

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

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

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

ADDRESS (number and street)

1625 L STREET NW

☐Check if different
than previously
reported. (ACC)

WASHINGTON

DC

20036

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00011114

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

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

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

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

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

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

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

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

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

03

01

2010

through

03

31

2010

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

Type or Print Name of Treasurer

WILLIAM LUCY

Signature of Treasurer

Electronically Filed by WILLIAM LUCY

Date

04

20

2010

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

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

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 178

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
0 3D D
0 1Y Y Y Y
2 0 1 0

To:

M M
0 3D D
3 1Y Y Y Y
2 0 1 0

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1 Y Y Y Y 2010 | | 923124.80 |
| (b) Cash on Hand at Beginning of Reporting Period | 1368947.96 | |
| (c) Total Receipts (from Line 19) | 627548.26 | 1778915.32 |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 1996496.22 | 2702040.12 |
| 7. Total Disbursements (from Line 31) | 381611.00 | 1087154.90 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 1614885.22 | 1614885.22 |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

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

For further information contact:

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

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

DETAILED SUMMARY PAGE **OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

3 / 178

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 | W | Y |
| 0 | 3 | 0 | 1 | 2 | 0 | 1 | 0 |

To:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | W | Y |
| 0 | 3 | 3 | 1 | 2 | 0 | 1 | 0 |

| 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) | 21036.00 | 31099.62 |
| (ii) Unitemized | 597781.30 | 1635309.54 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 618817.30 | 1666409.16 |
| (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) | 618817.30 | 1666409.16 |
| 12. Transfers From Affiliated/Other Party Committees | 8111.67 | 104170.75 |
| 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) | 85.00 | 85.00 |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees | 0.00 | 7000.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 534.29 | 1250.41 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 627548.26 | 1778915.32 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 627548.26 | 1778915.32 |

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

| II. DISBURSEMENTS | | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------|-----------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | | |
| (i) Federal Share..... | 0.00 | 0.00 | |
| (ii) Non-Federal Share..... | 0.00 | 0.00 | |
| (b) Other Federal Operating Expenditures..... | 2115.20 | 9887.32 | |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤ | 2115.20 | 9887.32 | |
| 22. Transfers to Affiliated/Other Party Committees..... | 500.00 | 513400.00 | |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 379000.00 | 459000.00 | |
| 24. Independent Expenditure (use Schedule E) | 0.00 | 100000.00 | |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00 | 0.00 | |
| 26. Loan Repayments Made..... | 0.00 | 0.00 | |
| 27. Loans Made..... | 0.00 | 0.00 | |
| 28. Refunds of Contributions To: | | | |
| (a) Individuals/Persons Other Than Political Committees | -4.20 | 4867.58 | |
| (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)) | -4.20 | 4867.58 | |
| 29. Other Disbursements..... | 0.00 | 0.00 | |
| 30. Federal Election Activity (2 U.S.C 431(20)) | | | |
| (a) Shared Federal Election Activity (from Schedule H6) | | | |
| (i) Federal Share | 0.00 | 0.00 | |
| (ii) "Levin" Share | 0.00 | 0.00 | |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 | |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).... | 0.00 | 0.00 | |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. | 381611.00 | 1087154.90 | |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 381611.00 | 1087154.90 | |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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| 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) | 618817.30 | 1666409.16 |
| 34. Total Contribution Refunds (from Line 28(d)) | -4.20 | 4867.58 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 618821.50 | 1661541.58 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 2115.20 | 9887.32 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 85.00 | 85.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 2030.20 | 9802.32 |

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

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

FOR LINE NUMBER: PAGE 6 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

JEFFREY SCOTT ABBE

Mailing Address P.O. Box 486

City

Harold

State

KY

Zip Code

41635

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.92

Date of Receipt

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

Transaction ID: SA11AI.153226

Amount of Each Receipt this Period

54.48

B.

Full Name (Last, First, Middle Initial)

RICHARD ABELSON

Mailing Address 4315 N. Lake Drive

City

Shorewood

State

WI

Zip Code

53211

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WI CN 48

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.50

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.153890

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

RICHARD ABELSON

Mailing Address 4315 N. Lake Drive

City

Shorewood

State

WI

Zip Code

53211

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WI CN 48

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.50

Date of Receipt

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

Transaction ID: SA11AI.153891

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

138.48

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 7 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

RICHARD ABELSON

Mailing Address 4315 N. Lake Drive

City

Shorewood

State

WI

Zip Code

53211

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WI CN 48

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.25

Date of Receipt

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

Transaction ID: SA11AI.153846

Amount of Each Receipt this Period

10.75

B.

