Date of Receipt 04 / 10 / 2012 Transaction ID : SA11AI.246997</p> <p>Amount of Each Receipt this Period 52.20</p> | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>179.66</p> | | |
| <p>TOTAL 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 257 OF 316

(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

Full Name (Last, First, Middle Initial)

A. LISA TROVALLI

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 ▼

270.32

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.246998

Amount of Each Receipt this Period

67.58

Full Name (Last, First, Middle Initial)

B. GEORGE R. TUCKER

Mailing Address 13925 Sylvania Avenue

City

Berkey

State

OH

Zip Code

43504

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

217.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 03 / 2012

Transaction ID : SA11AI.247283

Amount of Each Receipt this Period

87.32

Full Name (Last, First, Middle Initial)

C. STEVEN M. TULLY

Mailing Address 673 Sloop Road

City

Pittsburgh

State

PA

Zip Code

15237

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT TO REGIONAL DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

280.49

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245953

Amount of Each Receipt this Period

40.07

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

194.97

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 258 OF 316

(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

Full Name (Last, First, Middle Initial)

A. STEVEN M. TULLY

Mailing Address 673 Sloop Road

City

Pittsburgh

State

PA

Zip Code

15237

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSISTANT TO REGIONAL DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

320.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246154

Amount of Each Receipt this Period

40.07

Full Name (Last, First, Middle Initial)

B. JOHN TWIFORD

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 ▼

226.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.246999

Amount of Each Receipt this Period

56.70

Full Name (Last, First, Middle Initial)

C. KAREN VALENTINE

Mailing Address 154 Stoney Drive

City

Dover

State

DE

Zip Code

19904

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME DE CN 81

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

266.39

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 09 / 2012

Transaction ID : SA11AI.249417

Amount of Each Receipt this Period

64.70

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

161.47

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 259 OF 316
 (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. OSVALDO VALENZUELA | | | Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247760 | | |
| Mailing Address 6962 N. Hamilton Avenue #E | | | | | |
| City | State | Zip Code | | | |
| Chicago | IL | 60645 | | | |
| FEC ID number of contributing federal political committee. | | C | | | |
| Name of Employer | | Occupation | | | |
| AFSCME IL CN 31 | | STAFF REPRESENTATIVE | | | |
| Receipt For: | | Aggregate Year-to-Date ▼ | | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | 203.22 | | | |
| Full Name (Last, First, Middle Initial) B. JAMES C. VALLEY | | | Date of Receipt M M / D D / Y Y Y Y Y 04 / 24 / 2012 Transaction ID : SA11AI.249510 | | |
| Mailing Address 3742 Sunny Wood Drive | | | | | |
| City | State | Zip Code | | | |
| De Forest | WI | 53532 | | | |
| FEC ID number of contributing federal political committee. | | C | | | |
| Name of Employer | | Occupation | | | |
| AFSCME WI CN 40/MADISON | | STAFF REPRESENTATIVE | | | |
| Receipt For: | | Aggregate Year-to-Date ▼ | | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | 225.00 | | | |
| Full Name (Last, First, Middle Initial) C. STEPHEN T. VELDHEER | | | Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245955 | | |
| Mailing Address 2319 N. Sawyer Court | | | | | |
| City | State | Zip Code | | | |
| Chicago | IL | 60647 | | | |
| FEC ID number of contributing federal political committee. | | C | | | |
| Name of Employer | | Occupation | | | |
| AFSCME INT'L | | ORGANIZING COORDINATOR | | | |
| Receipt For: | | Aggregate Year-to-Date ▼ | | | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | 219.44 | | | |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | | 132.66 | | |
| TOTAL This Period (last page this line number only)..... ▶ | | | | | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 260 OF 316

☒ 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. STEPHEN T. VELDHEER

Mailing Address 2319 N. Sawyer Court

City State Zip Code
Chicago IL 60647

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ORGANIZING COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.18

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246156

Amount of Each Receipt this Period

30.74

Full Name (Last, First, Middle Initial)

B. ALDO E. VENNETTILLI

Mailing Address 1087 Country Coach Drive

City State Zip Code
Henderson NV 89002

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245956

Amount of Each Receipt this Period

90.06

Full Name (Last, First, Middle Initial)

C. ALDO E. VENNETTILLI

Mailing Address 1087 Country Coach Drive

City State Zip Code
Henderson NV 89002

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.96

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246157

Amount of Each Receipt this Period

90.06

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

210.86

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 261 OF 316

☒ 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) A. ANTHONY VERNELL</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. C</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 ▼ 210.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 03 / 2012 Transaction ID : SA11AI.246261</p> <p>Amount of Each Receipt this Period 30.00</p> | | |
| <p>Full Name (Last, First, Middle Initial) B. ANTHONY VERNELL</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. C</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 ▼ 240.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 16 / 2012 Transaction ID : SA11AI.246321</p> <p>Amount of Each Receipt this Period 30.00</p> | | |
| <p>Full Name (Last, First, Middle Initial) C. ANTHONY VERNELL</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. C</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 ▼ 270.00</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246380</p> <p>Amount of Each Receipt this Period 30.00</p> | | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>90.00</p> | | |
| <p>TOTAL 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 262 OF 316

☒ 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. JESSICA A. VERNON

Mailing Address 1421 Inglis Avenue

City State Zip Code
Columbus OH 43212

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 ▼

255.42

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245957

Amount of Each Receipt this Period

37.84

Full Name (Last, First, Middle Initial)

B. JESSICA A. VERNON

Mailing Address 1421 Inglis Avenue

City State Zip Code
Columbus OH 43212

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 ▼

293.26

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246158

Amount of Each Receipt this Period

37.84

Full Name (Last, First, Middle Initial)

C. CATHERINE A. VICTOR

Mailing Address 36394 Lakeshore Blvd.

City State Zip Code
East Lake OH 44095

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/WILLOUGHBY

Occupation

BUS DRIVER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.72

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 23 / 2012

Transaction ID : SA11AI.246653

Amount of Each Receipt this Period

20.84

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

96.52

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 263 OF 316

(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

Full Name (Last, First, Middle Initial)

A. MARGARET WALCOTT

Mailing Address 200 Martin Luther King Jr. Blvd.

