

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 WASHINGTON DC 20036

2. FEC IDENTIFICATION NUMBER C C00011114 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] 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), Mar 20 (M3) [X], Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11) (Non-Election Year Only), Dec 20 (M12) (Non-Election Year Only), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) Election on in the State of (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S) Election on in the State of

5. Covering Period 02 / 01 / 2015 through 02 / 28 / 2015

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

Type or Print Name of Treasurer LAURA REYES

Signature of Treasurer LAURA REYES [Electronically Filed] Date 04 / 16 / 2015

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		<input type="text" value="1562032.36"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2299102.27"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="522087.62"/>	<input type="text" value="1313271.54"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="2821189.89"/>	<input type="text" value="2875303.90"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="112511.42"/>	<input type="text" value="166625.43"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2708678.47"/>	<input type="text" value="2708678.47"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="1003722.35"/>	

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 Y Y 02 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y 02 / 28 / 2015

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).....	19623.42	23914.45
(ii) Unitemized	455404.67	1115091.28
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	475028.09	1139005.73
(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)	475028.09	1139005.73
12. Transfers From Affiliated/Other Party Committees.....	46776.82	173759.61
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.).....	282.71	506.20
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))..... ▶	522087.62	1313271.54
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	522087.62	1313271.54

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	3623.35	4154.36
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3623.35	4154.36
22. Transfers to Affiliated/Other Party Committees.....	35821.29	65821.29
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	73000.00	96500.00
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	66.78	149.78
(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)).....	66.78	149.78
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)) ..	112511.42	166625.43
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	112511.42	166625.43

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)	475028.09	1139005.73
34. Total Contribution Refunds (from Line 28(d))	66.78	149.78
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	474961.31	1138855.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3623.35	4154.36
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3623.35	4154.36

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 99
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<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. JEFFREY S. ABBE
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 486

City Harold	State KY	Zip Code 41635
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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 ▼ **213.81**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	13	/	2015

Transaction ID : SA11Al.77446

Amount of Each Receipt this Period

71.27

B. JEFFREY S. ABBE
Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 486

City Harold	State KY	Zip Code 41635
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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 ▼ **285.08**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	27	/	2015

Transaction ID : SA11Al.77653

Amount of Each Receipt this Period

71.27

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

Mailing Address 901 N. Nelson Street
Apt. 901

City Arlington	State VA	Zip Code 22203
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation CHAIRPERSON, JUDICIAL PANEL
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **256.32**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	13	/	2015

Transaction ID : SA11Al.77447

Amount of Each Receipt this Period

85.44

SUBTOTAL of Receipts This Page (optional).....▶	227.98
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. RICHARD W. ABELSON
Full Name (Last, First, Middle Initial)

Mailing Address 901 N. Nelson Street
Apt. 901

City Arlington State VA Zip Code 22203

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

Name of Employer AFSCME INT'L Occupation CHAIRPERSON, JUDICIAL PANEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 341.76

Date of Receipt
02 / 27 / 2015
Transaction ID : SA11AI.77654

Amount of Each Receipt this Period
85.44

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:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 286.00

Date of Receipt
02 / 27 / 2015
Transaction ID : SA11AI.78908

Amount of Each Receipt this Period
129.00

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

Mailing Address 303 Dias Drive

City Fort Washington State MD Zip Code 20744

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

Name of Employer AFSCME INT'L Occupation RETIREE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
02 / 20 / 2015
Transaction ID : SA11AI.77972

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 464.44

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 8 OF 99
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. MICHAEL L. ARTZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 745 Irving Street NW
 City Washington State DC Zip Code 20010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ASSOCIATE GENERAL COUNSEL I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 217.96

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11Al.77659
 Amount of Each Receipt this Period 54.49

B. VERONICA L. BEAVIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 10205 Bluff Springs Trace
 City Louisville State KY Zip Code 40223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, EDUCATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.92

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11Al.77665
 Amount of Each Receipt this Period 50.48

C. MARTIN BEIL
 Full Name (Last, First, Middle Initial)
 Mailing Address 10363 Hudson Road
 City Mazomanie State WI Zip Code 53560-9773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WI CN 24 Occupation EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.05

Date of Receipt 02 / 05 / 2015
Transaction ID : SA11Al.78971
 Amount of Each Receipt this Period 83.62

SUBTOTAL of Receipts This Page (optional).....▶ 188.59
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 9 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 141 Eddington Avenue

City Harrisburg State PA Zip Code 17111-3520

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 203.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2015
Transaction ID : SA11AI.78089

Amount of Each Receipt this Period
 101.64

B. MARK BERNARD
Full Name (Last, First, Middle Initial)

Mailing Address 8 Beacon Street

City Boston State MA Zip Code 02108-0000

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

Name of Employer AFSCME MA CN 93 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2015
Transaction ID : SA11AI.78883

Amount of Each Receipt this Period
 120.00

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

Mailing Address 2223 Wintergreen Avenue

City District Heights State MD Zip Code 20747

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

Name of Employer AFSCME INT'L Occupation FIELD COORDINATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : SA11AI.77669

Amount of Each Receipt this Period
 50.48

SUBTOTAL of Receipts This Page (optional).....▶	272.12
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 10 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 1336 Taylor Street NW

City Washington	State DC	Zip Code 20036
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation ASSOCIATE GENERAL COUNSEL I
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **326.97**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	13	/	2015

Transaction ID : SA11Al.77464

Amount of Each Receipt this Period

108.99

B. MATTHEW S. BLUMIN
Full Name (Last, First, Middle Initial)

Mailing Address 1336 Taylor Street NW

City Washington	State DC	Zip Code 20036
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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 ▼ **435.96**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	27	/	2015

Transaction ID : SA11Al.77671

Amount of Each Receipt this Period

108.99

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

Mailing Address 3724 Benton Street NW

City Washington	State DC	Zip Code 20007-1803
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation EXECUTIVE ASST. TO PRESIDENT
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **596.49**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	13	/	2015

Transaction ID : SA11Al.77466

Amount of Each Receipt this Period

198.83

SUBTOTAL of Receipts This Page (optional).....▶	416.81
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 99
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial) A. PAUL R. BOOTH			Date of Receipt MM / DD / YYYY 02 / 27 / 2015 Transaction ID : SA11Al.77673		
Mailing Address 3724 Benton Street NW			Amount of Each Receipt this Period 198.83		
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 795.32			

Full Name (Last, First, Middle Initial) B. SHARON K BORTON			Date of Receipt MM / DD / YYYY 02 / 27 / 2015 Transaction ID : SA11Al.77674		
Mailing Address 5359 29th Street NW			Amount of Each Receipt this Period 54.75		
City Washington	State DC	Zip Code 20015			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME INT'L		Occupation ASSIST. DIRECTOR, HUMAN RESOURCES			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 219.00			

Full Name (Last, First, Middle Initial) C. WILLIAM BRENNER			Date of Receipt MM / DD / YYYY 02 / 12 / 2015 Transaction ID : SA11Al.78094		
Mailing Address 3300 Old Trail Road			Amount of Each Receipt this Period 101.64		
City York Haven	State PA	Zip Code 17370			
FEC ID number of contributing federal political committee. C					
Name of Employer AFSCME PA CN 13		Occupation STAFF REPRESENTATIVE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 203.28			

SUBTOTAL of Receipts This Page (optional).....▶	355.22
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. CARTER A. BUNDY
Full Name (Last, First, Middle Initial)
Mailing Address 1968 Otowi Drive

City Santa Fe	State NM	Zip Code 87505
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation POLITICAL ACTION REPRESENTATIVE
----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.32

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2015
Transaction ID : SA11Al.77470

Amount of Each Receipt this Period
69.44

B. CARTER A. BUNDY
Full Name (Last, First, Middle Initial)
Mailing Address 1968 Otowi Drive

City Santa Fe	State NM	Zip Code 87505
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation POLITICAL ACTION REPRESENTATIVE
----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
277.76

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : SA11Al.77677

Amount of Each Receipt this Period
69.44

C. CAROL L. BURNETT
Full Name (Last, First, Middle Initial)
Mailing Address 1921 N. Westmoreland Street

City Arlington	State VA	Zip Code 22213
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation GRAPHIC MANAGER, COMMUNICATIONS
----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
219.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : SA11Al.77678

Amount of Each Receipt this Period
54.75

SUBTOTAL of Receipts This Page (optional).....▶	193.63
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. DOUGLAS R. BURNETT
 Full Name (Last, First, Middle Initial)
 Mailing Address 3473 14th 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 ASSISTANT DIRECTOR, POLITICAL ACTION
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **219.00**

Date of Receipt **02 / 27 / 2015**
Transaction ID : SA11AI.77679
 Amount of Each Receipt this Period **54.75**

B. PAULA J. CAIRA
 Full Name (Last, First, Middle Initial)
 Mailing Address 17 Fourteenth Street SE
 City Washington State DC Zip Code 20003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ASSOCIATE GENERAL COUNSEL II
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **252.32**

Date of Receipt **02 / 27 / 2015**
Transaction ID : SA11AI.77681
 Amount of Each Receipt this Period **63.08**

C. RICHARD CAPONI
 Full Name (Last, First, Middle Initial)
 Mailing Address 4453 Stilley Road
 City Pittsburgh State PA Zip Code 15227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **239.52**

Date of Receipt **02 / 12 / 2015**
Transaction ID : SA11AI.78097
 Amount of Each Receipt this Period **119.76**

SUBTOTAL of Receipts This Page (optional)..... **237.59**
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 14 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. GINO A. CARBENIA
Full Name (Last, First, Middle Initial)

Mailing Address 9315 N. Park Avenue

City Indianapolis State IN Zip Code 46240

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 ▼ 420.90

Date of Receipt 02 / 13 / 2015
Transaction ID : SA11AI.77476

Amount of Each Receipt this Period 140.30

B. GINO A. CARBENIA
Full Name (Last, First, Middle Initial)

Mailing Address 9315 N. Park Avenue

City Indianapolis State IN Zip Code 46240

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 ▼ 526.12

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11AI.77683

Amount of Each Receipt this Period 105.22

C. ROBERT CASON
Full Name (Last, First, Middle Initial)

Mailing Address 4301 Executive Park Drive

City Harrisburg State PA Zip Code 17111

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 203.28

Date of Receipt 02 / 12 / 2015
Transaction ID : SA11AI.78099

Amount of Each Receipt this Period 101.64

SUBTOTAL of Receipts This Page (optional)..... ▶ 347.16

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 99
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. MARK E. CAVANAH		Date of Receipt MM / DD / YYYY 02 / 13 / 2015 Transaction ID : SA11Al.77478
Mailing Address 243 Iroquois Drive		Amount of Each Receipt this Period 74.73
City Paducah	State KY	Zip Code 42001
FEC ID number of contributing federal political committee. C	Name of Employer AFSCME INT'L	Occupation LEAD ORGANIZER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.19	

Full Name (Last, First, Middle Initial) B. MARK E. CAVANAH		Date of Receipt MM / DD / YYYY 02 / 27 / 2015 Transaction ID : SA11Al.77685
Mailing Address 243 Iroquois Drive		Amount of Each Receipt this Period 74.73
City Paducah	State KY	Zip Code 42001
FEC ID number of contributing federal political committee. C	Name of Employer AFSCME INT'L	Occupation LEAD ORGANIZER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 298.92	

Full Name (Last, First, Middle Initial) C. JEANETTE CHAVEZ		Date of Receipt MM / DD / YYYY 02 / 27 / 2015 Transaction ID : SA11Al.77686
Mailing Address 1719 Lyman Place NE		Amount of Each Receipt this Period 61.08
City Washington	State DC	Zip Code 20002
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 ▼ 244.32	

SUBTOTAL of Receipts This Page (optional).....▶	210.54
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 OF 99
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. KARL E. CHILDRESS		Date of Receipt
Mailing Address 1605 E Street SE		<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code
Washington	DC	20003
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.77687
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME INT'L	MANAGER, APPLICATIONS DEVELOPMENT	<input type="text" value="54.75"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="219.00"/>	