Full Name (Last, First, Middle Initial)

ADAM ACOSTA

Mailing Address 66 La Perla

City

Foothill Ranch

State

CA

Zip Code

92610

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME CA CN 36

Occupation

POLITICAL ACTION REPRESENTATIVE III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.92

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 0 | 8 | / | 2 | 0 | 1 | 0 |

Transaction ID: SA11AI.153826

Amount of Each Receipt this Period

67.32

C.

Full Name (Last, First, Middle Initial)

ABIOLA AFOLAYAN

Mailing Address 2341 Farlund Drive

City

St. Louis

State

MO

Zip Code

63031

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME CA CN 36

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 0 | 8 | / | 2 | 0 | 1 | 0 |

Transaction ID: SA11AI.153829

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

128.07

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 8 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

SHANA ALDERTON

Mailing Address 710 Chippewa Square

City

Marquette

State

MI

Zip Code

48955

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.93

Date of Receipt

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

Transaction ID: SA11AI.153701

Amount of Each Receipt this Period

35.45

B.

Full Name (Last, First, Middle Initial)

SHARON J. ALEXANDER

Mailing Address 12510 Chalford Lane

City

Bowie

State

MD

Zip Code

20715

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.86

Date of Receipt

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

Transaction ID: SA11AI.153227

Amount of Each Receipt this Period

36.81

C.

Full Name (Last, First, Middle Initial)

KENNETH L. ALLEN

Mailing Address 7935 SW Santolina Place

City

Beaverton

State

OR

Zip Code

97008-6272

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OR CN 75

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: SA11AI.153847

Amount of Each Receipt this Period

14.00

SUBTOTAL of Receipts This Page (optional)

86.26

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 9 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

CAROL A ANDERSON

Mailing Address 303 Dias Drive

City

Fort Washington

State

MD

Zip Code

20744

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, EDUCATION

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.45

Date of Receipt

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

Transaction ID: SA11AI.153126

Amount of Each Receipt this Period

49.49

B.

Full Name (Last, First, Middle Initial)

CAROL A ANDERSON

Mailing Address 303 Dias Drive

City

Fort Washington

State

MD

Zip Code

20744

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, EDUCATION

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.94

Date of Receipt

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

Transaction ID: SA11AI.153229

Amount of Each Receipt this Period

49.49

C.

Full Name (Last, First, Middle Initial)

MICHAEL ANDREJCO

Mailing Address 5075 Pajabon Drive
#201

City

Harrisburg

State

PA

Zip Code

17111

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153332

Amount of Each Receipt this Period

68.30

SUBTOTAL of Receipts This Page (optional)

167.28

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

DAVID ANTLE

Mailing Address P.O. Box 1093

City

Moscow

State

PA

Zip Code

18444

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.42

Date of Receipt

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

Transaction ID: SA11AI.153333

Amount of Each Receipt this Period

110.14

B.

Full Name (Last, First, Middle Initial)

MICHAEL L. ARTZ

Mailing Address 745 Irving Street, N.W.

City

Washington

State

DC

Zip Code

20010

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSOCIATE TO GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.60

Date of Receipt

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

Transaction ID: SA11AI.153230

Amount of Each Receipt this Period

38.60

C.

Full Name (Last, First, Middle Initial)

RICHARD C. BADGER, II

Mailing Address P.O. Box 2825

City

Appleton

State

WI

Zip Code

54912

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WI CN 40

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

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

Transaction ID: SA11AI.153938

Amount of Each Receipt this Period

105.00

SUBTOTAL of Receipts This Page (optional)

253.74

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 11 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

RICHARD C. BADGER, II

Mailing Address P.O. Box 2825

City

Appleton

State

WI

Zip Code

54912

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WI CN 40

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: SA11AI.153971

Amount of Each Receipt this Period

105.00

B.