City State Zip Code
 Columbus OH 43203

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/COLUMBUS CITY

Occupation

CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 23 / 2012

Transaction ID : SA11AI.246872

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. FLORA M. WALKER

Mailing Address 2492 Ram Crossingway

City State Zip Code
 Henderson NV 89074

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1021.37

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 13 / 2012

Transaction ID : SA11AI.245958

Amount of Each Receipt this Period

145.91

Full Name (Last, First, Middle Initial)

C. FLORA M. WALKER

Mailing Address 2492 Ram Crossingway

City State Zip Code
 Henderson NV 89074

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1167.28

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11AI.246159

Amount of Each Receipt this Period

145.91

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

316.82

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 264 OF 316

(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

Full Name (Last, First, Middle Initial)

A. JAMES A. WARD

Mailing Address 5692 Northpointe Parkway

City State Zip Code
 Lorain OH 44053

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 4/LORAIN COUNTY

Occupation

SOCIAL SERVICE AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 16 / 2012

Transaction ID : SA11AI.246781

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. DAVID WARRICK

Mailing Address 2638 Jay Court

City State Zip Code
 Indianapolis IN 46229

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME IN CN 62

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11AI.246205

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

C. JO ANN WAUGH

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 ▼

226.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 10 / 2012

Transaction ID : SA11AI.247000

Amount of Each Receipt this Period

56.70

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

166.70

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 265 OF 316

(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) A. LONITA M. WAYBRIGHT</p> <p>Mailing Address 3008 Athens Circle</p> <p>City State Zip Code Bowie MD 20716</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 588.75</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245959</p> <p>Amount of Each Receipt this Period 85.41</p> | |
| <p>Full Name (Last, First, Middle Initial) B. LONITA M. WAYBRIGHT</p> <p>Mailing Address 3008 Athens Circle</p> <p>City State Zip Code Bowie MD 20716</p> <p>FEC ID number of contributing federal political committee. C</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 ▼ 674.16</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.246160</p> <p>Amount of Each Receipt this Period 85.41</p> | |
| <p>Full Name (Last, First, Middle Initial) C. JOANNA L. WEBB-GAUVIN</p> <p>Mailing Address 1200 W. Lawrence #12</p> <p>City State Zip Code Springfield IL 62704</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IL CN 31 RETIREE PROGRAMS DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 220.02</p> | | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247762</p> <p>Amount of Each Receipt this Period 73.34</p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | <p>244.16</p> | |
| <p>TOTAL 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 266 OF 316

(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

Full Name (Last, First, Middle Initial)

A. BRIAN V. WEEKS

Mailing Address 8033 Exceisior Drive
Apt. A

City State Zip Code
Madison WI 53717

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.18

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245960

Amount of Each Receipt this Period

49.74

Full Name (Last, First, Middle Initial)

B. BRIAN V. WEEKS

Mailing Address 8033 Exceisior Drive
Apt. A

City State Zip Code
Madison WI 53717

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.28

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246161

Amount of Each Receipt this Period

51.10

Full Name (Last, First, Middle Initial)

C. CINDY L. WEIBLE

Mailing Address 5849 Rambo Lane

City State Zip Code
Toledo OH 43623

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/WASHINGTON LS

Occupation

CUSTODIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.16

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 23 / 2012

Transaction ID : SA11AI.246655

Amount of Each Receipt this Period

19.24

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

120.08

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

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

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

FOR LINE NUMBER: PAGE 267 OF 316

(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

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 ▼

1063.51

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245961

Amount of Each Receipt this Period

151.93

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 ▼

1215.44

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246162

Amount of Each Receipt this Period

151.93

Full Name (Last, First, Middle Initial)

C. BILL WEISS

Mailing Address 33 Fairmor Drive

City State Zip Code
Morgantown WV 26501

FEC ID number of contributing
federal political committee.

C

Name of Employer

WV RET CHPT 77

Occupation

RETIREE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.247884

Amount of Each Receipt this Period

1000.00

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

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

1303.86

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

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

FOR LINE NUMBER: PAGE 268 OF 316

(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) A. SUSAN WELDON</p> <p>Mailing Address 16 Fairfield Street</p> <p>City Harrisburg State PA Zip Code 17109-4405</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME PA CN 13/NSP/LOCAL 521 Occupation CONTROL ROOM OPERATOR II</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 04 / 30 / 2012 Transaction ID : SA11AI.247153 </p> <p>Amount of Each Receipt this Period 50.00 </p> |
| <p>Full Name (Last, First, Middle Initial) B. JOHN P. WESTMORELAND</p> <p>Mailing Address 4678 West Road</p> <p>City Moose Lake State MN Zip Code 55767</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME MN CN 5/CN14 Occupation 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 ▼ 289.12</p> | | <p>Date of Receipt 04 / 10 / 2012 Transaction ID : SA11AI.247924 </p> <p>Amount of Each Receipt this Period 72.28 </p> |
| <p>Full Name (Last, First, Middle Initial) C. JAMES R. WESTON</p> <p>Mailing Address 1495 Irvin-Shoots Road</p> <p>City Morral State OH Zip Code 43337</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation 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 ▼ 350.00</p> | | <p>Date of Receipt 04 / 03 / 2012 Transaction ID : SA11AI.246264 </p> <p>Amount of Each Receipt this Period 50.00 </p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | 172.28 |
| <p>TOTAL 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 269 OF 316
(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) A. JAMES R. WESTON</p> <p>Mailing Address 1495 Irvin-Shoots Road</p> <p>City Morral State OH Zip Code 43337</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation 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 ▼ 400.00</p> | | | <p>Date of Receipt 04 / 16 / 2012 Transaction ID : SA11AI.246324 </p> <p>Amount of Each Receipt this Period 50.00 </p> | |
| <p>Full Name (Last, First, Middle Initial) B. JAMES R. WESTON</p> <p>Mailing Address 1495 Irvin-Shoots Road</p> <p>City Morral State OH Zip Code 43337</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME OH LOC 4 Occupation 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 ▼ 450.00</p> | | | <p>Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.246383 </p> <p>Amount of Each Receipt this Period 50.00 </p> | |
| <p>Full Name (Last, First, Middle Initial) C. TAMARA V. WHITE</p> <p>Mailing Address 3355 Alden Place NE</p> <p>City Washington State DC Zip Code 20019</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer AFSCME INT'L Occupation ADMINISTRATIVE 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 ▼ 218.78</p> | | | <p>Date of Receipt 04 / 30 / 2012 Transaction ID : SA11AI.246163 </p> <p>Amount of Each Receipt this Period 33.76 </p> | |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | | 133.76 | |
| <p>TOTAL 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 270 OF 316

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <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. DIANE WHITE-HARRIS | | | 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>4</td><td></td> <td>0</td><td>3</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.247534 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 0 | 3 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 4 | | 0 | 3 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | | | |
| Mailing Address 1142 Wolf Run Drive | | | 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>29.47</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 29.47 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 29.47 | | | | | | | | | | | | | | | | |
| City Lansing | State MI | Zip Code 48917 | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | | |
| C | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer AFSCME MI CN 25 | | Occupation EXECUTIVE SECRETARY | | | | | | | | | | | | | | | | | | | | | | | |
| 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>206.29</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | 206.29 | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 206.29 | | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) B. DIANE WHITE-HARRIS | | | 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>4</td><td></td> <td>1</td><td>7</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.247583 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 1 | 7 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 4 | | 1 | 7 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | | | |
| Mailing Address 1142 Wolf Run Drive | | | 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>29.47</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 29.47 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 29.47 | | | | | | | | | | | | | | | | |
| City Lansing | State MI | Zip Code 48917 | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | | |
| C | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer AFSCME MI CN 25 | | Occupation EXECUTIVE SECRETARY | | | | | | | | | | | | | | | | | | | | | | | |
| 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>235.76</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | 235.76 | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 235.76 | | | | | | | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) C. BRYCE WICKSTROM | | | 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>4</td><td></td> <td>2</td><td>5</td><td></td> <td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : SA11AI.248306 | | | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 | | 2 | 5 | | 2 | 0 | 1 | 2 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | | | |
| 0 | 4 | | 2 | 5 | | 2 | 0 | 1 | 2 | | | | | | | | | | | | | | | | |
| Mailing Address 1267 Matilda Street | | | 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>110.00</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | 110.00 |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 110.00 | | | | | | | | | | | | | | | | |
| City St. Paul | State MN | Zip Code 55117-4473 | | | | | | | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | | | | | | | | | | | | | | | |
| C | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer AFSCME MN CN 5/STATE OF MN | | Occupation RECORDING SECRETARY | | | | | | | | | | | | | | | | | | | | | | | |
| 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>495.00</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | 495.00 | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | 495.00 | | | | | | | | | | | | | | | | |
| SUBTOTAL 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>168.94</td> </tr> </table> | | | | | | | | | | | | 168.94 | | | | | | | | | | |
| | | | | | | | | | 168.94 | | | | | | | | | | | | | | | | |
| TOTAL 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:
 (check only one)