Full Name (Last, First, Middle Initial) B. KATHERINE A. COAKLEY		Date of Receipt
Mailing Address 410 S. Maple Avenue #604		<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code
Falls Church	VA	20046
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.77689
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME INT'L	AFFILIATE COMMUNICATION MANAGER	<input type="text" value="86.68"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="260.05"/>	

Full Name (Last, First, Middle Initial) C. TRACEY CONATY		Date of Receipt
Mailing Address 3525 Quebec Street NW		<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code
Washington	DC	20016
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.77690
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME INT'L	ASSISTANT DIRECTOR, NEW MEDIA	<input type="text" value="54.75"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="219.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="196.18"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. BARBARA COUFAL
Full Name (Last, First, Middle Initial)

Mailing Address 10112 Parkwood Drive

City Bethesda State MD Zip Code 20814

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

Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, FED GOVT AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 219.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11AI.77692

Amount of Each Receipt this Period 54.75

B. JAMES B. CULLEN
Full Name (Last, First, Middle Initial)

Mailing Address 126 Central Square Apt. 1

City Pittsburgh State PA Zip Code 15228

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 ▼ 219.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11AI.77693

Amount of Each Receipt this Period 54.75

C. WILLIAM DANDO
Full Name (Last, First, Middle Initial)

Mailing Address 6630 Huntingdon Street

City Harrisburg State PA Zip Code 17111

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

Name of Employer AFSCME PA CN 13 Occupation ASSOCIATE LEGISLATIVE DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 203.28

Date of Receipt 02 / 12 / 2015
Transaction ID : SA11AI.78104

Amount of Each Receipt this Period 101.64

SUBTOTAL of Receipts This Page (optional)..... ▶ 211.14

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. EDGAR DEJESUS		Date of Receipt
Mailing Address 8 Ralph Street First Floor		<input type="text" value="02"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>
City Bergenfield State NJ Zip Code 07621-0000		Transaction ID : SA11Al.77488
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer AFSCME INT'L Occupation AREA ORGANIZING DIRECTOR		<input type="text" value="80.62"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="241.86"/>	

Full Name (Last, First, Middle Initial) B. EDGAR DEJESUS		Date of Receipt
Mailing Address 8 Ralph Street First Floor		<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City Bergenfield State NJ Zip Code 07621-0000		Transaction ID : SA11Al.77695
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer AFSCME INT'L Occupation AREA ORGANIZING DIRECTOR		<input type="text" value="80.62"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="322.48"/>	

Full Name (Last, First, Middle Initial) C. CHRISTIE J. DENNIS-SHERRARD		Date of Receipt
Mailing Address 4320 NW Second Avenue		<input type="text" value="02"/> / <input type="text" value="04"/> / <input type="text" value="2015"/>
City Des Moines State IA Zip Code 50313		Transaction ID : SA11Al.78911
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer AFSCME IA CN 61/STATE OF IA Occupation STAFF REPRESENTATIVE		<input type="text" value="75.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="300.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="236.24"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 OF 99
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. CHRISTIE J. DENNIS-SHERRARD
 Full Name (Last, First, Middle Initial)
 Mailing Address 4320 NW Second Avenue
 City Des Moines State IA Zip Code 50313
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IA CN 61/STATE OF IA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 02 / 26 / 2015
Transaction ID : SA11AI.78912
 Amount of Each Receipt this Period 75.00

B. GREG D. DEVEREUX
 Full Name (Last, First, Middle Initial)
 Mailing Address 3561 Kamilche Point Road
 City Shelton State WA Zip Code 98584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28 Occupation EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 254.00

Date of Receipt 02 / 12 / 2015
Transaction ID : SA11AI.78973
 Amount of Each Receipt this Period 120.00

C. GREG D. DEVEREUX
 Full Name (Last, First, Middle Initial)
 Mailing Address 3561 Kamilche Point Road
 City Shelton State WA Zip Code 98584
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME WA CN 28 Occupation EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11AI.77945
 Amount of Each Receipt this Period 14.00

SUBTOTAL of Receipts This Page (optional).....▶ 209.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. JASON DIBBLE
Full Name (Last, First, Middle Initial)

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 ▼ 425.00

Date of Receipt 02 / 26 / 2015
Transaction ID : SA11AI.79108

Amount of Each Receipt this Period 170.00

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

Mailing Address 4741 Grand Ave. So. No. 3

City Minneapolis State MN Zip Code 55419-5443

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

Name of Employer AFSCME MN CN 5/HENNEPIN COUNTY Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 02 / 01 / 2015
Transaction ID : SA11AI.79109

Amount of Each Receipt this Period 240.00

C. JEAN M. DIEDERICH
Full Name (Last, First, Middle Initial)

Mailing Address 4741 Grand Ave. So. No. 3

City Minneapolis State MN Zip Code 55419-5443

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

Name of Employer AFSCME MN CN 5/HENNEPIN COUNTY Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 842.00

Date of Receipt 02 / 26 / 2015
Transaction ID : SA11AI.79110

Amount of Each Receipt this Period 362.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 772.00

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

**SCHEDULE A (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 99
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. MEGAN E. EIERMAN		Date of Receipt
Mailing Address 2250 Ne Flanders #8		<input type="text" value="02"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>
City Portland	State OR	Zip Code 97232
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11Al.77494
Name of Employer AFSCME INT'L		Amount of Each Receipt this Period
Occupation JOURNEY ORGANIZER		<input type="text" value="82.03"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="246.09"/>		

Full Name (Last, First, Middle Initial) B. MEGAN E. EIERMAN		Date of Receipt
Mailing Address 2250 Ne Flanders #8		<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City Portland	State OR	Zip Code 97232
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11Al.77701
Name of Employer AFSCME INT'L		Amount of Each Receipt this Period
Occupation JOURNEY ORGANIZER		<input type="text" value="82.03"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="328.12"/>		

Full Name (Last, First, Middle Initial) C. STEPHAN FANTAUZZO		Date of Receipt
Mailing Address 4415 Fessenden Street NW		<input type="text" value="02"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>
City Washington	State DC	Zip Code 20016
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11Al.77498
Name of Employer AFSCME INT'L		Amount of Each Receipt this Period
Occupation CHIEF OF STAFF TO THE PRESIDENT		<input type="text" value="132.73"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="377.77"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="296.79"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. STEPHAN FANTAUZZO
 Full Name (Last, First, Middle Initial)
 Mailing Address 4415 Fessenden Street NW
 City Washington State DC Zip Code 20016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation CHIEF OF STAFF TO THE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.50

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11Al.77705
 Amount of Each Receipt this Period 132.73

B. RICHARD M. FELLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 5480 Wisconsin Avenue Apt. 1017
 City Chevy Chase State MD Zip Code 20815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ASSOCIATE DIRECTOR, POLITICAL ACTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 237.48

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11Al.77707
 Amount of Each Receipt this Period 59.37

C. GERALD F. FIDLER
 Full Name (Last, First, Middle Initial)
 Mailing Address 7123 Falcon Street
 City Annadale State VA Zip Code 22003
 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 ▼ 200.80

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11Al.77708
 Amount of Each Receipt this Period 50.20

SUBTOTAL of Receipts This Page (optional)..... ▶ 242.30
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 99
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. DAVID FILLMAN		Date of Receipt M M M / D D D / Y Y Y Y Y Y 02 / 12 / 2015 Transaction ID : SA11AI.78116
Mailing Address 2520 Helen Street		Amount of Each Receipt this Period 148.66
City Hatboro	State PA	Zip Code 19040
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME PA CN 13	Occupation EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 311.32	

Full Name (Last, First, Middle Initial) B. DAVID FILLMAN		Date of Receipt M M M / D D D / Y Y Y Y Y Y 02 / 27 / 2015 Transaction ID : SA11AI.77947
Mailing Address 2520 Helen Street		Amount of Each Receipt this Period 14.00
City Hatboro	State PA	Zip Code 19040
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME PA CN 13	Occupation EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.32	

Full Name (Last, First, Middle Initial) C. MICHAEL E. FOX		Date of Receipt M M M / D D D / Y Y Y Y Y Y 02 / 12 / 2015 Transaction ID : SA11AI.78118
Mailing Address 3818 Sheffield Lane		Amount of Each Receipt this Period 119.76
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 ▼ 429.28	

SUBTOTAL of Receipts This Page (optional).....▶	282.42
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 99
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. MICHAEL E. FOX		Date of Receipt MM / DD / YYYY 02 / 27 / 2015 Transaction ID : SA11AI.77948
Mailing Address 3818 Sheffield Lane		Amount of Each Receipt this Period 70.00
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 ▼ 499.28	

Full Name (Last, First, Middle Initial) B. SCOTT L. FREY		Date of Receipt MM / DD / YYYY 02 / 13 / 2015 Transaction ID : SA11AI.77503
Mailing Address 618 S. Payne Street		Amount of Each Receipt this Period 76.07
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C	Name of Employer AFSCME INT'L	Occupation DIRECTOR, FEDERAL GOVERNMENT AFFAI
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.21	

Full Name (Last, First, Middle Initial) C. SCOTT L. FREY		Date of Receipt MM / DD / YYYY 02 / 27 / 2015 Transaction ID : SA11AI.77710
Mailing Address 618 S. Payne Street		Amount of Each Receipt this Period 76.07
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C	Name of Employer AFSCME INT'L	Occupation DIRECTOR, FEDERAL GOVERNMENT AFFAI
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 304.28	

SUBTOTAL of Receipts This Page (optional).....▶	222.14
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. KERRI GALLAGHER
Full Name (Last, First, Middle Initial)

Mailing Address 8 South Main Street

City Mountain Top State PA Zip Code 18707

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 239.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2015
Transaction ID : SA11AI.78120

Amount of Each Receipt this Period
 119.76

B. DEBRA L. GARCIA
Full Name (Last, First, Middle Initial)

Mailing Address 449 College Avenue

City Richmond State IN Zip Code 47374

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

Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.84

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : SA11AI.77713

Amount of Each Receipt this Period
 63.21

C. ALBERT GARRETT
Full Name (Last, First, Middle Initial)

Mailing Address 18491 Lauder

City Detroit State MI Zip Code 48232

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

Name of Employer AFSCME MI CN 25 Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.66

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 02 / 2015
Transaction ID : SA11AI.78638

Amount of Each Receipt this Period
 117.83

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.80

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 99
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. ALBERT GARRETT			Date of Receipt
Mailing Address 18491 Lauder			<input type="text" value="02"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11Al.78677
Detroit	MI	48232	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="117.83"/>
Name of Employer	Occupation		
AFSCME MI CN 25	PRESIDENT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="353.49"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. ALBERT GARRETT			Date of Receipt
Mailing Address 18491 Lauder			<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11Al.78716
Detroit	MI	48232	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="117.83"/>
Name of Employer	Occupation		
AFSCME MI CN 25	PRESIDENT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="471.32"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. STEPHEN M. GRAHAM			Date of Receipt
Mailing Address 7707 Wisconsin Avenue Apt. 529			<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11Al.77724
Bethesda	MD	20814	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="57.79"/>
Name of Employer	Occupation		
AFSCME INT'L	ASSOCIATE DIRECTOR, ACCOUNTING		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="227.46"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="293.45"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. R. SEAN GRAYSON
Full Name (Last, First, Middle Initial)

Mailing Address 10201 Galena Pointe Drive

City Galena	State OH	Zip Code 43021
----------------	-------------	-------------------

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

Name of Employer AFSCME OH CN 8	Occupation GENERAL COUNSEL
------------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
213.68

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		13		2015

Transaction ID : SA11AI.79065

Amount of Each Receipt this Period
106.84

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 SERVICES
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
256.32

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		13		2015

Transaction ID : SA11AI.77518

Amount of Each Receipt this Period
85.44

C. 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 SERVICES
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
341.76