Full Name (Last, First, Middle Initial)

ANTHONY L. BAKKEN

Mailing Address 500 E Parish Street

City

Prair Du Chien

State

WI

Zip Code

53821

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WI CN 24/STATE OF
WI

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11AI.154062

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

ANTHONY L. BAKKEN

Mailing Address 500 E Parish Street

City

Prair Du Chien

State

WI

Zip Code

53821

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WI CN 24/STATE OF
WI

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 1 | 5 | / | 2 | 0 | 1 | 0 |

Transaction ID: SA11AI.154063

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

205.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 12 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

ANTHONY L. BAKKEN

Mailing Address 500 E Parish Street

City

Prair Du Chien

State

WI

Zip Code

53821

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WI CN 24/STATE OF
WI

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.154064

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

SUSAN BARKULIS

Mailing Address 9051 Southwest Blvd.
#P

City

Jefferson

State

MO

Zip Code

65109

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

LEAD ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.54

Date of Receipt

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

Transaction ID: SA11AI.153231

Amount of Each Receipt this Period

36.09

C.

Full Name (Last, First, Middle Initial)

MARY ANNE BARNETT

Mailing Address 1155 Lakepointe

City

Grosse Pointe Park

State

MI

Zip Code

48230

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, ORGANIZING DVLPT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.03

Date of Receipt

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

Transaction ID: SA11AI.153129

Amount of Each Receipt this Period

74.23

SUBTOTAL of Receipts This Page (optional)

165.32

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 13 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

MARY ANNE BARNETT

Mailing Address 1155 Lakepointe

City

Grosse Pointe Park

State

MI

Zip Code

48230

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, ORGANIZING DVLPT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.26

Date of Receipt

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

Transaction ID: SA11AI.153232

Amount of Each Receipt this Period

74.23

B.

Full Name (Last, First, Middle Initial)

MICHAEL D. BAUER

Mailing Address 23 Valley Forge Lane

City

Elyria

State

OH

Zip Code

44035

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.28

Date of Receipt

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

Transaction ID: SA11AI.153753

Amount of Each Receipt this Period

84.76

C.

Full Name (Last, First, Middle Initial)

PATRICIA BAUER

Mailing Address 4031 Executive Park Drive

City

Harrisburg

State

PA

Zip Code

17111

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.18

Date of Receipt

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

Transaction ID: SA11AI.153336

Amount of Each Receipt this Period

90.82

SUBTOTAL of Receipts This Page (optional)

249.81

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: PAGE 14 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

HENRY BAYER

Mailing Address 1507 W. Chase Street

City

Chicago

State

IL

Zip Code

60626-2125

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME IL CN 31

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.80

Date of Receipt

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

Transaction ID: SA11AI.155949

Amount of Each Receipt this Period

113.90

B.

Full Name (Last, First, Middle Initial)

HENRY BAYER

Mailing Address 1507 W. Chase Street

City

Chicago

State

IL

Zip Code

60626-2125

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME IL CN 31

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

311.80

Date of Receipt

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

Transaction ID: SA11AI.153848

Amount of Each Receipt this Period

28.00

C.

Full Name (Last, First, Middle Initial)

MICHAEL BEGATTO

Mailing Address 301 Hedgerow Lane

City

Wilmington

State

DE

Zip Code

19807

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME DE CN 81

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.57

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.153896

Amount of Each Receipt this Period

177.60

SUBTOTAL of Receipts This Page (optional)

319.50

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 15 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

MARTIN BEIL

Mailing Address 10363 Hudson Road

City

Mazomanie

State

WI

Zip Code

53560-9773

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WI CN 24

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.90

Date of Receipt

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

Transaction ID: SA11AI.154209

Amount of Each Receipt this Period

86.30

B.

Full Name (Last, First, Middle Initial)

CATHERINE S. BENCINI

Mailing Address 1471 Seahorse Lane

City

Carbondale

State

IL

Zip Code

62901

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME IL CN 31/STATE OF
IL

Occupation

TELECOMMUNICATOR SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.40

Date of Receipt

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

Transaction ID: SA11AI.155953

Amount of Each Receipt this Period

258.40

C.

Full Name (Last, First, Middle Initial)

CHARLES BENN

Mailing Address 141 Eddington Avenue

City

Harrisburg

State

PA

Zip Code

17111-3520

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.44

Date of Receipt

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

Transaction ID: SA11AI.153337

Amount of Each Receipt this Period

93.48

SUBTOTAL of Receipts This Page (optional)

438.18

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 16 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

PAULA BENTLEY

Mailing Address 3701 Oakview Drive

City

Orlando

State

FL

Zip Code

32812

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.90

Date of Receipt

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

Transaction ID: SA11AI.153131

Amount of Each Receipt this Period

94.58

B.