PAGE 271 OF 316

| | | | | | | | | |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <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. GUY WIEDERHOLD

Mailing Address 906 Laurel Boulevard

City

Pottsville

State

PA

Zip Code

17901-2324

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.64

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 0 | | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.247002

Amount of Each Receipt this Period

73.16

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 ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.50

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 3 | | 2 | 0 | 1 | 2 |

Transaction ID : SA11AI.245963

Amount of Each Receipt this Period

52.50

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 ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | | 1 | 3 | | 0 | 0 | 1 | 2 |

Transaction ID : SA11AI.246164

Amount of Each Receipt this Period

52.50

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

178.16

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 272 OF 316

(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. CARLA WILLIAMS

Mailing Address 2338 N Spaulding
Apt. 2A

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Chicago | IL | 60647 |

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 ▼

203.22

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 02 / 2012

Transaction ID : SA11AI.247763

Amount of Each Receipt this Period

67.74

Full Name (Last, First, Middle Initial)

B. PHILLIP S. WILLIAMS Sr.

Mailing Address 31 E. Bellamy Drive

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| New Castle | DE | 19720 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME DE CN 81

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.39

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 09 / 2012

Transaction ID : SA11AI.249418

Amount of Each Receipt this Period

64.70

Full Name (Last, First, Middle Initial)

C. SAUNDRA WILLIAMS

Mailing Address 16218 Braile

| | | |
|---------|-------|------------|
| City | State | Zip Code |
| Detroit | MI | 48219-4727 |

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.75

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 03 / 2012

Transaction ID : SA11AI.247535

Amount of Each Receipt this Period

41.25

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

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

173.69

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

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

FOR LINE NUMBER:
(check only one)

PAGE 273 OF 316

☒ 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. SAUNDRA WILLIAMS

Mailing Address 16218 Braile

City

Detroit

State

MI

Zip Code

48219-4727

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 ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 17 / 2012

Transaction ID : SA11AI.247584

Amount of Each Receipt this Period

41.25

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 ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2012

Transaction ID : SA11AI.249013

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 ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 25 / 2012

Transaction ID : SA11AI.249308

Amount of Each Receipt this Period

30.00

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

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

101.25

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 316

(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

| | | | |
|---|--|--|---|
| A. KRISTIE WOLF-MALONEY Full Name (Last, First, Middle Initial) Mailing Address 4923C Haverford Road City Harrisburg State PA Zip Code 17109 FEC ID number of contributing federal political committee. C Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 363.36 | | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 10 / 2012 Transaction ID : SA11AI.247003 Amount of Each Receipt this Period 90.84 |
| B. TIMOTHY J. WOLFE Full Name (Last, First, Middle Initial) Mailing Address 57 E. Main Street P.O. Box 30 City Newville State PA Zip Code 17241 FEC ID number of contributing federal political committee. C Name of Employer AFSCME PA CN 13/STATE OF PA Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 320.00 | | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 30 / 2012 Transaction ID : SA11AI.247150 Amount of Each Receipt this Period 120.00 |
| C. DIANNE J. WOMACK Full Name (Last, First, Middle Initial) Mailing Address 1310 S. Central Road City Medical Lake State WA Zip Code 99022 FEC ID number of contributing federal political committee. C Name of Employer AFSCME WA CN 28/STATE OF WA Occupation STAFF REPRESENTATIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 224.00 | | | Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 25 / 2012 Transaction ID : SA11AI.249310 Amount of Each Receipt this Period 28.00 |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | | 238.84 |
| TOTAL This Period (last page this line number only)..... ▶ | | | |

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

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

FOR LINE NUMBER: PAGE 275 OF 316

(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

Full Name (Last, First, Middle Initial)

A. ARTHUR WOOD

Mailing Address 31062 Birchwood

City

Westland

State

MI

Zip Code

48185

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

224.21

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 03 / 2012

Transaction ID : SA11AI.247536

Amount of Each Receipt this Period

32.03

Full Name (Last, First, Middle Initial)

B. ARTHUR WOOD

Mailing Address 31062 Birchwood

City

Westland

State

MI

Zip Code

48185

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

256.24

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 17 / 2012

Transaction ID : SA11AI.247585

Amount of Each Receipt this Period

32.03

Full Name (Last, First, Middle Initial)

C. PHELTON WOODS

Mailing Address 5435 York Lane S.

City

Columbus

State

OH

Zip Code

43232

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/COLUMBUS CITY

Occupation

LAB TECH

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 23 / 2012

Transaction ID : SA11AI.246877

Amount of Each Receipt this Period

25.00

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

89.06

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 276 OF 316

(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) A. DOUGLAS N. WOODSON</p> <p>Mailing Address 108 Elgin Apt. 1</p> <p>City State Zip Code Forest Park IL 60130</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME IL CN 31 ORGANIZER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 215.70</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 02 / 2012 Transaction ID : SA11AI.247765</p> <p>Amount of Each Receipt this Period 71.90</p> |
| <p>Full Name (Last, First, Middle Initial) B. PETER WRIGHT</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. C</p> <p>Name of Employer Occupation AFSCME MA CN 93 DIRECTOR POLITICAL ACTION & LEGIS.</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 296.56</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 03 / 2012 Transaction ID : SA11AI.247643</p> <p>Amount of Each Receipt this Period 74.14</p> |
| <p>Full Name (Last, First, Middle Initial) C. SHERRY L. WRIGHT</p> <p>Mailing Address 1236 W. Barry Avenue</p> <p>City State Zip Code Chicago IL 60657</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation AFSCME INT'L 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 ▼ 289.66</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 Transaction ID : SA11AI.245965</p> <p>Amount of Each Receipt this Period 41.38</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> | | <p>187.42</p> |
| <p>TOTAL 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 277 OF 316

(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

Full Name (Last, First, Middle Initial)

A. SHERRY L. WRIGHT

Mailing Address 1236 W. Barry Avenue

City State Zip Code
 Chicago IL 60657

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

ORGANIZING COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

331.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA11AI.246166

Amount of Each Receipt this Period

41.38

Full Name (Last, First, Middle Initial)

B. BRUCE WYNGAARD

Mailing Address 1310 Hunter Avenue

City State Zip Code
 Columbus OH 43201

FEC ID number of contributing federal political committee.