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		27		2015

Transaction ID : SA11AI.77727

Amount of Each Receipt this Period
85.44

SUBTOTAL of Receipts This Page (optional).....▶	277.72
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. JOSEPH M. GUZYNSKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 2543 Cornelia Trail
 Unit J
 City Woodbury State MN Zip Code 55125
 Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 294.81

Date of Receipt 02 / 13 / 2015
Transaction ID : SA11Al.77521
 Amount of Each Receipt this Period 98.27

B. JOSEPH M. GUZYNSKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 2543 Cornelia Trail
 Unit J
 City Woodbury State MN Zip Code 55125
 Name of Employer AFSCME INT'L Occupation AREA FIELD SERVICES DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 462.36

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11Al.77730
 Amount of Each Receipt this Period 167.55

C. MIKE J. HAIDER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2501 S 53rd Avenue
 City Yakima State WA Zip Code 98903
 Name of Employer AFSCME WA CN 2/LOCAL 1122 Occupation MECHANIC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 02 / 24 / 2015
Transaction ID : SA11Al.78746
 Amount of Each Receipt this Period 245.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 510.82
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. STEPHANIE R. HARRISON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1640 Upshur Street NW
 City Washington State DC Zip Code 20011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation DIRECTOR, HUMAN RESOURCES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 293.70

Date of Receipt 02 / 13 / 2015
Transaction ID : SA11AI.77525
 Amount of Each Receipt this Period 97.90

B. STEPHANIE R. HARRISON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1640 Upshur Street NW
 City Washington State DC Zip Code 20011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation DIRECTOR, HUMAN RESOURCES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 391.60

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11AI.77734
 Amount of Each Receipt this Period 97.90

C. MICHAEL D. HATCHER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1981 Hogback Road
 City Albany State KY Zip Code 42602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ASSISTANT TO REGIONAL DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.16

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11AI.77735
 Amount of Each Receipt this Period 75.72

SUBTOTAL of Receipts This Page (optional)..... ▶ 271.52
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 2040 Spring Valley Road

City Pittsburgh State PA Zip Code 15243-1422

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 239.52

Date of Receipt 02 / 12 / 2015
Transaction ID : SA11AI.78129

Amount of Each Receipt this Period 119.76

B. DENNIS HILL
Full Name (Last, First, Middle Initial)

Mailing Address 4 Hickory Street

City Farmington State MN Zip Code 55024-9124

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 26 / 2015
Transaction ID : SA11AI.79112

Amount of Each Receipt this Period 100.00

C. KEVIN E. HILL
Full Name (Last, First, Middle Initial)

Mailing Address 541 Coconut Street

City Satellite Beach State FL Zip Code 32937

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

Name of Employer AFSCME INT'L Occupation FIELD COORDINATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.16

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11AI.77739

Amount of Each Receipt this Period 56.54

SUBTOTAL of Receipts This Page (optional)..... ▶ 276.30

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. SEAN HINGA		Date of Receipt MM / DD / YYYY 02 / 27 / 2015 Transaction ID : SA11AI.77740
Mailing Address 3137 Fulton Street		Amount of Each Receipt this Period 65.79
City Denver	State CO	Zip Code 80238
FEC ID number of contributing federal political committee. C	Name of Employer AFSCME INT'L	Occupation POLITICAL ACTION REPRESENTATIVE III
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 263.16	

Full Name (Last, First, Middle Initial) B. DANNY J. HOMAN		Date of Receipt MM / DD / YYYY 02 / 20 / 2015 Transaction ID : SA11AI.78958
Mailing Address 4320 NW Second Avenue		Amount of Each Receipt this Period 100.00
City Des Moines	State IA	Zip Code 50313
FEC ID number of contributing federal political committee. C	Name of Employer AFSCME IA CN 61	Occupation PRESIDENT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) C. DANNY J. HOMAN		Date of Receipt MM / DD / YYYY 02 / 27 / 2015 Transaction ID : SA11AI.77953
Mailing Address 4320 NW Second Avenue		Amount of Each Receipt this Period 70.00
City Des Moines	State IA	Zip Code 50313
FEC ID number of contributing federal political committee. C	Name of Employer AFSCME IA CN 61	Occupation PRESIDENT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

SUBTOTAL of Receipts This Page (optional).....▶	235.79
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: (check only one)	PAGE 32 OF 99
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. DENNIS HOULIHAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1744 Church Street NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation LABOR ECONOMIST III
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **200.80**

Date of Receipt **02 / 27 / 2015**
Transaction ID : SA11Al.77747
 Amount of Each Receipt this Period **50.20**

B. JAMES E. HOWELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 620 Scrubgrass Road
 City Pittsburgh State PA Zip Code 15243
 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 **210.45**

Date of Receipt **02 / 13 / 2015**
Transaction ID : SA11Al.77539
 Amount of Each Receipt this Period **70.15**

C. JAMES E. HOWELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 620 Scrubgrass Road
 City Pittsburgh State PA Zip Code 15243
 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 **280.60**

Date of Receipt **02 / 27 / 2015**
Transaction ID : SA11Al.77748
 Amount of Each Receipt this Period **70.15**

SUBTOTAL of Receipts This Page (optional)..... **190.50**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. CARLA INSINGA-MINSER		Date of Receipt
Mailing Address 4287 South Carolina Drive		<input type="text" value="02"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City	State	Zip Code
Blue Ridge	PA	17112
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.78132
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME PA CN 13	ORGANIZING DIRECTOR	<input type="text" value="101.64"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="203.28"/>	

Full Name (Last, First, Middle Initial) B. EDWIN S. JAYNE		Date of Receipt
Mailing Address 3304 Alabama Avenue		<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code
Alexandria	VA	22305
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.77753
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME INT'L	ASSOCIATE DIRECTOR, FED GOV'T AFFAIR	<input type="text" value="59.37"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="237.48"/>	

Full Name (Last, First, Middle Initial) C. PAMELA L. JENKINS		Date of Receipt
Mailing Address 47604 Sandbank Square		<input type="text" value="02"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>
City	State	Zip Code
Potomac Falls	VA	20165
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11Al.77546
Name of Employer	Occupation	Amount of Each Receipt this Period
AFSCME INT'L	SPECIAL ASSISTANT TO THE PRESIDENT	<input type="text" value="90.30"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.80"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="251.31"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 99
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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

A. PAMELA L. JENKINS
Full Name (Last, First, Middle Initial)

Mailing Address 47604 Sandbank Square

City Potomac Falls State VA Zip Code 20165

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

Name of Employer AFSCME INT'L Occupation SPECIAL ASSISTANT TO THE PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **331.10**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 27 / 2015

Transaction ID : SA11Al.77755

Amount of Each Receipt this Period
90.30

B. SETH M. JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 727 7th Street NE

City Washington State DC Zip Code 20002

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

Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, POLITICAL ACTION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **328.47**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 13 / 2015

Transaction ID : SA11Al.77548

Amount of Each Receipt this Period
109.49

C. SETH M. JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 727 7th Street NE

City Washington State DC Zip Code 20002

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

Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, POLITICAL ACTION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **437.96**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 27 / 2015

Transaction ID : SA11Al.77757

Amount of Each Receipt this Period
109.49

SUBTOTAL of Receipts This Page (optional).....▶	309.28
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. GERALD E. JONES
Full Name (Last, First, Middle Initial)

Mailing Address 4320 NW Second Avenue

City Des Moines	State IA	Zip Code 50313
--------------------	-------------	-------------------

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

Name of Employer AFSCME IA CN 61/STATE OF IA	Occupation STAFF REPRESENTATIVE
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2015
Transaction ID : SA11AI.78915

Amount of Each Receipt this Period
80.00

B. CHARLES JURGONIS
Full Name (Last, First, Middle Initial)

Mailing Address 11704 Bobs Ford Road

City Fairfax	State VA	Zip Code 22030
-----------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation DIRECTOR, FINANCIAL SERVICES
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
401.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2015
Transaction ID : SA11AI.77550

Amount of Each Receipt this Period
88.38

C. CHARLES JURGONIS
Full Name (Last, First, Middle Initial)

Mailing Address 11704 Bobs Ford Road

City Fairfax	State VA	Zip Code 22030
-----------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation DIRECTOR, FINANCIAL SERVICES
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
536.90

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 26 / 2015
Transaction ID : SA11AI.77551

Amount of Each Receipt this Period
135.88

SUBTOTAL of Receipts This Page (optional).....▶	274.26
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 36 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 11704 Bobs Ford Road

City State Zip Code
Fairfax VA 22030

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

Name of Employer Occupation
AFSCME INT'L DIRECTOR, FINANCIAL SERVICES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.28

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 27 / 2015

Transaction ID : SA11AI.77759

Amount of Each Receipt this Period
88.38

B. KERRY KORPI
Full Name (Last, First, Middle Initial)

Mailing Address 8913 First Avenue

City State Zip Code
Silver Spring MD 20910

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.78

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 26 / 2015

Transaction ID : SA11AI.77900

Amount of Each Receipt this Period
102.39

C. STEVEN KREISBERG
Full Name (Last, First, Middle Initial)

Mailing Address 9954 Whitewater Drive

City State Zip Code
Burke VA 22015

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

Name of Employer Occupation
AFSCME INT'L DIRECTOR, RESEARCH

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
222.12

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 13 / 2015

Transaction ID : SA11AI.77554

Amount of Each Receipt this Period
74.04

SUBTOTAL of Receipts This Page (optional)..... ▶ **264.81**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. STEVEN KREISBERG
 Full Name (Last, First, Middle Initial)
 Mailing Address 9954 Whitewater Drive
 City State Zip Code
 Burke VA 22015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME INT'L DIRECTOR, RESEARCH
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 296.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : SA11Al.77762
 Amount of Each Receipt this Period
 74.04

B. RHONDA L LATHON
 Full Name (Last, First, Middle Initial)
 Mailing Address 8521 Moon Glass Court
 City State Zip Code
 Columbia MD 21045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME INT'L BUSINESS ANALYST III
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 200.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : SA11Al.77764
 Amount of Each Receipt this Period
 50.20

C. ERIC N. LEHTO
 Full Name (Last, First, Middle Initial)
 Mailing Address 2122 West 2nd Street
 Apt. #2
 City State Zip Code
 Duluth MN 55086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 AFSCME MN CN 5/CN14 DIRECTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2015
Transaction ID : SA11Al.78807
 Amount of Each Receipt this Period
 105.22

SUBTOTAL of Receipts This Page (optional)..... ▶ 229.46
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. CHARLES E. LESTER			Date of Receipt
Mailing Address 2475 Chandler Avenue			<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11Al.77766
Las Vegas	NV	89120	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="50.48"/>
Name of Employer	Occupation		
AFSCME INT'L	ASSISTANT TO REGIONAL DIRECTOR		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="201.92"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. SUSAN T. LEVITAN			Date of Receipt
Mailing Address 2650 Worrell Court			<input type="text" value="02"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11Al.77559
Crofton	MD	21114	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="79.93"/>
Name of Employer	Occupation		
AFSCME INT'L	ASSISTANT DIRECTOR, POLITICAL ACTION		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="239.79"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. SUSAN T. LEVITAN			Date of Receipt
Mailing Address 2650 Worrell Court			<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11Al.77767
Crofton	MD	21114	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="79.93"/>
Name of Employer	Occupation		
AFSCME INT'L	ASSISTANT DIRECTOR, POLITICAL ACTION		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="319.72"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="210.34"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. MICHELE A. LEWIS-MUZZATTI
 Full Name (Last, First, Middle Initial)
 Mailing Address 3705 Adams Drive
 City Silver Spring State MD Zip Code 20902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation DIRECTOR, CONF & TRAVEL SVCS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 426.62

Date of Receipt 02 / 13 / 2015
Transaction ID : SA11AI.77560
 Amount of Each Receipt this Period 130.54