Full Name (Last, First, Middle Initial)

PAULA BENTLEY

Mailing Address 3701 Oakview Drive

City

Orlando

State

FL

Zip Code

32812

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

567.48

Date of Receipt

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

Transaction ID: SA11AI.153234

Amount of Each Receipt this Period

94.58

C.

Full Name (Last, First, Middle Initial)

JACK BERNFELD

Mailing Address 8033 Excelsior Drive
Suite B

City

Madison

State

WI

Zip Code

53717-1903

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WI CN 40

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: SA11AI.153974

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

244.16

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 17 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

WALTER BLAIR

Mailing Address 2223 Wintergreen Avenue

City

District Heights

State

MD

Zip Code

20747

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, ACCOUNTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.16

Date of Receipt

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

Transaction ID: SA11AI.153236

Amount of Each Receipt this Period

39.86

B.

Full Name (Last, First, Middle Initial)

BARRY BOGARDE

Mailing Address 4303 Vermont Court

City

Harrisburg

State

PA

Zip Code

17112-9512

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.84

Date of Receipt

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

Transaction ID: SA11AI.153339

Amount of Each Receipt this Period

106.28

C.

Full Name (Last, First, Middle Initial)

BENJAMIN BORGES-HERNANDEZ

Mailing Address Paseo De Palma Real
Buzon 185

City

Juncos

State

PR

Zip Code

00777-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

LEAD ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.78

Date of Receipt

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

Transaction ID: SA11AI.153238

Amount of Each Receipt this Period

35.13

SUBTOTAL of Receipts This Page (optional)

181.27

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 18 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

CAROL BOWSHIER

Mailing Address 159 East Main Street

City

Mt. Sterling

State

OH

Zip Code

43143

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 11

Occupation

OPERATIONS DIRECTOR

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

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

Transaction ID: SA11AI.155251

Amount of Each Receipt this Period

72.00

B.

Full Name (Last, First, Middle Initial)

CAROL BOWSHIER

Mailing Address 159 East Main Street

City

Mt. Sterling

State

OH

Zip Code

43143

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 11

Occupation

OPERATIONS DIRECTOR

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

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

Transaction ID: SA11AI.155274

Amount of Each Receipt this Period

72.00

C.

Full Name (Last, First, Middle Initial)

WILLIAM BRENNER

Mailing Address 3300 Old Trail Road

City

York Haven

State

PA

Zip Code

17370

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

218.88

Date of Receipt

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

Transaction ID: SA11AI.153341

Amount of Each Receipt this Period

72.96

SUBTOTAL of Receipts This Page (optional)

216.96

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

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

Mailing Address 1418 10th Street
#204

City State Zip Code
Lacrosse WI 54601

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WI CN 24/STATE OF
WI

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

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

Transaction ID: SA11AI.154076

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)
CAROL L. BURNETT

Mailing Address 1921 N. Westmoreland

City State Zip Code
Arlington VA 22213

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation
MANAGER, ART & GRAPHIC DESIGN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.85

Date of Receipt

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

Transaction ID: SA11AI.153136

Amount of Each Receipt this Period

48.17

C.

Full Name (Last, First, Middle Initial)
CAROL L. BURNETT

Mailing Address 1921 N. Westmoreland

City State Zip Code
Arlington VA 22213

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation
MANAGER, ART & GRAPHIC DESIGN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.23

Date of Receipt

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

Transaction ID: SA11AI.153239

Amount of Each Receipt this Period

49.38

SUBTOTAL of Receipts This Page (optional)

127.55

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 20 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

DOUGLAS R. BURNETT

Mailing Address 1625 L. Street NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

POLITICAL ACTION COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.40

Date of Receipt

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

Transaction ID: SA11AI.153137

Amount of Each Receipt this Period

42.08

B.

Full Name (Last, First, Middle Initial)

DOUGLAS R. BURNETT

Mailing Address 1625 L. Street NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

POLITICAL ACTION COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.48

Date of Receipt

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

Transaction ID: SA11AI.153240

Amount of Each Receipt this Period

42.08

C.

Full Name (Last, First, Middle Initial)

ROBERT CALVIN

Mailing Address 45 Church Road

City

Mercer

State

PA

Zip Code

16137-5911

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153343

Amount of Each Receipt this Period

68.30

SUBTOTAL of Receipts This Page (optional)

152.46

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 21 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

RICHARD CAPONI

Mailing Address 4453 Stilley Road

City

Pittsburgh

State

PA

Zip Code

15227

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.42

Date of Receipt

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

Transaction ID: SA11AI.153344

Amount of Each Receipt this Period

110.14

B.