C

Name of Employer

AFSCME OH LOC 11

Occupation

OPERATIONS DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 25 / 2012

Transaction ID : SA11AI.245760

Amount of Each Receipt this Period

78.00

Full Name (Last, First, Middle Initial)

C. JEANETTE WYNN

Mailing Address 1642 W. MLK Blvd

City State Zip Code
 Quicny FL 32351

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 ▼

352.24

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 13 / 2012

Transaction ID : SA11AI.249408

Amount of Each Receipt this Period

77.56

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

196.94

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 278 OF 316

☒ 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. JEANETTE WYNN

Mailing Address 1642 W. MLK Blvd

City

Quicny

State

FL

Zip Code

32351

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME FL CN 79

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.24

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246206

Amount of Each Receipt this Period

14.00

Full Name (Last, First, Middle Initial)

B. DON ZAVODNY

Mailing Address 9801 West O Street

City

Lincoln

State

NE

Zip Code

68528

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.82

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2012

Transaction ID : SA11AI.245966

Amount of Each Receipt this Period

46.26

Full Name (Last, First, Middle Initial)

C. DON ZAVODNY

Mailing Address 9801 West O Street

City

Lincoln

State

NE

Zip Code

68528

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.08

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SA11AI.246167

Amount of Each Receipt this Period

46.26

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

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

106.52

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

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

FOR LINE NUMBER:
(check only one)

PAGE 279 OF 316

☒ 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) A. THOMAS ZEBAR</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. C</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 ▼ 341.22</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 25 / 2012 Transaction ID : SA11AI.245762</p> <p>Amount of Each Receipt this Period 62.04</p> |
| <p>Full Name (Last, First, Middle Initial) B.</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y Y</p> <p>Amount of Each Receipt this Period</p> |
| <p>Full Name (Last, First, Middle Initial) C.</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼</p> | | <p>Date of Receipt M M / D D / Y Y Y Y Y Y</p> <p>Amount of Each Receipt this Period</p> |
| <p>SUBTOTAL of Receipts This Page (optional)..... ▶</p> <p>TOTAL This Period (last page this line number only)..... ▶</p> | | <p>62.04</p> <p>48292.67</p> |

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 316

(check only one)

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

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

NAME OF COMMITTEE (In Full)

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

A. Full Name (Last, First, Middle Initial)
DISTRICT COUNCIL 37-AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

Mailing Address 125 Barclay Street

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| New York | NY | 10007 |

FEC ID number of contributing federal political committee.

C C00149211

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

167017.79

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 24 | / | 2012 |

Transaction ID : SA12.249486

Amount of Each Receipt this Period

18224.35

Transfer

B. Full Name (Last, First, Middle Initial)
UNIVERSITY OF NORTHERN IOWA

Mailing Address 103 Gilchrist

| | | |
|-------------|-------|------------|
| City | State | Zip Code |
| Cedar Falls | IA | 50614-0008 |

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11518.56

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 04 | / | 09 | / | 2012 |

Transaction ID : SA12.249975

Amount of Each Receipt this Period

11518.56

Erroneous deposit from a non-fed political committee
reported on Line 22

C. Full Name (Last, First, Middle Initial)
Mailing Address

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).....▶

29742.91

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

29742.91

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 316
(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

Full Name (Last, First, Middle Initial)

A. AMALGAMATED BANK

Mailing Address 275 7th Avenue

City State Zip Code
 New York NY 10001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6638.26

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 30 / 2012

Transaction ID : SA17.249487

Amount of Each Receipt this Period

1806.94

Interest Income 4/30/2012

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1806.94

1806.94

| | | | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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

Three date pickers are shown, each with a label above it: 'MM', 'DD', and 'YYYY'. The first picker shows '04', the second shows '02', and the third shows '2012'. Each picker has a grid of numbers or letters above the input field.

Transaction ID : SB21B.249468

001

Amount of Each Disbursement this Period

Category/
Type

Disbursement For:

| | | | |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ | | |

State: District:

Date of Disbursement

B. AMERICAN EXPRESS

Transaction ID : SB21B.249469

001

Amount of Each Disbursement this Period

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Date of Disbursement

C. AMERICAN EXPRESS

Transaction ID : SB21B.249470

001

Amount of Each Disbursement this Period

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

A diagram of a rectangular box with a length of 11.72. The box is shown in perspective, with the top and bottom edges labeled with the value 11.72. The box is divided into three sections by two vertical lines. The top section is labeled 11.72, the middle section is labeled 11.72, and the bottom section is labeled 11.72.

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

PAGE 283 OF 316

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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. AMERICAN EXPRESS

Mailing Address P.O. Box 53852

City

Phoenix

State

AZ

Zip Code

85072-3852

Purpose of Disbursement

Merchant Service Charges 4/17/12

001

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 17 / 2012

Transaction ID : SB21B.249471

Amount of Each Disbursement this Period

1.32

Full Name (Last, First, Middle Initial)

B. BART GROUP

Mailing Address 171 Main Street

City

Port Washington

State

NY

Zip Code

11050

Purpose of Disbursement

Merchant Service Charges 4/4/12

001

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2012

Transaction ID : SB21B.249472

Amount of Each Disbursement this Period

110.75

Full Name (Last, First, Middle Initial)

C. BART GROUP

Mailing Address 171 Main Street

City

Port Washington

State

NY

Zip Code

11050

Purpose of Disbursement

Merchant Service Charges 4/4/12

001

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2012

Transaction ID : SB21B.249473

Amount of Each Disbursement this Period

57.59

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

169.66

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

PAGE 284 OF 316

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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. FIS MERCHANT SERVICES-LL

Mailing Address 11000 W. Lake Park Drive

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Milwaukee | WI | 53224 |

Purpose of Disbursement
Merchant Service Charges 4/20/12

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 |
| 04 | | 20 | | 2012 |

Transaction ID : SB21B.249474

Amount of Each Disbursement this Period

| |
|--------|
| 279.30 |
|--------|

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

| |
|--|
| |
|--|

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

| |
|--------|
| 279.30 |
|--------|

| |
|--------|
| 460.68 |
|--------|

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

PAGE 285 OF 316

| | | | | | |
|------------------------------|--|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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. AFSCME PEOPLE- Non Federal Account

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 10 | | 2012 |

Mailing Address 1625 L Street NW

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20036 |

Purpose of Disbursement
Tfr non-fed acct for non-fed activity

008

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| 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:

Transaction ID : SB22.249481

Amount of Each Disbursement this Period

| |
|----------|
| 15000.00 |
|----------|

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 Y |
| 04 | | 18 | | 2012 |

Mailing Address 1625 L Street NW

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20036 |

Purpose of Disbursement
Tfr non-fed acct for non-fed activity

008

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| 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:

Transaction ID : SB22.249482

Amount of Each Disbursement this Period

| |
|----------|
| 30000.00 |
|----------|

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 Y |
| 04 | | 18 | | 2012 |

Mailing Address 1625 L Street NW

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20036 |

Purpose of Disbursement
Tfr non-fed acct for non-fed activity

008

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| 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:

Transaction ID : SB22.249483

Amount of Each Disbursement this Period

| |
|----------|
| 41000.00 |
|----------|

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

| |
|----------|
| 86000.00 |
|----------|

| |
|--|
| |
|--|

**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 286 OF 316

| | | | | | |
|------------------------------|--|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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. AFSCME PEOPLE- Non Federal Account

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 20 | | 2012 |

Mailing Address 1625 L Street NW

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20036 |

Purpose of Disbursement
Tfr non-fed acct for non-fed activity

008

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB22.249484

Amount of Each Disbursement this Period

26000.00

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 Y |
| 04 | | 23 | | 2012 |

Mailing Address 1625 L Street NW

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20036 |

Purpose of Disbursement
Tfr non-fed acct for non-fed activity

008

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB22.249485

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. UNIVERSITY OF NORTHERN IOWA

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 11 | | 2012 |

Mailing Address 103 Gilchrist

| | | |
|-------------|-------|------------|
| City | State | Zip Code |
| Cedar Falls | IA | 50614-0008 |

Purpose of Disbursement
Deposit returned to a non-fed political committee reported on Line 12

008

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB22.249974

Amount of Each Disbursement this Period

11518.56

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

42518.56

128518.56

**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 288 OF 316

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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. BILL KEATING COMMITTEE

Mailing Address P.O. Box 690353

| | | |
|----------------|-------------|-------------------|
| City Quincy | State MA | Zip Code 02269 |
|----------------|-------------|-------------------|

Purpose of Disbursement
Contribution

011

Candidate Name

WILLIAM RICHARD KEATINGCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 10

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 27 | / | 2012 |

Transaction ID : SB23.248361

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. BILL NELSON FOR US SENATE

Mailing Address 972 W. Whitmire Drive

| | | |
|-------------------|-------------|-------------------|
| City Melbourne | State FL | Zip Code 32935 |
|-------------------|-------------|-------------------|

Purpose of Disbursement
Contribution - void check from prior report

011

Candidate Name

BILL NELSONCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 00

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 09 | / | 2012 |

Transaction ID : SB23.248326

Amount of Each Disbursement this Period

| |
|----------|
| -1500.00 |
|----------|

Full Name (Last, First, Middle Initial)

C. BILL NELSON FOR US SENATE

Mailing Address 972 W. Whitmire Drive

| | | |
|-------------------|-------------|-------------------|
| City Melbourne | State FL | Zip Code 32935 |
|-------------------|-------------|-------------------|

Purpose of Disbursement
Contribution

011

Candidate Name

BILL NELSONCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 00

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 11 | / | 2012 |

Transaction ID : SB23.248327

Amount of Each Disbursement this Period

| |
|---------|
| 1500.00 |
|---------|

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

| |
|---------|
| 1000.00 |
|---------|

| |
|--|
| |
|--|

**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 290 OF 316

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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. BLUE HEN PAC

Mailing Address P.O. Box 15293

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20003 |

Purpose of Disbursement
Contribution

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: District:

Disbursement For: 2012

| | |
|---|----------------------------------|
| <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 Y |
| 04 | | 27 | | 2012 |

Transaction ID : SB23.248322

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. BRIAN HIGGINS FOR CONGRESS

Mailing Address P.O. Box 28

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Buffalo | NY | 14220 |

Purpose of Disbursement
Contribution - void check from prior report

Candidate Name

BRIAN HIGGINS

| | |
|----------------|---|
| Office Sought: | <input checked="" type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: NY District: 27

Disbursement For: 2012

| | |
|---|----------------------------------|
| <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 Y |
| 04 | | 09 | | 2012 |

Transaction ID : SB23.248333

Amount of Each Disbursement this Period

| |
|----------|
| -1000.00 |
|----------|

Full Name (Last, First, Middle Initial)

C. BRIAN HIGGINS FOR CONGRESS

Mailing Address P.O. Box 28

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Buffalo | NY | 14220 |

Purpose of Disbursement
Contribution - void check from prior report

Candidate Name

BRIAN HIGGINS

| | |
|----------------|---|
| Office Sought: | <input checked="" type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

State: NY District: 27

Disbursement For: 2012

| | |
|---|----------------------------------|
| <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 Y |
| 04 | | 09 | | 2012 |

Transaction ID : SB23.248339

Amount of Each Disbursement this Period

| |
|----------|
| -1000.00 |
|----------|

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

| |
|----------|
| -1000.00 |
|----------|

| |
|--|
| |
|--|

**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 292 OF 316

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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. BUILDING A MAJORITY PACMailing Address 10 G Street NE
Suite 470

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼ PAC

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Transaction ID : SB23.248324

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. CAPUANO FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 440305

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Contribution

Candidate Name

MICHAEL E CAPUANOOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 08

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Transaction ID : SB23.248366

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

C. CARPER FOR SENATE

Mailing Address P.O. Box 2882

City Wilmington State DE Zip Code 19805

Purpose of Disbursement
Contribution

Candidate Name

THOMAS R CARPEROffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: DE District: 00

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Transaction ID : SB23.248330

Amount of Each Disbursement this Period

| |
|---------|
| 2500.00 |
|---------|

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

| |
|---------|
| 4500.00 |
|---------|

| |
|--|
| |
|--|

| | | | | | | | | | | | |
|--|-----|--|-----|---|-----|--|-----|--|----|--|-----|
| | 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. CEDRIC RICHMOND FOR CONGRESS

Date of Disbursement

Transaction ID : SB23.248367

011

Category/
Type

CEDRIC L. RICHMOND

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District: 02

Amount of Each Disbursement this Period

1000.00

B. CITIZENS TO ELECT RICK LARSEN

Date of Disbursement

04 / 27 / 2012

Transaction ID : SB23.248368

011

Category/
Type

RICHARD RAY LARSEN

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: WA District: 02

Amount of Each Disbursement this Period

1000.00

C. CLARKE FOR CONGRESS

Date of Disbursement

Transaction ID : SB23.248341

011

Category/
Type

YVETTE D CLARKE

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 11

Amount of Each Disbursement this Period

-2000.00

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

0.00

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

| | | | | | | | | | | | |
|--------------------------|-----|--------------------------|-----|-------------------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

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

1000.00

2500.00

04 / 27 / 2012

1000.00

State: NY District: 07

4500.00

The diagram shows a rectangular frame with 12 vertical members and 2 horizontal members. A cross-section of a member is shown, indicating a rectangular shape with a central void.