B. MICHELE A. LEWIS-MUZZATTI
 Full Name (Last, First, Middle Initial)
 Mailing Address 3705 Adams Drive
 City Silver Spring State MD Zip Code 20902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation DIRECTOR, CONF & TRAVEL SVCS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 557.16

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11AI.77768
 Amount of Each Receipt this Period 130.54

C. MICHAEL LINDHOLT
 Full Name (Last, First, Middle Initial)
 Mailing Address 2752 Randolph Street NE
 City Minneapolis State MN Zip Code 55418-2622
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MN CN 5/STATE OF MN Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 26 / 2015
Transaction ID : SA11AI.79114
 Amount of Each Receipt this Period 120.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 381.08
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. TOM LIPKO
Full Name (Last, First, Middle Initial)

Mailing Address 117 South Main Street

City Carbondale State PA Zip Code 18407

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **257.84**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 12 / 2015

Transaction ID : SA11Al.78141

Amount of Each Receipt this Period
128.92

B. COREY LOCKARD
Full Name (Last, First, Middle Initial)

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 ▼ **239.52**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 12 / 2015

Transaction ID : SA11Al.78142

Amount of Each Receipt this Period
119.76

C. SALVATORE LUCIANO
Full Name (Last, First, Middle Initial)

Mailing Address 947 Bunker Hill Road

City Watertown State CT Zip Code 06795-0000

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

Name of Employer AFSCME CT CN 4 Occupation EXECUTIVE DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **214.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 19 / 2015

Transaction ID : SA11Al.78910

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	348.68
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. SALVATORE LUCIANO
Full Name (Last, First, Middle Initial)

Mailing Address 947 Bunker Hill Road

City Watertown State CT Zip Code 06795-0000

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

Name of Employer AFSCME CT CN 4 Occupation EXECUTIVE DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **228.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 27 / 2015

Transaction ID : SA11AI.77954

Amount of Each Receipt this Period
14.00

B. WILLIAM LUCY
Full Name (Last, First, Middle Initial)

Mailing Address 1831 Sudbury Lane NW

City Washington State DC Zip Code 20012-2202

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **366.40**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 26 / 2015

Transaction ID : SA11AI.77904

Amount of Each Receipt this Period
183.20

C. WILLIAM LURYE
Full Name (Last, First, Middle Initial)

Mailing Address 17 Sherman Avenue

City Takoma Park State MD Zip Code 20912

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

Name of Employer AFSCME INT'L Occupation GENERAL COUNSEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **265.14**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 13 / 2015

Transaction ID : SA11AI.77563

Amount of Each Receipt this Period
88.38

SUBTOTAL of Receipts This Page (optional).....▶	285.58
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. WILLIAM LURYE
Full Name (Last, First, Middle Initial)

Mailing Address 17 Sherman Avenue

City Takoma Park State MD Zip Code 20912

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

Name of Employer AFSCME INT'L Occupation GENERAL COUNSEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **353.52**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 27 / 2015

Transaction ID : SA11Al.77773

Amount of Each Receipt this Period
88.38

B. JOHN A. LYALL
Full Name (Last, First, Middle Initial)

Mailing Address 383 Ashmoore Circle East

City Powell State OH Zip Code 43065

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

Name of Employer AFSCME OH CN 8 Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **256.02**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 13 / 2015

Transaction ID : SA11Al.79075

Amount of Each Receipt this Period
130.36

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

Mailing Address 383 Ashmoore Circle East

City Powell State OH Zip Code 43065

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

Name of Employer AFSCME OH CN 8 Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.02**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
02 / 27 / 2015

Transaction ID : SA11Al.77955

Amount of Each Receipt this Period
14.00

SUBTOTAL of Receipts This Page (optional).....▶	232.74
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. LARRY MALONE
Full Name (Last, First, Middle Initial)

Mailing Address 5185 Horseshoe Falls Drive

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

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

Name of Employer AFSCME OH LOC 4	Occupation FIELD REPRESENTATIVE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	20	/	2015

Transaction ID : SA11Al.78382

Amount of Each Receipt this Period
57.69

B. JILLIAN P. MATUNDAN
Full Name (Last, First, Middle Initial)

Mailing Address 134 North Pine Avenue

City Albany	State NY	Zip Code 12203
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FEC ID number of contributing federal political committee. **C**

Name of Employer AFSCME INT'L	Occupation ASSIST. DIRECTOR, ORGANIZNG & FLD SV
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

Transaction ID : SA11Al.77781

Amount of Each Receipt this Period
49.80

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

Mailing Address 1833 Ontario Place NW

City Washington	State DC	Zip Code 20009
--------------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation MANAGER, STRATEGIC RESEARCH
----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

Transaction ID : SA11Al.77782

Amount of Each Receipt this Period
50.48

SUBTOTAL of Receipts This Page (optional).....	157.97
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: (check only one)	PAGE 44 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. ELISSA MCBRIDE
Full Name (Last, First, Middle Initial)

Mailing Address 9 Sherman Avenue

City Takoma Park State MD Zip Code 20912

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

Name of Employer AFSCME INT'L Occupation DIRECTOR, EDUCATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **342.33**

Date of Receipt **02 / 13 / 2015**

Transaction ID : SA11Al.77572

Amount of Each Receipt this Period **114.11**

B. ELISSA MCBRIDE
Full Name (Last, First, Middle Initial)

Mailing Address 9 Sherman Avenue

City Takoma Park State MD Zip Code 20912

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

Name of Employer AFSCME INT'L Occupation DIRECTOR, EDUCATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **456.44**

Date of Receipt **02 / 27 / 2015**

Transaction ID : SA11Al.77783

Amount of Each Receipt this Period **114.11**

C. CYNTHIA R. MCCABE
Full Name (Last, First, Middle Initial)

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 ASSOCIATE DIRECTOR, COMMUNICATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **229.62**

Date of Receipt **02 / 27 / 2015**

Transaction ID : SA11Al.77784

Amount of Each Receipt this Period **57.79**

SUBTOTAL of Receipts This Page (optional)..... **286.01**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 45 OF 99
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. MARGARET MCCANN
Full Name (Last, First, Middle Initial)

Mailing Address 103 Lynnmore Drive

City Silver Spring State MD Zip Code 20901

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

Name of Employer AFSCME INT'L Occupation ASSOCIATE GENERAL COUNSEL II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.32

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11Al.77786

Amount of Each Receipt this Period 63.08

B. BRIAN P. MCDONNELL
Full Name (Last, First, Middle Initial)

Mailing Address 56 Chestnut Lane

City Niskayuna State NY Zip Code 12309

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

Name of Employer AFSCME INT'L Occupation ASSOCIATE DIRECTOR, POLITICAL ACTION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 219.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11Al.77787

Amount of Each Receipt this Period 54.75

C. GERALD MCENTEE
Full Name (Last, First, Middle Initial)

Mailing Address 800 25th Street NW Apt. #406

City Washington State DC Zip Code 20037-2207

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 278.54

Date of Receipt 02 / 26 / 2015
Transaction ID : SA11Al.77906

Amount of Each Receipt this Period 139.27

SUBTOTAL of Receipts This Page (optional)..... ▶ 257.10

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. YOLANDA MEDINA
Full Name (Last, First, Middle Initial)

Mailing Address 8 Ralph Street
Apt. 1

City Bergenfield State NJ Zip Code 07621-0000

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

Name of Employer AFSCME INT'L Occupation FIELD EDUCATION COORDINATOR II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
207.44

Date of Receipt
02 / 27 / 2015
Transaction ID : SA11Al.77788

Amount of Each Receipt this Period
51.86

B. MICHAEL J. MESSINA
Full Name (Last, First, Middle Initial)

Mailing Address 752 Silver Spring 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 LABOR ECONOMIST III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
213.12

Date of Receipt
02 / 27 / 2015
Transaction ID : SA11Al.77790

Amount of Each Receipt this Period
53.28

C. TERESA L. MEYER
Full Name (Last, First, Middle Initial)

Mailing Address 2107 West Bremer Avenue

City Waverly State IA Zip Code 50677

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

Name of Employer AFSCME IA CN 61/LOCAL 2998 Occupation REGISTERED NURSE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
02 / 19 / 2015
Transaction ID : SA11Al.79124

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.14

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. HAROLD F. MITCHELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 3999 Kensingwood Drive
 City Columbus State OH Zip Code 43230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH CN 8 Occupation ASSISTANT ORGANIZING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.40

Date of Receipt 02 / 13 / 2015
Transaction ID : SA11AI.79082
 Amount of Each Receipt this Period 115.80

B. KAREN MOMBERGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 102 Manor Road
 City New Kensington State PA Zip Code 15068
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 203.28

Date of Receipt 02 / 12 / 2015
Transaction ID : SA11AI.78149
 Amount of Each Receipt this Period 101.64

C. FRANCIS MORONEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 Jamaica Road
 City Brookline State MA Zip Code 02146-0000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MA CN 93 Occupation EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 203.34

Date of Receipt 02 / 19 / 2015
Transaction ID : SA11AI.78900
 Amount of Each Receipt this Period 120.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 337.44
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 48 OF 99
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. STEVEN C. MULLEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 544 Clermont Drive
 City Harrisburg State PA Zip Code 17112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME PA CN 13 Occupation TRADES LABORER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.16

Date of Receipt 02 / 12 / 2015
Transaction ID : SA11AI.78152
 Amount of Each Receipt this Period 179.64

B. MARK MURPHY
 Full Name (Last, First, Middle Initial)
 Mailing Address 2133 Farrington Avenue
 City Alexandria State VA Zip Code 22303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation LABOR ECONOMIST III
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.80

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11AI.77793
 Amount of Each Receipt this Period 50.20

C. RACHEL E. NAUMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 11021 Horseshoe Drive
 City Frederick State MD Zip Code 21701-3397
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation SPECIAL ASSISTANT TO SECRETARY TREA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 229.77

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11AI.77794
 Amount of Each Receipt this Period 76.59

SUBTOTAL of Receipts This Page (optional)..... ▶ 306.43
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 49 OF 99
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. BENJAMIN A. NEEDHAM			Date of Receipt MM / DD / YYYY 02 / 13 / 2015 Transaction ID : SA11Al.77584
Mailing Address P.O. Box 15206			Amount of Each Receipt this Period 69.82
City Washington	State DC	Zip Code 20003	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation REGIONAL FIELD MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 209.46		

Full Name (Last, First, Middle Initial) B. BENJAMIN A. NEEDHAM			Date of Receipt MM / DD / YYYY 02 / 27 / 2015 Transaction ID : SA11Al.77795
Mailing Address P.O. Box 15206			Amount of Each Receipt this Period 69.82
City Washington	State DC	Zip Code 20003	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME INT'L	Occupation REGIONAL FIELD MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 279.28		

Full Name (Last, First, Middle Initial) C. JAMES B. NILAND			Date of Receipt MM / DD / YYYY 02 / 13 / 2015 Transaction ID : SA11Al.78815
Mailing Address 2728 Pleasant Avenue			Amount of Each Receipt this Period 160.00
City Minneapolis	State MN	Zip Code 55408	
FEC ID number of contributing federal political committee. C			
Name of Employer AFSCME MN CN 5/CN14	Occupation LEGISLATIVE/POLITICAL ACTION DIRECTOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		

SUBTOTAL of Receipts This Page (optional).....▶	299.64
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. TRAVIS OHM
Full Name (Last, First, Middle Initial)
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 **203.28**

Date of Receipt **02 / 12 / 2015**
Transaction ID : SA11AI.78154
Amount of Each Receipt this Period **101.64**

B. HOLLY Y. OLSON
Full Name (Last, First, Middle Initial)
Mailing Address 15443 Martins Hundred Drive
City Centerville State VA Zip Code 20120
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME INT'L Occupation DIRECTOR, GENERAL SERVICES
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **261.08**

Date of Receipt **02 / 27 / 2015**
Transaction ID : SA11AI.77800
Amount of Each Receipt this Period **65.27**