Full Name (Last, First, Middle Initial)

MARCOS CARDENAS

Mailing Address 6927 Amherst Street

City

San Diego

State

CA

Zip Code

92109

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME CA CN 36

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

339.84

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.153830

Amount of Each Receipt this Period

56.64

C.

Full Name (Last, First, Middle Initial)

JOYCE CARLSON

Mailing Address 911 Aldine Street

City

Saint Paul

State

MN

Zip Code

55104

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.14

Date of Receipt

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

Transaction ID: SA11AI.155502

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

186.78

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 22 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

ANTHONY CASO

Mailing Address 9 Garden Court

City

Boston

State

MA

Zip Code

02113-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MA CN 93

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.21

Date of Receipt

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

Transaction ID: SA11AI.153851

Amount of Each Receipt this Period

41.67

B.

Full Name (Last, First, Middle Initial)

KARL E. CHILDRESS

Mailing Address 1605 E Street SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

MANAGER, APPLICATIONS DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.15

Date of Receipt

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

Transaction ID: SA11AI.153140

Amount of Each Receipt this Period

43.23

C.

Full Name (Last, First, Middle Initial)

KARL E. CHILDRESS

Mailing Address 1605 E Street SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

MANAGER, APPLICATIONS DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.38

Date of Receipt

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

Transaction ID: SA11AI.153243

Amount of Each Receipt this Period

43.23

SUBTOTAL of Receipts This Page (optional)

128.13

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 23 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

JUDY K CHOW

Mailing Address 888 Mililani Street
Suite 601

City State Zip Code
Honolulu HI 96813-2991

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME HI LOC 152

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.153486

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

TRACEY CONATY

Mailing Address 1789 Lanier Place NW
#42

City State Zip Code
Washington DC 20009

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation
ASSISTANT DIRECTOR, PUBLIC AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.85

Date of Receipt

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

Transaction ID: SA11AI.153142

Amount of Each Receipt this Period

48.17

C.

Full Name (Last, First, Middle Initial)

TRACEY CONATY

Mailing Address 1789 Lanier Place NW
#42

City State Zip Code
Washington DC 20009

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation
ASSISTANT DIRECTOR, PUBLIC AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.02

Date of Receipt

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

Transaction ID: SA11AI.153245

Amount of Each Receipt this Period

48.17

SUBTOTAL of Receipts This Page (optional)

196.34

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 24 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

ROBERT COOPER

Mailing Address 931 South Walnut Street

City

West Chester

State

PA

Zip Code

19382

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.42

Date of Receipt

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

Transaction ID: SA11AI.153347

Amount of Each Receipt this Period

110.14

B.

Full Name (Last, First, Middle Initial)

BARBARA COUFAL

Mailing Address 10112 Parkwood Drive

City

Bethesda

State

MD

Zip Code

20814

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

LEGISLATIVE AFFAIRS SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.40

Date of Receipt

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

Transaction ID: SA11AI.153143

Amount of Each Receipt this Period

46.88

C.

Full Name (Last, First, Middle Initial)

BARBARA COUFAL

Mailing Address 10112 Parkwood Drive

City

Bethesda

State

MD

Zip Code

20814

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

LEGISLATIVE AFFAIRS SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.25

Date of Receipt

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

Transaction ID: SA11AI.153246

Amount of Each Receipt this Period

47.85

SUBTOTAL of Receipts This Page (optional)

204.87

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 25 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

CHRISTOPHER COWEN

Mailing Address 47 Douglas Street

City

Saint Paul

State

MN

Zip Code

55102

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.18

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.155298

Amount of Each Receipt this Period

71.14

B.

Full Name (Last, First, Middle Initial)

KATHERINE M. COX

Mailing Address 2542B S. Walter Reed Drive

City

Arlington

State

VA

Zip Code

22206

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, RESEARCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.15

Date of Receipt

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

Transaction ID: SA11AI.153144

Amount of Each Receipt this Period

45.63

C.

Full Name (Last, First, Middle Initial)

KATHERINE M. COX

Mailing Address 2542B S. Walter Reed Drive

City

Arlington

State

VA

Zip Code

22206

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, RESEARCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.78

Date of Receipt

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

Transaction ID: SA11AI.153247

Amount of Each Receipt this Period

45.63

SUBTOTAL of Receipts This Page (optional)

162.40

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 26 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

CHARLENE M. CUNNINGHAM

Mailing Address 920 E. 5th Avenue

City

Columbus

State

OH

Zip Code

43201

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH LOC 4/COLUMBUS

Occupation

BUS DRIVER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

218.75

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 2 | 9 | / | 2 | 0 | 1 | 0 |

Transaction ID: SA11AI.156589

Amount of Each Receipt this Period

31.25

B.