**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 296 OF 316

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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. DOYLE FOR CONGRESS COMMITTEE

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Mailing Address P.O. Box 17426

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Pittsburgh | PA | 15235 |

Transaction ID : SB23.248348Purpose of Disbursement
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

MIKE DOYLECategory/
Type

| |
|---------|
| 1000.00 |
|---------|

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 14

Full Name (Last, First, Middle Initial)

B. DUTCH RUPPERSBERGER FOR CONGRESS COMMITTEE

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Mailing Address 22 West Padonia Road
Suite C-141

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Timonium | MD | 21093 |

Transaction ID : SB23.248349Purpose of Disbursement
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

DUTCH RUPPERSBERGERCategory/
Type

| |
|---------|
| 1000.00 |
|---------|

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

State: MD District: 02

Full Name (Last, First, Middle Initial)

C. ENGEL FOR CONGRESS

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Mailing Address 462 California Road

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Bronxville | NY | 10708 |

Transaction ID : SB23.248371Purpose of Disbursement
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

ELIOT L ENGELCategory/
Type

| |
|---------|
| 1000.00 |
|---------|

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 17

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

| |
|---------|
| 3000.00 |
|---------|

**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 298 OF 316

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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. FRIENDS OF CONGRESSMAN TIM HOLDEN

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 09 | | 2012 |

Mailing Address P.O. Box 37

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| Saint Clair | PA | 17970 |

Transaction ID : SB23.248350Purpose of Disbursement
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

T TIMOTHY HOLDENCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 17

| |
|---------|
| 2000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. FRIENDS OF MAURICE HINCHEY

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 09 | | 2012 |

Mailing Address P.O. Box 4497

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Kingston | NY | 12402 |

Transaction ID : SB23.248345Purpose of Disbursement
Contribution - void check from prior report

011

Amount of Each Disbursement this Period

Candidate Name

MAURICE D HINCHEYCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 22

| |
|----------|
| -1000.00 |
|----------|

Full Name (Last, First, Middle Initial)

C. GARAMENDI FOR CONGRESS

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Mailing Address P.O. Box 440

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Walnut Grove | CA | 95690 |

Transaction ID : SB23.248351Purpose of Disbursement
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

JOHN GARAMENDICategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 10

| |
|---------|
| 1000.00 |
|---------|

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

| |
|---------|
| 2000.00 |
|---------|

| |
|--|
| |
|--|

**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 299 OF 316

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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. ISRAEL FOR CONGRESS

Mailing Address P.O. Box 777

| | | |
|-------------------|-------------|-------------------|
| City Deer Park | State NY | Zip Code 11729 |
|-------------------|-------------|-------------------|

Purpose of Disbursement
Contribution

011

Candidate Name

STEVE ISRAELCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 02

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 27 | / | 2012 |

Transaction ID : SB23.248352

Amount of Each Disbursement this Period

| |
|---------|
| 5000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. JIM HIMES FOR CONGRESS

Mailing Address 65 High Ridge Road

| | | |
|------------------|-------------|-------------------|
| City Stamford | State CT | Zip Code 06905 |
|------------------|-------------|-------------------|

Purpose of Disbursement
Contribution

011

Candidate Name

JIM HIMESCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: CT District: 04

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 27 | / | 2012 |

Transaction ID : SB23.248376

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

C. JOHN CARNEY FOR CONGRESS

Mailing Address P.O. Box 2162

| | | |
|--------------------|-------------|-------------------|
| City Wilmington | State DE | Zip Code 19899 |
|--------------------|-------------|-------------------|

Purpose of Disbursement
Contribution

011

Candidate Name

JOHN CHARLES JR CARNEYCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: DE District: 01

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 27 | / | 2012 |

Transaction ID : SB23.248377

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

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

| |
|---------|
| 7000.00 |
|---------|

| |
|--|
| |
|--|

**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 300 OF 316

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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. JOHN LEWIS FOR CONGRESS

Mailing Address P.O. Box 2323

| | | |
|-----------------|-------------|-------------------|
| City Atlanta | State GA | Zip Code 30301 |
|-----------------|-------------|-------------------|

Purpose of Disbursement
Contribution

Candidate Name

JOHN R. LEWISOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: GA District: 05

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 27 | / | 2012 |

Transaction ID : SB23.248378

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. KAPTUR FOR CONGRESS

Mailing Address P.O. Box 899

| | | |
|----------------|-------------|-------------------|
| City Toledo | State OH | Zip Code 43697 |
|----------------|-------------|-------------------|

Purpose of Disbursement
Contribution

Candidate Name

MARCY C HON. KAPTUROffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 09

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 27 | / | 2012 |

Transaction ID : SB23.248353

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

C. KLOBUCHAR FOR MINNESOTAMailing Address 1430 Concordia Avenue
P.O. Box 4146

| | | |
|--------------------|-------------|-------------------|
| City Saint Paul | State MN | Zip Code 55104 |
|--------------------|-------------|-------------------|

Purpose of Disbursement
Contribution

Candidate Name

AMY J KLOBUCHAROffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 00

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 20 | / | 2012 |

Transaction ID : SB23.248329

Amount of Each Disbursement this Period

| |
|---------|
| 4000.00 |
|---------|

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

| |
|---------|
| 6000.00 |
|---------|

| |
|--|
| |
|--|

**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 301 OF 316

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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. LANCMAN FOR CONGRESS

Mailing Address 110-06 72nd Avenue

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Forest Hills | NY | 11375 |

Purpose of Disbursement
Contribution

011

Candidate Name

RORY LANCMANCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 06

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 20 | | 2012 |

Transaction ID : SB23.248379

Amount of Each Disbursement this Period

| |
|---------|
| 5000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. LANGEVIN FOR CONGRESS

Mailing Address 181- A Knight Street

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Warwick | RI | 02886 |

Purpose of Disbursement
Contribution

011

Candidate Name

JAMES R LANGEVINCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: RI District: 02

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Transaction ID : SB23.248382

Amount of Each Disbursement this Period

| |
|---------|
| 1500.00 |
|---------|

Full Name (Last, First, Middle Initial)

C. LEADERSHIP FOR TODAY & TOMORROWMailing Address 700 13th Street NW
Suite 600

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20005 |

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: PAC

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Transaction ID : SB23.248320

Amount of Each Disbursement this Period

| |
|---------|
| 2500.00 |
|---------|

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

9000.00

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

PAGE 302 OF 316

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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. LIPINSKI FOR CONGRESS COMMITTEE

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Mailing Address 5838 South Archer Avenue

Transaction ID : SB23.248354

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Chicago | IL | 60638 |

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011

| |
|---------|
| 1000.00 |
|---------|

Candidate Name

DANIEL WILLIAM LIPINSKICategory/
Type

| | |
|----------------|---|
| Office Sought: | <input checked="" type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| |
|--|
| Disbursement For: 2012 |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |

State: IL District: 03

Full Name (Last, First, Middle Initial)

B. LOFGREN FOR CONGRESS

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Mailing Address P.O. Box 913

Transaction ID : SB23.248383

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| San Jose | CA | 95108 |

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011

| |
|---------|
| 1000.00 |
|---------|

Candidate Name

ZOE LOFGRENCategory/
Type

| | |
|----------------|---|
| Office Sought: | <input checked="" type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| |
|--|
| Disbursement For: 2012 |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |

State: CA District: 16

Full Name (Last, First, Middle Initial)

C. M-PAC

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 16 | | 2012 |

Mailing Address 712 35th Avenue

Transaction ID : SB23.248316

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Seattle | WA | 98122 |

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011

| |
|---------|
| 5000.00 |
|---------|

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| |
|---|
| Disbursement For: 2012 |
| <input type="checkbox"/> Primary <input type="checkbox"/> General |
| <input checked="" type="checkbox"/> Other (specify) ▼ |