C. CURT A. OSTRANDER
Full Name (Last, First, Middle Initial)
Mailing Address 20 First Tavern Road
City Jaffrey State NH Zip Code 03452-0000
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME INT'L Occupation INT'L UNION BARGAINING REPRESENTATIVE
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **200.80**

Date of Receipt **02 / 27 / 2015**
Transaction ID : SA11AI.77801
Amount of Each Receipt this Period **50.20**

SUBTOTAL of Receipts This Page (optional)..... **217.11**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. WILLIE L. PELOTE
Full Name (Last, First, Middle Initial)

Mailing Address 351 Ross Way

City Sacramento State CA Zip Code 95864

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

Name of Employer AFSCME INT'L Occupation ASSISTANT DIRECTOR, POLITICAL ACTION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 219.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11AI.77803

Amount of Each Receipt this Period 54.75

B. RANDOLPH P. PERREIRA
Full Name (Last, First, Middle Initial)

Mailing Address 1044 Mokuhano Street

City Honolulu State HI Zip Code 96825

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

Name of Employer AFSCME HI LOC 152 Occupation EXECUTIVE DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 214.00

Date of Receipt 02 / 02 / 2015
Transaction ID : SA11AI.78561

Amount of Each Receipt this Period 100.00

C. RANDOLPH P. PERREIRA
Full Name (Last, First, Middle Initial)

Mailing Address 1044 Mokuhano Street

City Honolulu State HI Zip Code 96825

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

Name of Employer AFSCME HI LOC 152 Occupation EXECUTIVE DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11AI.77961

Amount of Each Receipt this Period 14.00

SUBTOTAL of Receipts This Page (optional).....▶ 168.75

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 52 OF 99
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. IVA J. PETERS
Full Name (Last, First, Middle Initial)

Mailing Address 1939 Salem School Road

City Pineyville	State KY	Zip Code 40162
--------------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation FIELD COORDINATOR
----------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **257.02**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	13	/	2015

Transaction ID : SA11Al.77594

Amount of Each Receipt this Period

86.58

B. IVA J. PETERS
Full Name (Last, First, Middle Initial)

Mailing Address 1939 Salem School Road

City Pineyville	State KY	Zip Code 40162
--------------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation FIELD COORDINATOR
----------------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **343.60**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	27	/	2015

Transaction ID : SA11Al.77806

Amount of Each Receipt this Period

86.58

C. KOLBY PETERSON
Full Name (Last, First, Middle Initial)

Mailing Address 9417 Braymore Circle

City Fairfax Station	State VA	Zip Code 22039
-------------------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, POLLING
----------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.92**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	27	/	2015

Transaction ID : SA11Al.77807

Amount of Each Receipt this Period

50.48

SUBTOTAL of Receipts This Page (optional).....▶	223.64
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 53 OF 99
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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

A. RONNIE D. PETERSON
Full Name (Last, First, Middle Initial)

Mailing Address 1146 Rue Willette Blvd.

City Ypsilanti	State MI	Zip Code 48196
-------------------	-------------	-------------------

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 ▼
451.83

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2015
Transaction ID : SA11AI.77596

Amount of Each Receipt this Period
 150.61

B. RONNIE D. PETERSON
Full Name (Last, First, Middle Initial)

Mailing Address 1146 Rue Willette Blvd.

City Ypsilanti	State MI	Zip Code 48196
-------------------	-------------	-------------------

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 ▼
602.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : SA11AI.77808

Amount of Each Receipt this Period
 150.61

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

Mailing Address 1957 Coppermine Road

City Buchanan	State GA	Zip Code 30113
------------------	-------------	-------------------

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

Name of Employer AFSCME INT'L	Occupation ASSISTANT TO REGIONAL DIRECTOR
----------------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.22

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2015
Transaction ID : SA11AI.77597

Amount of Each Receipt this Period
 71.74

SUBTOTAL of Receipts This Page (optional).....▶	372.96
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. RICHARD L. PETTIT			Date of Receipt
Mailing Address 1957 Coppermine Road			<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11Al.77809
Buchanan	GA	30113	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="71.74"/>
Name of Employer	Occupation		
AFSCME INT'L	ASSISTANT TO REGIONAL DIRECTOR		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="286.96"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. CLIFFORD T. POEHLER			Date of Receipt
Mailing Address 565 Glendale Street			<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11Al.79116
Minneapolis	MN	55104	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="102.45"/>
Name of Employer	Occupation		
AFSCME MN CN 5/HENNEPIN COUNTY	LEGAL ASSISTANT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="239.05"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. NICOLE R. POLLARD			Date of Receipt
Mailing Address 9404 Nicklaus Lane			<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11Al.77810
Laurel	MD	20708	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="63.08"/>
Name of Employer	Occupation		
AFSCME INT'L	ASSOCIATE GENERAL COUNSEL II		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="252.32"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="237.27"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. STEVE PREBLE
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 204

City Colerain	State MN	Zip Code 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 ▼ **207.88**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	02	/	2015

Transaction ID : SA11AI.78856

Amount of Each Receipt this Period

97.92

B. STEVE PREBLE
Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 204

City Colerain	State MN	Zip Code 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 ▼ **221.88**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

Transaction ID : SA11AI.77962

Amount of Each Receipt this Period

14.00

C. LAURA REYES
Full Name (Last, First, Middle Initial)
Mailing Address 3440 Joan Court

City Falls Church	State VA	Zip Code 20042
----------------------	-------------	-------------------

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 ▼ **326.82**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	13	/	2015

Transaction ID : SA11AI.77602

Amount of Each Receipt this Period

108.94

SUBTOTAL of Receipts This Page (optional).....▶	220.86
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 56 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. LAURA REYES
Full Name (Last, First, Middle Initial)

Mailing Address 3440 Joan Court

City Falls Church State VA Zip Code 20042

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 ▼ 490.23

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : SA11Al.77814

Amount of Each Receipt this Period
 163.41

B. MICHELLE RIDER
Full Name (Last, First, Middle Initial)

Mailing Address 4031 Executive Park Drive

City Harrisburg State PA Zip Code 17111

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.56

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 12 / 2015
Transaction ID : SA11Al.78162

Amount of Each Receipt this Period
 140.28

C. JUDITH E. RIVLIN
Full Name (Last, First, Middle Initial)

Mailing Address 5203 Westport Road

City Chevy Chase State MD Zip Code 20815

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

Name of Employer AFSCME INT'L Occupation DEPUTY GENERAL COUNSEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 206.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2015
Transaction ID : SA11Al.77604

Amount of Each Receipt this Period
 69.96

SUBTOTAL of Receipts This Page (optional)..... ▶ 373.65

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. JUDITH E. RIVLIN			Date of Receipt
Mailing Address 5203 Westport Road			<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11AI.77818
Chevy Chase	MD	20815	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="70.15"/>
Name of Employer	Occupation		
AFSCME INT'L	DEPUTY GENERAL COUNSEL		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="276.67"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. JESSICA R. ROBINSON			Date of Receipt
Mailing Address 7901 Chicago Avenue			<input type="text" value="02"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11AI.77605
Silver Spring	MD	20910	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="126.17"/>
Name of Employer	Occupation		
AFSCME INT'L	ASSOCIATE GENERAL COUNSEL II		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="378.51"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. JESSICA R. ROBINSON			Date of Receipt
Mailing Address 7901 Chicago Avenue			<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11AI.77819
Silver Spring	MD	20910	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="126.17"/>
Name of Employer	Occupation		
AFSCME INT'L	ASSOCIATE GENERAL COUNSEL II		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="504.68"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="322.49"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. LAWRENCE ROEHRIG			Date of Receipt
Mailing Address 13084 Lia Court			<input type="text" value="02"/> / <input type="text" value="02"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11AI.78652
Lindon	MI	48451	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="106.88"/>
Name of Employer	Occupation		
AFSCME MI CN 25	EXECUTIVE DIRECTOR		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="283.76"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. LAWRENCE ROEHRIG			Date of Receipt
Mailing Address 13084 Lia Court			<input type="text" value="02"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11AI.78691
Lindon	MI	48451	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="106.88"/>
Name of Employer	Occupation		
AFSCME MI CN 25	EXECUTIVE DIRECTOR		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="390.64"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. LAWRENCE ROEHRIG			Date of Receipt
Mailing Address 13084 Lia Court			<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11AI.77965
Lindon	MI	48451	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="70.00"/>
Name of Employer	Occupation		
AFSCME MI CN 25	EXECUTIVE DIRECTOR		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="460.64"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="283.76"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 59 OF 99
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. LAWRENCE ROEHRIG
 Full Name (Last, First, Middle Initial)
 Mailing Address 13084 Lia Court
 City London State MI Zip Code 48451
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME MI CN 25 Occupation EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 567.52

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11AI.78730
 Amount of Each Receipt this Period 106.88

B. SUSAN L. ROWE
 Full Name (Last, First, Middle Initial)
 Mailing Address 207 9th Avenue
 City Slater State IA Zip Code 50244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IA CN 61/STATE OF IA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 02 / 04 / 2015
Transaction ID : SA11AI.78917
 Amount of Each Receipt this Period 55.00

C. SUSAN L. ROWE
 Full Name (Last, First, Middle Initial)
 Mailing Address 207 9th Avenue
 City Slater State IA Zip Code 50244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME IA CN 61/STATE OF IA Occupation STAFF REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 02 / 26 / 2015
Transaction ID : SA11AI.78918
 Amount of Each Receipt this Period 55.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 216.88
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 60 OF 99
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. JOSEPH P. RUGOLA
 Full Name (Last, First, Middle Initial)
 Mailing Address 6805 Oak Creek Drive
 City Columbus State OH Zip Code 43229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4 Occupation EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 02 / 20 / 2015
Transaction ID : SA11Al.78286
 Amount of Each Receipt this Period 110.00

B. JOSEPH P. RUGOLA
 Full Name (Last, First, Middle Initial)
 Mailing Address 6805 Oak Creek Drive
 City Columbus State OH Zip Code 43229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4 Occupation EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 344.00

Date of Receipt 02 / 20 / 2015
Transaction ID : SA11Al.78340
 Amount of Each Receipt this Period 110.00

C. JOSEPH P. RUGOLA
 Full Name (Last, First, Middle Initial)
 Mailing Address 6805 Oak Creek Drive
 City Columbus State OH Zip Code 43229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME OH LOC 4 Occupation EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 454.00

Date of Receipt 02 / 20 / 2015
Transaction ID : SA11Al.78394
 Amount of Each Receipt this Period 110.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 330.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. JOSEPH P. RUGOLA
Full Name (Last, First, Middle Initial)

Mailing Address 6805 Oak Creek Drive

City Columbus State OH Zip Code 43229

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

Name of Employer AFSCME OH LOC 4 Occupation EXECUTIVE DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11Al.77966

Amount of Each Receipt this Period 14.00

B. BLAINE J. RUMMEL
Full Name (Last, First, Middle Initial)

Mailing Address 5 E. Glebe Road Apt. D

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, COMMUNICATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 261.83

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11Al.77821

Amount of Each Receipt this Period 66.46

C. LEE A. SAUNDERS
Full Name (Last, First, Middle Initial)

Mailing Address 7510 Alaska Avenue NW

City Washington State DC Zip Code 20012

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

Name of Employer AFSCME INT'L Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 384.51

Date of Receipt 02 / 13 / 2015
Transaction ID : SA11Al.77609

Amount of Each Receipt this Period 128.17

SUBTOTAL of Receipts This Page (optional)..... ▶ 208.63

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. LEE A. SAUNDERS
Full Name (Last, First, Middle Initial)

Mailing Address 7510 Alaska Avenue NW

City Washington State DC Zip Code 20012

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

Name of Employer AFSCME INT'L Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **512.68**