Full Name (Last, First, Middle Initial)

WILLIAM DANDO

Mailing Address 6630 Huntingdon Street

City

Harrisburg

State

PA

Zip Code

17111

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME PA CN 13

Occupation

ASSOCIATE LEGISLATIVE DIRECTOR

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

235.62

Date of Receipt

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

Transaction ID: SA11AI.153349

Amount of Each Receipt this Period

78.54

C.

Full Name (Last, First, Middle Initial)

ROBERT A. DAVIS

Mailing Address 822 Bovee Lane

City

Powell

State

OH

Zip Code

43065

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFSCME OH CN 8

Occupation

ASSOCIATE DIRECTOR

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

254.28

Date of Receipt

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

Transaction ID: SA11AI.153770

Amount of Each Receipt this Period

84.76

SUBTOTAL of Receipts This Page (optional)

194.55

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 27 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

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

Mailing Address P.O. Box 116

City State Zip Code
Maspeth NY 11378

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation
REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.45

Date of Receipt

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

Transaction ID: SA11AI.153145

Amount of Each Receipt this Period

49.49

B.

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

Mailing Address P.O. Box 116

City State Zip Code
Maspeth NY 11378

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation
REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.94

Date of Receipt

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

Transaction ID: SA11AI.153248

Amount of Each Receipt this Period

49.49

C.

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

Mailing Address 3561 S.E. Kamilehe
Point Road

City State Zip Code
Shelton WA 98584

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WA CN 28

Occupation
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.00

Date of Receipt

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

Transaction ID: SA11AI.154028

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)

218.98

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 28 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

GREG DEVEREUX

Mailing Address 3561 S.E. Kamilehe
Point Road

City State Zip Code
Shelton WA 98584

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WA CN 28

Occupation
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.00

Date of Receipt

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

Transaction ID: SA11AI.153852

Amount of Each Receipt this Period

14.00

B.

Full Name (Last, First, Middle Initial)

JASON DIBBLE

Mailing Address 303 12th Street SE

City State Zip Code
Austin MN 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 ▼

320.00

Date of Receipt

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

Transaction ID: SA11AI.155541

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

JASON DIBBLE

Mailing Address 303 12th Street SE

City State Zip Code
Austin MN 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 ▼

470.00

Date of Receipt

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

Transaction ID: SA11AI.155338

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

184.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 29 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

JEAN M. DIEDERICH

Mailing Address 4741 Grand Ave. So.
No. 3

| | | |
|-------------|-------|------------|
| City | State | Zip Code |
| Minneapolis | MN | 55419-5443 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/HENNEPIN
COUNTYOccupation
CHILD SUPPORT OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 0 | 5 | / | 2 | 0 | 1 | 0 |

Transaction ID: SA11AI.155396

Amount of Each Receipt this Period

110.00

B.

Full Name (Last, First, Middle Initial)

KEVIN DOEING

Mailing Address 316 Quittie Park Dr.

| | | |
|----------|-------|----------|
| City | State | Zip Code |
| Annville | PA | 17003 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.04

Date of Receipt

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

Transaction ID: SA11AI.153354

Amount of Each Receipt this Period

78.54

C.

Full Name (Last, First, Middle Initial)

THOMAS C. DRABICK, JR.

Mailing Address 982 Fortkort Drive

| | | |
|--------------|-------|----------|
| City | State | Zip Code |
| Reynoldsburg | OH | 43068 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4Occupation
DIRECTOR, LEGAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11AI.153612

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

228.54

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

PAMELA F. DUNCAN

Mailing Address 7282 Aplin Drive

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation

EXECUTIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

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

Transaction ID: SA11AI.153613

Amount of Each Receipt this Period

38.50

B.

Full Name (Last, First, Middle Initial)

DENNIS EAGLE

Mailing Address 5007 26th Ave., SE

City

Lacey

State

WA

Zip Code

98503

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WA CN 28

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

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

Transaction ID: SA11AI.154032

Amount of Each Receipt this Period

90.00

C.