State: District: PAC

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

7000.00

**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 303 OF 316

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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. MARCIA L. FUDGE FOR CONGRESS COMMITTEE

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Mailing Address 23811 Chagrin Blvd.
Suite LL55

City Beachwood State OH Zip Code 44122

Purpose of Disbursement
Contribution

011

Transaction ID : SB23.248355

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Candidate Name

MARCIA L FUDGECategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 11

Full Name (Last, First, Middle Initial)

B. MATHESON FOR CONGRESS

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 16 | | 2012 |

Mailing Address P.O. Box 521048

City Salt Lake City State UT Zip Code 84152

Purpose of Disbursement
Contribution

011

Transaction ID : SB23.248385

Amount of Each Disbursement this Period

| |
|---------|
| 1500.00 |
|---------|

Candidate Name

JAMES DAVID MATHESONCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: UT District: 02

Full Name (Last, First, Middle Initial)

C. MATHESON FOR CONGRESS

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Mailing Address P.O. Box 521048

City Salt Lake City State UT Zip Code 84152

Purpose of Disbursement
Contribution

011

Transaction ID : SB23.248356

Amount of Each Disbursement this Period

| |
|---------|
| 1500.00 |
|---------|

Candidate Name

JAMES DAVID MATHESONCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: UT District: 02

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

| |
|---------|
| 4000.00 |
|---------|

| |
|--|
| |
|--|

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

PAGE 304 OF 316

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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. MOORE FOR CONGRESS

Mailing Address P.O. Box 16646

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Milwaukee | WI | 53216 |

Purpose of Disbursement
Contribution

Candidate Name

GWENDOLYNNE MOOREOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 04

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Transaction ID : SB23.248386

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. NAPOLITANO FOR CONGRESS

Mailing Address P.O. Box 408

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Norwalk | CA | 90650 |

Purpose of Disbursement
Contribution

Candidate Name

GRACE NAPOLITANOOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 38

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 20 | | 2012 |

Transaction ID : SB23.248388

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

C. NAPOLITANO FOR CONGRESS

Mailing Address P.O. Box 408

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Norwalk | CA | 90650 |

Purpose of Disbursement
Contribution

Candidate Name

GRACE NAPOLITANOOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 38

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Transaction ID : SB23.248357

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

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

| |
|---------|
| 3000.00 |
|---------|

| |
|--|
| |
|--|

**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 307 OF 316

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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. NUTMEG PAC

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Mailing Address 777 Summer Street

Transaction ID : SB23.248321

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Stamford | CT | 06901 |

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

| |
|---------|
| 1000.00 |
|---------|

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

Disbursement For: 2012

| | |
|---|----------------------------------|
| <input type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input checked="" type="checkbox"/> Other (specify) ▼ | |

State: District: PAC

Full Name (Last, First, Middle Initial)

B. PALLONE FOR CONGRESS

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Mailing Address P.O. Box 3176

Transaction ID : SB23.248391

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| Long Branch | NJ | 07740 |

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

| |
|---------|
| 2000.00 |
|---------|

FRANK JR PALLONE

| | |
|----------------|---|
| Office Sought: | <input checked="" type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

Disbursement For: 2012

| | |
|---|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ | |

State: NJ District: 06

Full Name (Last, First, Middle Initial)

C. PASCRELL FOR CONGRESS INC.

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Mailing Address P.O. Box 640

Transaction ID : SB23.248392

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Totowa | NJ | 07511 |

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

| |
|---------|
| 1000.00 |
|---------|

WILLIAM J JR PASCRELL

| | |
|----------------|---|
| Office Sought: | <input checked="" type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

Disbursement For: 2012

| | |
|---|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ | |

State: NJ District: 08

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

4000.00

**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 308 OF 316

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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. PAUL TONKO FOR CONGRESSMailing Address 911 Central Avenue
#221

City Albany State NY Zip Code 12206

Purpose of Disbursement
Contribution

Candidate Name

PAUL DAVID TONKOOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 27 | / | 2012 |

Transaction ID : SB23.248393

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. PETE GALLEG0 FOR CONGRESS

Mailing Address P.O. Box 777

City Alpine State TX Zip Code 79831

Purpose of Disbursement
Contribution

Candidate Name

PETE GALLEG0Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 23

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 20 | / | 2012 |

Transaction ID : SB23.248396

Amount of Each Disbursement this Period

| |
|---------|
| 5000.00 |
|---------|

Full Name (Last, First, Middle Initial)

C. PETE STARK RE-ELECTION COMMITTEE

Mailing Address P.O. Box 8331

City Freemont State CA Zip Code 94537

Purpose of Disbursement
Contribution

Candidate Name

FORTNEY P. STARKOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 13

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 27 | / | 2012 |

Transaction ID : SB23.248398

Amount of Each Disbursement this Period

| |
|---------|
| 2000.00 |
|---------|

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

| |
|---------|
| 8000.00 |
|---------|

| |
|--|
| |
|--|

**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 309 OF 316

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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. RANGEL FOR CONGRESS

Mailing Address P.O. Box 5577

Manhattanville Station

City

New York

State

NY

Zip Code

10027

Purpose of Disbursement
Contribution

011

Candidate Name

CHARLES B. RANGELCategory/
Type

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2012

☐ Primary☒ General☐ Other (specify) ▼

State: NY

District: 15

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 20 | / | 2012 |

Transaction ID : SB23.248358

Amount of Each Disbursement this Period

| |
|---------|
| 5000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. RUSH HOLT FOR CONGRESS

Mailing Address P.O. Box 782

City

Pennington

State

NJ

Zip Code

08534

Purpose of Disbursement
Contribution

011

Candidate Name

RUSH HOLTCategory/
Type

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2012

☒ Primary☐ General☐ Other (specify) ▼

State: NJ

District: 12

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 27 | / | 2012 |

Transaction ID : SB23.248399

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

C. SANFORD BISHOP FOR CONGRESS

Mailing Address P.O. Box 909

City

Columbus

State

GA

Zip Code

31902

Purpose of Disbursement
Contribution

011

Candidate Name

SANFORD D JR BISHOPCategory/
Type

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2012

☒ Primary☐ General☐ Other (specify) ▼

State: GA

District: 02

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 27 | / | 2012 |

Transaction ID : SB23.248400

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

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

| |
|---------|
| 7000.00 |
|---------|

**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 310 OF 316

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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. SCHAKOWSKY FOR CONGRESS

Mailing Address P.O. Box 5130

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Evanston | IL | 60204 |

Purpose of Disbursement
Contribution

011

Candidate Name

JANICE D SCHAKOWSKYCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 09

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 27 | / | 2012 |

Transaction ID : SB23.248359

Amount of Each Disbursement this Period

| |
|---------|
| 2500.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. SERRANO FOR CONGRESS

Mailing Address P.O. Box 711

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| New York | NY | 10032 |

Purpose of Disbursement
Contribution - void check from prior report

011

Candidate Name

JOSE E. SERRANOCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 16

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 09 | / | 2012 |

Transaction ID : SB23.248337

Amount of Each Disbursement this Period

| |
|----------|
| -1000.00 |
|----------|

Full Name (Last, First, Middle Initial)

C. SERRANO FOR CONGRESS

Mailing Address P.O. Box 711

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| New York | NY | 10032 |

Purpose of Disbursement
Contribution

011

Candidate Name

JOSE E. SERRANOCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 16

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | / | 11 | / | 2012 |

Transaction ID : SB23.248402

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

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

| |
|---------|
| 2500.00 |
|---------|

| |
|--|
| |
|--|

| | | | | | | | | | | | |
|--|-----|--|-----|----------|-----|--|-----|--|----|--|-----|
| | 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. SERRANO FOR CONGRESS

011

JOSE E. SERRANO

Category/
Type☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 16

B. SHEILA JACKSON-LEE FOR CONGRESS

04 / 27 / 2012

011



SHEILA JACKSON-LEE

Category/
Type

☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 18

C. SOUTHWEST LEADERSHIP FUND

011

☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

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

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

4500.00

**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 312 OF 316

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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. STEVE ROTHMAN FOR NEW JERSEY INC.