Date of Receipt **02 / 27 / 2015**

Transaction ID : SA11Al.77823

Amount of Each Receipt this Period **128.17**

B. DARL D. SCHOSSOW
Full Name (Last, First, Middle Initial)

Mailing Address 1910 2nd Avenue P.O. Box 189

City Newport State MN Zip Code 55055

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **02 / 26 / 2015**

Transaction ID : SA11Al.79117

Amount of Each Receipt this Period **200.00**

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

Mailing Address 419 Valley Street

City Marysville State PA Zip Code 17053

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **239.52**

Date of Receipt **02 / 12 / 2015**

Transaction ID : SA11Al.78172

Amount of Each Receipt this Period **119.76**

SUBTOTAL of Receipts This Page (optional)..... **447.93**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. SHELLEY K. SEEBERG
Full Name (Last, First, Middle Initial)

Mailing Address 7529 Florine Avenue

City Las Vegas	State NV	Zip Code 89129
-------------------	-------------	-------------------

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 ▼
204.84

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	13	/	2015

Transaction ID : SA11Al.77611

Amount of Each Receipt this Period
68.28

B. SHELLEY K. SEEBERG
Full Name (Last, First, Middle Initial)

Mailing Address 7529 Florine Avenue

City Las Vegas	State NV	Zip Code 89129
-------------------	-------------	-------------------

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 ▼
258.58

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	27	/	2015

Transaction ID : SA11Al.77825

Amount of Each Receipt this Period
53.74

C. ELIOT A. SEIDE
Full Name (Last, First, Middle Initial)

Mailing Address 300 Hardman Avenue South

City South St. Paul	State MN	Zip Code 55075
------------------------	-------------	-------------------

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

Name of Employer AFSCME MN CN 5/CN14	Occupation EXECUTIVE DIRECTOR
---	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.06

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	13	/	2015

Transaction ID : SA11Al.78819

Amount of Each Receipt this Period
98.52

SUBTOTAL of Receipts This Page (optional).....▶	220.54
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 64 OF 99
(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. ELIOT A. SEIDE
Full Name (Last, First, Middle Initial)
Mailing Address 300 Hardman Avenue South
City South St. Paul State MN Zip Code 55075
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME MN CN 5/CN14 Occupation EXECUTIVE DIRECTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 224.06

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11AI.77967
Amount of Each Receipt this Period 14.00

B. MICHELLE A. SFORZA
Full Name (Last, First, Middle Initial)
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 ASSISTANT DIRECTOR, CORPORATE AFFA
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 237.48

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11AI.77827
Amount of Each Receipt this Period 59.37

C. DOMINIC SGRO
Full Name (Last, First, Middle Initial)
Mailing Address 144 Stormer Road
City Indiana State PA Zip Code 15701-0144
FEC ID number of contributing federal political committee. **C**
Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 239.52

Date of Receipt 02 / 12 / 2015
Transaction ID : SA11AI.78173
Amount of Each Receipt this Period 119.76

SUBTOTAL of Receipts This Page (optional).....▶ 193.13
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 65 OF 99
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. NORMAN L. SNYDER		Date of Receipt
Mailing Address 139 Sycamore Street East #4		M M M / D D D / Y Y Y Y Y Y 02 / 26 / 2015
City	State	Zip Code
St. Paul	MN	55117
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.79119
Name of Employer AFSCME MN CN 5/RAMSEY COUNTY		Amount of Each Receipt this Period
Occupation COUNSELOR		110.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	220.00	

Full Name (Last, First, Middle Initial) B. DARRIN SPANN		Date of Receipt
Mailing Address 6130 Springford Drive #C6		M M M / D D D / Y Y Y Y Y Y 02 / 12 / 2015
City	State	Zip Code
Harrisburg	PA	17111
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.78176
Name of Employer AFSCME PA CN 13		Amount of Each Receipt this Period
Occupation STAFF REPRESENTATIVE		100.14
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	250.35	

Full Name (Last, First, Middle Initial) C. KAMALA B. SRIKAR		Date of Receipt
Mailing Address 9908 Colebrook Avenue		M M M / D D D / Y Y Y Y Y Y 02 / 27 / 2015
City	State	Zip Code
Potomac	MD	20854
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.77833
Name of Employer AFSCME INT'L		Amount of Each Receipt this Period
Occupation ASSOC. DIRECTOR, CONF & TRAVEL SVCS		57.79
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	231.16	

SUBTOTAL of Receipts This Page (optional).....▶	267.93
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 99
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. ANDREA STRADER
 Full Name (Last, First, Middle Initial)
 Mailing Address 1234 Massachusetts Avenue NW #524
 City Washington State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation POLITICAL ACTION REPRESENTATIVE III
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **206.84**

Date of Receipt **02 / 27 / 2015**
Transaction ID : SA11AI.77839
 Amount of Each Receipt this Period **51.71**

B. TIMOTHY J. STRECKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 70 I Street SE Apt. 736
 City Washington State DC Zip Code 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 **237.48**

Date of Receipt **02 / 27 / 2015**
Transaction ID : SA11AI.77841
 Amount of Each Receipt this Period **59.37**

C. MICHAEL E. SUKAL
 Full Name (Last, First, Middle Initial)
 Mailing Address 18033 Mill Creek Drive
 City Derwood State MD Zip Code 20855
 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 **243.39**

Date of Receipt **02 / 13 / 2015**
Transaction ID : SA11AI.77630
 Amount of Each Receipt this Period **81.13**

SUBTOTAL of Receipts This Page (optional)..... **192.21**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 67 OF 99
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 18033 Mill Creek Drive

City Derwood State MD Zip Code 20855

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 ▼ **324.52**

Date of Receipt **02 / 27 / 2015**

Transaction ID : SA11AI.77844

Amount of Each Receipt this Period **81.13**

B. MARY E. SULLIVAN
Full Name (Last, First, Middle Initial)

Mailing Address 1880 9th Avenue

City Watervliet State NY Zip Code 12189

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

Name of Employer AFSCME NY LOC 1000 Occupation EXECUTIVE VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **02 / 25 / 2015**

Transaction ID : SA11AI.78585

Amount of Each Receipt this Period **25.00**

C. MARY E. SULLIVAN
Full Name (Last, First, Middle Initial)

Mailing Address 1880 9th Avenue

City Watervliet State NY Zip Code 12189

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

Name of Employer AFSCME NY LOC 1000 Occupation EXECUTIVE VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **02 / 27 / 2015**

Transaction ID : SA11AI.77968

Amount of Each Receipt this Period **100.00**

SUBTOTAL of Receipts This Page (optional)..... **206.13**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. JEFFREY M. TAGGART		Date of Receipt MM / DD / YYYY 02 / 13 / 2015 Transaction ID : SA11Al.77632
Mailing Address 12001 Market Street Unit 450		Amount of Each Receipt this Period 127.06
City Reston	State VA	
Zip Code 20190		Aggregate Year-to-Date ▼ 381.18
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECTOR, ACCTNG & AUDITIN	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 381.18		

Full Name (Last, First, Middle Initial) B. JEFFREY M. TAGGART		Date of Receipt MM / DD / YYYY 02 / 27 / 2015 Transaction ID : SA11Al.77846
Mailing Address 12001 Market Street Unit 450		Amount of Each Receipt this Period 127.06
City Reston	State VA	
Zip Code 20190		Aggregate Year-to-Date ▼ 508.24
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation ASSOCIATE DIRECTOR, ACCTNG & AUDITIN	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 508.24		

Full Name (Last, First, Middle Initial) C. MOHAMMED TEHRANI		Date of Receipt MM / DD / YYYY 02 / 27 / 2015 Transaction ID : SA11Al.77847
Mailing Address 22110 Castleton Court		Amount of Each Receipt this Period 54.75
City Boyds	State MD	
Zip Code 20841		Aggregate Year-to-Date ▼ 214.59
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, NETWORK OPERAT	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 214.59		

SUBTOTAL of Receipts This Page (optional).....▶	308.87
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 69 OF 99
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. JOHN H. THOMPSON
Full Name (Last, First, Middle Initial)

Mailing Address 110 East Meyer

City New Castle State PA Zip Code 16105

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

Name of Employer AFSCME PA CN 13/NSP NESHANNCK Occupation FOREMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 02 / 12 / 2015
Transaction ID : SA11Al.78745

Amount of Each Receipt this Period 650.00

B. TOM TOSTI
Full Name (Last, First, Middle Initial)

Mailing Address 327 Lincoln Avenue

City Bristol State PA Zip Code 19007

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

Name of Employer AFSCME PA CN 13 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 239.52

Date of Receipt 02 / 12 / 2015
Transaction ID : SA11Al.78182

Amount of Each Receipt this Period 119.76

C. DOROTHY L. TOWNSEND
Full Name (Last, First, Middle Initial)

Mailing Address 849 Cormac Drive

City Riverdale State GA Zip Code 30296

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 ▼ 216.21

Date of Receipt 02 / 13 / 2015
Transaction ID : SA11Al.77637

Amount of Each Receipt this Period 72.07

SUBTOTAL of Receipts This Page (optional)..... ▶ 841.83

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: (check only one)	PAGE 70 OF 99
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. DOROTHY L. TOWNSEND		Date of Receipt MM / DD / YYYY 02 / 27 / 2015 Transaction ID : SA11Al.77851
Mailing Address 849 Cormac Drive		Amount of Each Receipt this Period 72.07
City Riverdale	State GA	Zip Code 30296
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation REGIONAL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.28	

Full Name (Last, First, Middle Initial) B. KAREN J. TYLER		Date of Receipt MM / DD / YYYY 02 / 27 / 2015 Transaction ID : SA11Al.77852
Mailing Address 15 Milmarson Place NW		Amount of Each Receipt this Period 54.75
City Washington	State DC	Zip Code 20011
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation ASSISTANT DIRECTOR, AUDITING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 219.00	

Full Name (Last, First, Middle Initial) C. NAOMI A. WALKER		Date of Receipt MM / DD / YYYY 02 / 13 / 2015 Transaction ID : SA11Al.77642
Mailing Address 2229 First Street NW		Amount of Each Receipt this Period 97.90
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C		
Name of Employer AFSCME INT'L	Occupation ASSISTANT TO THE PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 293.70	

SUBTOTAL of Receipts This Page (optional).....▶	224.72
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 71 OF 99
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. NAOMI A. WALKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2229 First 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 ASSISTANT TO THE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 391.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : SA11Al.77856
 Amount of Each Receipt this Period
 97.90

B. LONITA M. WAYBRIGHT
 Full Name (Last, First, Middle Initial)
 Mailing Address 3929 Whitemarsh Lane
 City Edgewater State MD Zip Code 21037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation ASSOCIATE DIRECTOR, BENEFITS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 237.48

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 27 / 2015
Transaction ID : SA11Al.77859
 Amount of Each Receipt this Period
 59.37

C. BRIAN V. WEEKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1522 A Street NE
 City Washington State DC Zip Code 20002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AFSCME INT'L Occupation DIRECTOR, POLITICAL ACTION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.45

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2015
Transaction ID : SA11Al.77646
 Amount of Each Receipt this Period
 70.15

SUBTOTAL of Receipts This Page (optional)..... ▶ 227.42
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. BRIAN V. WEEKS
Full Name (Last, First, Middle Initial)

Mailing Address 1522 A Street NE

City Washington State DC Zip Code 20002

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

Name of Employer AFSCME INT'L Occupation DIRECTOR, POLITICAL ACTION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.60

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11AI.77860

Amount of Each Receipt this Period 70.15

B. JESSICA WEINSTEIN
Full Name (Last, First, Middle Initial)

Mailing Address 2662 Wild Turkey Lane

City Alexandria State VA Zip Code 22314

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 ▼ 356.43

Date of Receipt 02 / 13 / 2015
Transaction ID : SA11AI.77648

Amount of Each Receipt this Period 118.81

C. JESSICA WEINSTEIN
Full Name (Last, First, Middle Initial)

Mailing Address 2662 Wild Turkey Lane

City Alexandria State VA Zip Code 22314

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 ▼ 475.24

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11AI.77862

Amount of Each Receipt this Period 118.81

SUBTOTAL of Receipts This Page (optional)..... ▶ 307.77

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 99
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. JAMES RANDAL WESTON
Full Name (Last, First, Middle Initial)