Full Name (Last, First, Middle Initial)

SUSAN ESTY

Mailing Address 2257 Park Hill Avenue

City

Baltimore

State

MD

Zip Code

21211

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MD CN 982

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.46

Date of Receipt

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

Transaction ID: SA11AI.153906

Amount of Each Receipt this Period

141.64

SUBTOTAL of Receipts This Page (optional)

270.14

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 31 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

MARY FALK

Mailing Address 11236 Georgia Avenue N.

City

North Champlin

State

MN

Zip Code

55316-3800

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/STATE OF
MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: SA11AI.155342

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

STEPHAN FANTAUZZO

Mailing Address 3840 N. Delaware Street

City

Indianapolis

State

IN

Zip Code

46205

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

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

Transaction ID: SA11AI.153146

Amount of Each Receipt this Period

59.00

C.

Full Name (Last, First, Middle Initial)

STEPHAN FANTAUZZO

Mailing Address 3840 N. Delaware Street

City

Indianapolis

State

IN

Zip Code

46205

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

354.00

Date of Receipt

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

Transaction ID: SA11AI.153249

Amount of Each Receipt this Period

59.00

SUBTOTAL of Receipts This Page (optional)

178.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 32 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

RICHARD M. FELLER

Mailing Address 4705 Butterworth Place, NW

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.35

Date of Receipt

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

Transaction ID: SA11AI.153147

Amount of Each Receipt this Period

53.67

B.

Full Name (Last, First, Middle Initial)

RICHARD M. FELLER

Mailing Address 4705 Butterworth Place, NW

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.02

Date of Receipt

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

Transaction ID: SA11AI.153250

Amount of Each Receipt this Period

53.67

C.

Full Name (Last, First, Middle Initial)

CATHRYN FELLINGER

Mailing Address 2271 Edmonton Road

City

Columbus

State

OH

Zip Code

43229-4705

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 11

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.155277

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

157.34

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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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)

JOHN J. FILAK, Jr.

Mailing Address 6160 Clingan Road

City

Poland

State

OH

Zip Code

44514

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.28

Date of Receipt

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

Transaction ID: SA11AI.153776

Amount of Each Receipt this Period

84.76

B.

Full Name (Last, First, Middle Initial)

DAVID FILLMAN

Mailing Address 2520 Helen Street

City

Hatboro

State

PA

Zip Code

19040

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.10

Date of Receipt

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

Transaction ID: SA11AI.153359

Amount of Each Receipt this Period

136.70

C.

Full Name (Last, First, Middle Initial)

DAVID FILLMAN

Mailing Address 2520 Helen Street

City

Hatboro

State

PA

Zip Code

19040

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.10

Date of Receipt

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

Transaction ID: SA11AI.153855

Amount of Each Receipt this Period

14.00

SUBTOTAL of Receipts This Page (optional)

235.46

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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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)

MICHAEL E. FOX

Mailing Address 3818 Sheffield Lane

City

Harrisburg

State

PA

Zip Code

17110-3044

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

COUNCIL DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

470.42

Date of Receipt

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

Transaction ID: SA11AI.153360

Amount of Each Receipt this Period

110.14

B.

Full Name (Last, First, Middle Initial)

MICHAEL E. FOX

Mailing Address 3818 Sheffield Lane

City

Harrisburg

State

PA

Zip Code

17110-3044

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

COUNCIL DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

540.42

Date of Receipt

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

Transaction ID: SA11AI.153856

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

AMY H. GALATIAN

Mailing Address 10925 Southern Highlands Parkway

City

Las Vegas

State

NV

Zip Code

89141

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

REGIONAL FIELD ADMINISTRATOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

204.48

Date of Receipt

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

Transaction ID: SA11AI.153251

Amount of Each Receipt this Period

34.08

SUBTOTAL of Receipts This Page (optional)

214.22

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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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)

ALBERT GARRETT

Mailing Address 18491 Lauder

City

Detroit

State

MI

Zip Code

48235-2738

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MI CN 25

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.10

Date of Receipt

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

Transaction ID: SA11AI.153667

Amount of Each Receipt this Period

120.42

B.

Full Name (Last, First, Middle Initial)

ALBERT GARRETT

Mailing Address 18491 Lauder

City

Detroit

State

MI

Zip Code

48235-2738

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MI CN 25

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.52

Date of Receipt

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

Transaction ID: SA11AI.153715

Amount of Each Receipt this Period

120.42

C.