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Mailing Address P.O. Box 714

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Hackensack | NJ | 07602 |

Transaction ID : SB23.248405Purpose of Disbursement
Contribution

011

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Candidate Name

STEVEN R ROTHMANCategory/
Type

| | |
|----------------|---|
| Office Sought: | <input checked="" type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

Disbursement For: 2012

| | |
|---|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ | |

State: NJ District: 09

Full Name (Last, First, Middle Initial)

B. TED DEUTCH FOR CONGRESS COMMITTEE

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 09 | | 2012 |

Mailing Address 1050 17th Street NW
Suite 590

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20036 |

Transaction ID : SB23.248332Purpose of Disbursement
Contribution - void check from prior report

011

Amount of Each Disbursement this Period

| |
|----------|
| -1000.00 |
|----------|

Candidate Name

THEODORE ELIOT DEUTCHCategory/
Type

| | |
|----------------|---|
| Office Sought: | <input checked="" type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

Disbursement For: 2012

| | |
|---|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ | |

State: FL District: 19

Full Name (Last, First, Middle Initial)

C. TED DEUTCH FOR CONGRESS COMMITTEE

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 11 | | 2012 |

Mailing Address 1050 17th Street NW
Suite 590

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20036 |

Transaction ID : SB23.248407Purpose of Disbursement
Contribution

011

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Candidate Name

THEODORE ELIOT DEUTCHCategory/
Type

| | |
|----------------|---|
| Office Sought: | <input checked="" type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

Disbursement For: 2012

| | |
|---|----------------------------------|
| <input checked="" type="checkbox"/> Primary | <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ | |

State: FL District: 19

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

| |
|---------|
| 1000.00 |
|---------|

| |
|--|
| |
|--|

**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 313 OF 316

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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. TERRI SEWELL FOR CONGRESS

Mailing Address P.O. Box 1964

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Birmingham | AL | 35201 |

Purpose of Disbursement
Contribution

Candidate Name

TERRI A. SEWELLOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

State: AL District: 07

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Transaction ID : SB23.248360

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. THE GREAT LAND PAC

Mailing Address 426 C Street NE

| | | |
|------------|-------|----------|
| City | State | Zip Code |
| Washington | DC | 20002 |

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☐ General
☒ Other (specify) ▼

State: District: PAC

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Transaction ID : SB23.248319

Amount of Each Disbursement this Period

| |
|---------|
| 2000.00 |
|---------|

Full Name (Last, First, Middle Initial)

C. THE MARKEY COMMITTEE

Mailing Address P.O. Box 526

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Medford | MA | 02155 |

Purpose of Disbursement
Contribution

Candidate Name

EDWARD JOHN MR. MARKEYOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 07

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Transaction ID : SB23.248408

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

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

| |
|---------|
| 4000.00 |
|---------|

| |
|--|
| |
|--|

**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 314 OF 316

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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. THE NIKI TSONGAS COMMITTEE

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Mailing Address P.O. Box 1454

| | | |
|--------|-------|----------|
| City | State | Zip Code |
| Lowell | MA | 01853 |

Transaction ID : SB23.248409Purpose of Disbursement
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

NICOLA S TSONGASCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 05

1000.00

Full Name (Last, First, Middle Initial)

B. VISCLOSKY FOR CONGRESS

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 09 | | 2012 |

Mailing Address P.O. Box 10003

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Merrillville | IN | 46411 |

Transaction ID : SB23.248334Purpose of Disbursement
Contribution - void check from prior report

011

Amount of Each Disbursement this Period

Candidate Name

PETER J. VISCLOSKYCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 01

-1000.00

Full Name (Last, First, Middle Initial)

C. VISCLOSKY FOR CONGRESS

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 11 | | 2012 |

Mailing Address P.O. Box 10003

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Merrillville | IN | 46411 |

Transaction ID : SB23.248411Purpose of Disbursement
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

PETER J. VISCLOSKYCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 01

1000.00

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

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

PAGE 315 OF 316

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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. VISCLOSKY FOR CONGRESS

Mailing Address P.O. Box 10003

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Merrillville | IN | 46411 |

Purpose of Disbursement
Contribution

011

Candidate Name

PETER J. VISCLOSKYCategory/
Type

| | |
|----------------|---|
| Office Sought: | <input checked="" type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| |
|--|
| Disbursement For: 2012 |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |

State: IN District: 01

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 27 | | 2012 |

Transaction ID : SB23.248412

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. WASHINGTON DEMOCRATIC PARTY- FEDERAL ACCOUNTMailing Address 615 Second Avenue
Suite 580

| | | |
|---------|-------|----------|
| City | State | Zip Code |
| Seattle | WA | 98104 |

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| |
|---|
| Disbursement For: 2012 |
| <input type="checkbox"/> Primary <input type="checkbox"/> General |
| <input checked="" type="checkbox"/> Other (specify) ▼ |

State: District: PAC

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04 | | 20 | | 2012 |

Transaction ID : SB23.248318

Amount of Each Disbursement this Period

| |
|---------|
| 2500.00 |
|---------|

Full Name (Last, First, Middle Initial)

C.

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

Purpose of Disbursement

Category/
Type

Candidate Name

| | |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House |
| | <input type="checkbox"/> Senate |
| | <input type="checkbox"/> President |

| |
|---|
| Disbursement For: |
| <input type="checkbox"/> Primary <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |

State: District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Disbursement this Period

| |
|--|
| |
|--|

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

3500.00

105500.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 316 OF 316

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HAUTE CATERING

Nature of Debt (Purpose):

Boot Camp/Food and Equipment Charges

Mailing Address P.O. Box 77896

City State

Zip Code

Washington

DC

20036

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.249578

Amount Incurred This Period

5488.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

5488.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

HAUTE CATERING

Nature of Debt (Purpose):

Boot Camp/Food and Equipment Charges

Mailing Address P.O. Box 77896

City State

Zip Code

Washington

DC

20036

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.249576

Amount Incurred This Period

1064.20

Payment This Period

0.00

Outstanding Balance at Close of This Period

1064.20

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

6552.70

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

6552.70

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

6552.70