Mailing Address 1495 Irvin - Shoots Road

City Morral State OH Zip Code 43337

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

Name of Employer AFSCME OH LOC 4 Occupation STAFF REPRESENTATIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 02 / 20 / 2015
Transaction ID : SA11AI.78405

Amount of Each Receipt this Period 60.00

B. BRYCE WICKSTROM
Full Name (Last, First, Middle Initial)

Mailing Address 1267 Matilda Street

City St. Paul State MN Zip Code 55117-4473

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

Name of Employer AFSCME MN CN 5/STATE OF MN Occupation RECORDING SECRETARY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 26 / 2015
Transaction ID : SA11AI.79120

Amount of Each Receipt this Period 160.00

C. ANN E. WIDGER
Full Name (Last, First, Middle Initial)

Mailing Address 1205 Morse Street NE Unit 3

City Washington State DC Zip Code 20002

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

Name of Employer AFSCME INT'L Occupation DIRECTOR, RETIREE PROGRAMS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 253.96

Date of Receipt 02 / 27 / 2015
Transaction ID : SA11AI.77864

Amount of Each Receipt this Period 63.53

SUBTOTAL of Receipts This Page (optional)..... ▶ 283.53

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 74 OF 99
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. WILLIAM WILKINSON			Date of Receipt
Mailing Address 5272 Bradgen Court			<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11Al.77865
Springfield	VA	22151	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="54.75"/>
Name of Employer	Occupation		
AFSCME INT'L	ASSISTANT DIRECTOR, RESEARCH		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="219.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. KRISTIE WOLF-MALONEY			Date of Receipt
Mailing Address 4923C Haverford Road			<input type="text" value="02"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11Al.78189
Harrisburg	PA	17109	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="101.64"/>
Name of Employer	Occupation		
AFSCME PA CN 13	STAFF REPRESENTATIVE		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="203.28"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. JEANETTE WYNN			Date of Receipt
Mailing Address 3064 Highland Oak Terrace			<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code	Transaction ID : SA11Al.78744
Tallahassee	FL	32301	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="77.56"/>
Name of Employer	Occupation		
AFSCME FL CN 79	PRESIDENT		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="260.68"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="233.95"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="19623.42"/>

**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 75 OF 99
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
DISTRICT COUNCIL 37, AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE)

Mailing Address 125 Barclay Street

City New York State NY Zip Code 10007

FEC ID number of contributing federal political committee. **C** C00149211

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
172638.32

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 23 / 2015
Transaction ID : SA12.77867

Amount of Each Receipt this Period
45655.53

Transfer

B. Full Name (Last, First, Middle Initial)
GA GREATER ATLANTA AREA EMPLOYEES

Mailing Address 501 Pulliam Street Suite 335

City Atlanta State GA Zip Code 30312

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1121.29

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2015
Transaction ID : SA12.77168

Amount of Each Receipt this Period
1121.29

Erroneous deposit from a non-fed political committee

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	46776.82
TOTAL This Period (last page this line number only).....▶	46776.82

**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 76 OF 99
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. AMALGAMATED BANK		Date of Receipt
Mailing Address 275 Seventh Avenue		<input type="text" value="02"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code
New York	NY	10001
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA17.77166
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="282.71"/>
Receipt For:	Aggregate Year-to-Date ▼	Interest Income 2/27/2015
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="506.20"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B.		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="text"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="text"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="282.71"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="282.71"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. AMALGAMATED BANK LOANS

Mailing Address P.O. Box 5660

City State Zip Code
Hicksville NY 11802-5660

Purpose of Disbursement
Interest payment 1/30/2015

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.77172

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. AMALGAMATED BANK LOANS

Mailing Address P.O. Box 5660

City State Zip Code
Hicksville NY 11802-5660

Purpose of Disbursement
On Schedule D - Interest payment 2/28/2015

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.77177

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address P.O. Box 53852

City State Zip Code
Phoenix AZ 85072-3852

Purpose of Disbursement
Merchant Service Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.77180

Amount of Each Disbursement this Period

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. BART GROUP

Mailing Address 171 Main Street

City Port Washington State NY Zip Code 11050

Purpose of Disbursement
Merchant Service Charges

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2015

Transaction ID : SB21B.77181

Amount of Each Disbursement this Period

72.00

Full Name (Last, First, Middle Initial)

B. BART GROUP

Mailing Address 171 Main Street

City Port Washington State NY Zip Code 11050

Purpose of Disbursement
Merchant Service Charges

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2015

Transaction ID : SB21B.77182

Amount of Each Disbursement this Period

103.72

Full Name (Last, First, Middle Initial)

C. FIS MERCHANT SERVICES-LL

Mailing Address P.O. Box 31129

City Tampa State FL Zip Code 33631-3129

Purpose of Disbursement
Merchant Service Charges

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2015

Transaction ID : SB21B.77183

Amount of Each Disbursement this Period

254.20

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

429.92

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. PAYPAL INC.

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Online Service Charges

001
Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2015

Transaction ID : SB21B.77184

Amount of Each Disbursement this Period

139.85

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

--

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

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

139.85

3623.35

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. AFSCME PEOPLE-Non Federal Account

Mailing Address 1625 L Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Trf non-fed acct to non-fed activity

008

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2015

Transaction ID : SB22.77167

Amount of Each Disbursement this Period

34700.00

Full Name (Last, First, Middle Initial)

B. GA GREATER ATLANTA AREA EMPLOYEES

Mailing Address 501 Pulliam Street
Suite 335

City Atlanta State GA Zip Code 30312

Purpose of Disbursement
Erroneous Deposit

008

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 25 / 2015

Transaction ID : SB22.77170

Amount of Each Disbursement this Period

1121.29

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

35821.29

35821.29

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. ALAN LOWENTHAL FOR CONGRESS

Mailing Address 6380 Wilshire Blvd.
#1612

City Los Angeles State CA Zip Code 90048

Purpose of Disbursement
Contribution

011

Candidate Name

ALAN LOWENTHAL

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 47

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	12	/	2015

Transaction ID : SB23.77207

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. BILL FOSTER FOR CONGRESS

Mailing Address P.O. Box 9104

City Aurora State IL Zip Code 60598

Purpose of Disbursement
Contribution

011

Candidate Name

G. WILLIAM (BILL) FOSTER

Category/
Type

Office Sought: House
 Senate
 President
State: IL District: 11

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	12	/	2015

Transaction ID : SB23.77208

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. BLUMENTHAL FOR SENATE

Mailing Address 777 Summer Street
Suite 103C

City Stamford State CT Zip Code 06901

Purpose of Disbursement
Contribution

011

Candidate Name

RICHARD BLUMENTHAL

Category/
Type

Office Sought: House
 Senate
 President
State: CT District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	25	/	2015

Transaction ID : SB23.77188

Amount of Each Disbursement this Period

1500.00

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

3500.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. BONAMICI FOR CONGRESS

Mailing Address 3321 SE 20th Avenue

City Portland State OR Zip Code 97202

Purpose of Disbursement
Contribution

011

Candidate Name
SUZANNE BONAMICI

Category/
Type

Office Sought: House
 Senate
 President
State: OR District: 01

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	02	/	2015

Transaction ID : **SB23.77190**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. BONNIE WATSON COLEMAN FOR CONGRESS

Mailing Address 180 Upland Avenue

City Ewing State NJ Zip Code 08638

Purpose of Disbursement
Contribution

011

Candidate Name
BONNIE WATSON COLEMAN

Category/
Type

Office Sought: House
 Senate
 President
State: NJ District: 15

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	25	/	2015

Transaction ID : **SB23.77216**

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 Buffalo State NY Zip Code 14220

Purpose of Disbursement
Contribution

011

Candidate Name
BRIAN HIGGINS

Category/
Type

Office Sought: House
 Senate
 President
State: NY District: 26

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	06	/	2015

Transaction ID : **SB23.77203**

Amount of Each Disbursement this Period

2500.00

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

5000.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. BUTTERFIELD FOR CONGRESS

Mailing Address P.O. Box 2571

City State Zip Code
Wilson NC 27894

Purpose of Disbursement
Contribution

011

Candidate Name

G K BUTTERFIELD

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NC District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2015

Transaction ID : SB23.77217

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. CEDRIC RICHMOND FOR CONGRESS

Mailing Address 1631 Elysian Fields Avenue
Suite 150

City State Zip Code
New Orleans LA 70117

Purpose of Disbursement
Contribution

011

Candidate Name

CEDRIC L. RICHMOND

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: LA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	12	/	2015

Transaction ID : SB23.77209

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. CLEAVER FOR CONGRESS

Mailing Address 4801 Main Street
Suite 1000

City State Zip Code
Kansas City MO 64112

Purpose of Disbursement
Contribution

011

Candidate Name

EMANUEL II CLEAVER

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MO District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	02	/	2015

Transaction ID : SB23.77191

Amount of Each Disbursement this Period

1500.00

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

5000.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. COMMITTEE TO RE-ELECT NYDIA M. VELAZQUEZ TO CONGRESS

Mailing Address 315 Inspiration Lane

City Gaithersburg State MD Zip Code 20878

Purpose of Disbursement
Contribution

011

Candidate Name

NYDIA M VELAZQUEZ

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	25	/	2015

Transaction ID : SB23.77218

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. CONGRESSIONAL BLACK CAUCUS - PAC

Mailing Address 455 Massachusetts Avenue NW
#150-355

City Washington State DC Zip Code 20001

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼ PAC

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	06	/	2015

Transaction ID : SB23.77185

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. DELBENE FOR CONGRESS

Mailing Address P.O. Box 487

City Bothell State WA Zip Code 98041

Purpose of Disbursement
Contribution

011

Candidate Name

SUZAN K DELBENE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	12	/	2015

Transaction ID : SB23.77210

Amount of Each Disbursement this Period

1500.00

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

7500.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. DONALD M. PAYNE JR. FOR CONGRESS

Mailing Address P.O. Box 2406

City Newark State NJ Zip Code 07114

Purpose of Disbursement
Contribution

011

Candidate Name

DONALD M., JR. PAYNE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NJ District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2015

Transaction ID : SB23.77219

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. DONNA F. EDWARDS FOR CONGRESS

Mailing Address P.O. Box 441153

City Fort Washington State MD Zip Code 20749

Purpose of Disbursement
Contribution

011

Candidate Name

DONNA EDWARDS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MD District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	02	/	2015

Transaction ID : SB23.77193

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. EDDIE BERNICE JOHNSON FOR CONGRESS

Mailing Address 3102 Maple Avenue
Suite 605

City Dallas State TX Zip Code 75201

Purpose of Disbursement
Contribution

011

Candidate Name

EDDIE BERNICE JOHNSON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TX District: 30

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2015

Transaction ID : SB23.77220

Amount of Each Disbursement this Period

1500.00

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

4000.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. ELLISON FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 6072

City Minneapolis State MN Zip Code 55406

Purpose of Disbursement
Contribution

011

Candidate Name

KEITH MAURICE ELLISON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MN District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2015

Transaction ID : SB23.77211

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. FATTAH FOR CONGRESS

Mailing Address P.O. Box 30753

City Philadelphia State PA Zip Code 19104

Purpose of Disbursement
Contribution

011

Candidate Name

CHAKA MR. FATTAH

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		06		2015

Transaction ID : SB23.77204

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. FILEMON VELA FOR CONGRESS

Mailing Address 275 Calle Jacaranda Street

City Brownsville State TX Zip Code 78520

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. FILEMON VELA Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TX District: 34

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		25		2015

Transaction ID : SB23.77221

Amount of Each Disbursement this Period

1000.00

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

4500.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. FREDERICA S. WILSON FOR CONGRESS

Mailing Address 19821 NW 2nd Avenue
Box 354

City Miami Gardens State FL Zip Code 33169

Purpose of Disbursement
Contribution

011

Candidate Name

FREDERICA S. WILSON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: FL District: 24

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	02	/	2015

Transaction ID : **SB23.77194**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF CORRINE BROWN

Mailing Address P.O. Box 40087

City Jacksonville State FL Zip Code 32203

Purpose of Disbursement
Contribution

011

Candidate Name

CORRINE BROWN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: FL District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	25	/	2015

Transaction ID : **SB23.77222**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF ROSA DELAURO

Mailing Address 129 Church Street
Suite 818

City New Haven State CT Zip Code 06510

Purpose of Disbursement
Contribution

011

Candidate Name

ROSA L DELAURO

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼
Convention

State: CT District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	12	/	2015

Transaction ID : **SB23.77212**

Amount of Each Disbursement this Period

2500.00

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

6000.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. GARAMENDI FOR CONGRESS

Mailing Address 1050 17th Street NW
Suite 590

City Washington State DC Zip Code 20036

Purpose of Disbursement
Contribution

011

Candidate Name

JOHN GARAMENDI

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		02		2015

Transaction ID : SB23.77195

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. GERRY CONNOLLY FOR CONGRESS

Mailing Address P.O. Box 563

City Merrifield State VA Zip Code 22116

Purpose of Disbursement
Contribution

011

Candidate Name

GERRY E CONNOLLY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: VA District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		02		2015

Transaction ID : SB23.77196

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. HOYER FOR CONGRESS

Mailing Address 700 13th Street NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contribution

011

Candidate Name

STENY H HOYER

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MD District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		25		2015

Transaction ID : SB23.77223

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. JEFFRIES FOR CONGRESS

Mailing Address 630 Washington Avenue

City State Zip Code
Brooklyn NY 11238

Purpose of Disbursement
Contribution

011

Candidate Name

HAKEEM JEFFRIES

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2015

Transaction ID : SB23.77213

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. JOHN LEWIS FOR CONGRESS

Mailing Address P.O. Box 2323

City State Zip Code
Atlanta GA 30301

Purpose of Disbursement
Contribution

011

Candidate Name

JOHN R. LEWIS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: GA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		02		2015

Transaction ID : SB23.77197

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR ARIZONA

Mailing Address P.O. Box 12011

City State Zip Code
Casa Grande AZ 85130

Purpose of Disbursement
Contribution

011

Candidate Name

ANN KIRKPATRICK

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: AZ District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		02		2015

Transaction ID : SB23.77198

Amount of Each Disbursement this Period

1000.00

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

3500.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. KUSTER FOR CONGRESS

Mailing Address P.O. Box 1498

City Concord State NH Zip Code 03302

Purpose of Disbursement
Contribution

011

Candidate Name

ANN MCLANE KUSTER

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NH District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	6		2	0	1	5

Transaction ID : **SB23.77205**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. LOEBSACK FOR CONGRESS

Mailing Address P.O. Box 3013

City Iowa City State IA Zip Code 52244

Purpose of Disbursement
Contribution

011

Candidate Name

DAVID WAYNE LOEBSACK

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IA District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	6		2	0	1	5

Transaction ID : **SB23.77206**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. MARCIA L. FUDGE FOR CONGRESS COMMITTEE

Mailing Address 3729 Silsby Road

City University Heights State OH Zip Code 44118

Purpose of Disbursement
Contribution

011

Candidate Name

MARCIA L FUDGE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District: 11

Date of Disbursement

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

Transaction ID : **SB23.77225**

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0

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

3	5	0	0	0	0	0	0	0	0

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

3	5	0	0	0	0	0	0	0	0

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)
A. MARC VEASEY CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address P.O. Box 50084

City State Zip Code
Fort Worth TX 76105

Purpose of Disbursement Contribution
Contribution

Candidate Name
MARC ALLISON VEASEY

Office Sought: House Senate President
State: TX District: 33

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
02 / 25 / 2015

Transaction ID : **SB23.77224**

Amount of Each Disbursement this Period
1000.00

Full Name (Last, First, Middle Initial)
B. MATSUI FOR CONGRESS

Mailing Address P.O. Box 1738

City State Zip Code
Sacramento CA 95812

Purpose of Disbursement Contribution
Contribution

Candidate Name
DORIS MATSUI

Office Sought: House Senate President
State: CA District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
02 / 25 / 2015

Transaction ID : **SB23.77226**

Amount of Each Disbursement this Period
1000.00

Full Name (Last, First, Middle Initial)
C. MCCOLLUM FOR CONGRESS

Mailing Address P.O. Box 14131

City State Zip Code
Saint Paul MN 55114

Purpose of Disbursement Contribution
Contribution

Candidate Name
BETTY MCCOLLUM

Office Sought: House Senate President
State: MN District: 04

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
02 / 02 / 2015

Transaction ID : **SB23.77199**

Amount of Each Disbursement this Period
250.00

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2250.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. MCCOLLUM FOR CONGRESS

Mailing Address P.O. Box 14131

City State Zip Code
Saint Paul MN 55114

Purpose of Disbursement
Contribution

011

Candidate Name

BETTY MCCOLLUM

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MN District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2015

Transaction ID : **SB23.77227**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. MIKE THOMPSON FOR CONGRESS

Mailing Address 5429 Madison Avenue

City State Zip Code
Sacramento CA 95841

Purpose of Disbursement
Contribution

011

Candidate Name

MIKE MR. THOMPSON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		02		2015

Transaction ID : **SB23.77200**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. MOORE FOR CONGRESS

Mailing Address P.O. Box 16646

City State Zip Code
Milwaukee WI 53216

Purpose of Disbursement
Contribution

011

Candidate Name

GWENDOLYNNE MOORE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WI District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2015

Transaction ID : **SB23.77215**

Amount of Each Disbursement this Period

2500.00

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

4500.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. NANCY PELOSI FOR CONGRESS

Mailing Address 700 13th Street NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contribution

011

Candidate Name

NANCY PELOSI

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	25	/	2015

Transaction ID : SB23.77228

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. NOLAN FOR CONGRESS VOLUNTEER COMMITTEE

Mailing Address P.O. Box 1041

City Brainerd State MN Zip Code 56401

Purpose of Disbursement
Contribution

011

Candidate Name

RICHARD MICHAEL NOLAN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MN District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	02	/	2015

Transaction ID : SB23.77201

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. NOLAN FOR CONGRESS VOLUNTEER COMMITTEE

Mailing Address P.O. Box 1041

City Brainerd State MN Zip Code 56401

Purpose of Disbursement
Contribution

011

Candidate Name

RICHARD MICHAEL NOLAN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MN District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	25	/	2015

Transaction ID : SB23.77229

Amount of Each Disbursement this Period

1000.00

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

3750.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. PALLONE FOR CONGRESS

Mailing Address P.O. Box 3176

City State Zip Code
Long Branch NJ 07740

Purpose of Disbursement
Contribution

011

Candidate Name

FRANK JR PALLONE

Category/
Type

Office Sought: House
 Senate
 President
State: NJ District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	25	/	2015

Transaction ID : SB23.77230

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. PASCRELL FOR CONGRESS

Mailing Address P.O. Box 640

City State Zip Code
Totowa NJ 07511

Purpose of Disbursement
Contribution

011

Candidate Name

WILLIAM J JR PASCRELL

Category/
Type

Office Sought: House
 Senate
 President
State: NJ District: 09

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	25	/	2015

Transaction ID : SB23.77231

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. PAUL TONKO FOR CONGRESS

Mailing Address 911 Central Avenue
#221

City State Zip Code
Albany NY 12206

Purpose of Disbursement
Contribution

011

Candidate Name

PAUL DAVID TONKO

Category/
Type

Office Sought: House
 Senate
 President
State: NY District: 20

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	25	/	2015

Transaction ID : SB23.77232

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. PETE AGUILAR FOR CONGRESS

Mailing Address P.O. Box 10954

City San Bernardino State CA Zip Code 92423

Purpose of Disbursement
Contribution

011

Candidate Name

PETE AGUILAR

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 31

Date of Disbursement

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

Transaction ID : SB23.77233

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. PROGRESSIVE ACTION PAC

Mailing Address 228 2nd Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼ PAC

State: District:

Date of Disbursement

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

Transaction ID : SB23.77186

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. ROBIN KELLY FOR CONGRESS

Mailing Address P.O. Box 6953

City Chicago State IL Zip Code 60680

Purpose of Disbursement
Contribution

011

Candidate Name

ROBIN KELLY

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IL District: 02

Date of Disbursement

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

Transaction ID : SB23.77234

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
---	---	---	---	---	---	---

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

5	5	0	0	.	0	0
---	---	---	---	---	---	---

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

5	5	0	0	.	0	0
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. ROYBAL-ALLARD FOR CONGRESS

Mailing Address 6 E Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

011

Candidate Name

LUCILLE ROYBAL-ALLARD

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 40

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		25		2015

Transaction ID : SB23.77235

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. SCOTT FOR CONGRESS

Mailing Address P.O. Box 251

City Newport News State VA Zip Code 23607

Purpose of Disbursement
Contribution

011

Candidate Name

ROBERT C. SCOTT

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: VA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		25		2015

Transaction ID : SB23.77236

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. SCOTT PETERS FOR CONGRESS

Mailing Address P.O. Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement
Contribution

011

Candidate Name

SCOTT PETERS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 52

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		25		2015

Transaction ID : SB23.77237

Amount of Each Disbursement this Period

1000.00

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

3500.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. SHERMAN FOR CONGRESS

Mailing Address 777 S. Figueroa Street
Suite 4050

City Los Angeles State CA Zip Code 90017

Purpose of Disbursement
Contribution

011

Candidate Name

BRAD SHERMAN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 30

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2015

Transaction ID : SB23.77238

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. TED LIEU FOR CONGRESS

Mailing Address 6380 Wilshire Blvd.
#1612

City Los Angeles State CA Zip Code 90048

Purpose of Disbursement
Contribution

011

Candidate Name

TED LIEU

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 33

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	25	/	2015

Transaction ID : SB23.77239

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. THE COMMITTEE TO RE-ELECT CONGRESSMAN HANK JOHNSON

Mailing Address 4153 Flat Shoals Parkway
Suite E 322, Building C, 2nd Fl.

City Decatur State GA Zip Code 30034

Purpose of Disbursement
Contribution

011

Candidate Name

HENRY C 'HANK' JR JOHNSON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: GA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	02	/	2015

Transaction ID : SB23.77202

Amount of Each Disbursement this Period

1500.00

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

5000.00

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

73000.00

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.57931**
AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

LOAN SOURCE Full Name (Last, First, Middle Initial) AMALGAMATED BANK	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 275 Seventh Avenue	
City New York State NY ZIP Code 10001	

Original Amount of Loan 2000000.00	Cumulative Payment To Date 1000000.00	Balance Outstanding at Close of This Period 1000000.00
---------------------------------------	--	---

TERMS

Date Incurred MM / DD / YYYY 10 / 07 / 2014	Date Due MM / DD / YYYY 08/26/2016	Interest Rate 4.25 % (apr)	Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
---	--	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶	1000000.00
TOTALS This Period (last page in this line only)..... ▶	1000000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 99 OF 99
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AMALGAMATED BANK LOANS	Nature of Debt (Purpose): Memo item on Schedule B - Interest payment 1/30/2015
Mailing Address P.O. Box 5660	
City State Zip Code Hicksville NY 11802-5660	

Outstanding Balance Beginning This Period <input type="text" value="3053.14"/>	Transaction ID : SD10.77120	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3053.14"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor AMALGAMATED BANK LOANS	Nature of Debt (Purpose): Memo item on Schedule B - Interest payment 2/28/2015
Mailing Address P.O. Box 5660	
City State Zip Code Hicksville NY 11802-5660	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.77173	
Amount Incurred This Period <input type="text" value="3722.35"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3722.35"/>

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 <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="3722.35"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="3722.35"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="1000000.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="1003722.35"/>