Full Name (Last, First, Middle Initial)

ALBERT GARRETT

Mailing Address 18491 Lauder

City

Detroit

State

MI

Zip Code

48235-2738

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MI CN 25

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

764.52

Date of Receipt

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

Transaction ID: SA11AI.153857

Amount of Each Receipt this Period

14.00

SUBTOTAL of Receipts This Page (optional)

254.84

TOTAL This Period (last page this line number only)

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

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

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

A.

Full Name (Last, First, Middle Initial)

DAVID GASH

Mailing Address 226 Hartley Road

City

Hershey

State

PA

Zip Code

17033

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153364

Amount of Each Receipt this Period

68.30

B.

Full Name (Last, First, Middle Initial)

RAGLAN GEORGE, Jr.

Mailing Address 75 Varick Street
Suite #1404

City

New York

State

NY

Zip Code

10013-9902

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME NY CN 1707

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

363.16

Date of Receipt

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

Transaction ID: SA11AI.153844

Amount of Each Receipt this Period

95.76

C.

Full Name (Last, First, Middle Initial)

RAGLAN GEORGE, Jr.

Mailing Address 75 Varick Street
Suite #1404

City

New York

State

NY

Zip Code

10013-9902

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME NY CN 1707

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.92

Date of Receipt

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

Transaction ID: SA11AI.153845

Amount of Each Receipt this Period

95.76

SUBTOTAL of Receipts This Page (optional)

259.82

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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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)

RAGLAN GEORGE, Jr.

Mailing Address 75 Varick Street
Suite #1404

City State Zip Code
New York NY 10013-9902

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME NY CN 1707

Occupation
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.92

Date of Receipt

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

Transaction ID: SA11AI.153858

Amount of Each Receipt this Period

14.00

B.

Full Name (Last, First, Middle Initial)

THOMAS GIBBS

Mailing Address 152 Upper Claar Rd.

City State Zip Code
Claysburg PA 16625

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153365

Amount of Each Receipt this Period

68.30

C.

Full Name (Last, First, Middle Initial)

DOROTHY L. GILLIAM

Mailing Address 1216 Waterford Drive

City State Zip Code
District Heights MD 20747

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation
ADMINISTRATIVE ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.52

Date of Receipt

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

Transaction ID: SA11AI.153254

Amount of Each Receipt this Period

35.42

SUBTOTAL of Receipts This Page (optional)

117.72

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 38 / 178

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

ALICE GOFF

Mailing Address 8124 Alix Avenue

City

Los Angeles

State

CA

Zip Code

90001

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME CA CN 36

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.153832

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MARK GOLDEN

Mailing Address 74 Ice Pond Road

City

Levittown

State

PA

Zip Code

19057

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153366

Amount of Each Receipt this Period

68.30

C.

Full Name (Last, First, Middle Initial)

RICHARD GOLLIN

Mailing Address 900 Randolph Place

City

Union

State

NJ

Zip Code

07083-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME NJ CN 52

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.92

Date of Receipt

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

Transaction ID: SA11AI.153907

Amount of Each Receipt this Period

105.92

SUBTOTAL of Receipts This Page (optional)

214.22

TOTAL This Period (last page this line number only)

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

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

RICHARD GOLLIN

Mailing Address 900 Randolph Place

City

State

Zip Code

Union

NJ

07083-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME NJ CN 52

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.92

Date of Receipt

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

Transaction ID: SA11AI.153859

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

RICHARD GOLLIN

Mailing Address 900 Randolph Place

City

State

Zip Code

Union

NJ

07083-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME NJ CN 52

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.84

Date of Receipt

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

Transaction ID: SA11AI.153908

Amount of Each Receipt this Period

105.92

C.

Full Name (Last, First, Middle Initial)

JAMES R. GOLLINGS, Jr.

Mailing Address 40 Rathbone

City

State

Zip Code

Columbus

OH

43214

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.82

Date of Receipt

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

Transaction ID: SA11AI.153618

Amount of Each Receipt this Period

38.47

SUBTOTAL of Receipts This Page (optional)

154.39

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 40 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

MARY M. GOULDING

Mailing Address 2183 King James Drive

City

Green Bay

State

WI

Zip Code

54311

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WI CN 40

Occupation

SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.00

Date of Receipt

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

Transaction ID: SA11AI.154007

Amount of Each Receipt this Period

39.00

B.

Full Name (Last, First, Middle Initial)

MARY M. GOULDING

Mailing Address 2183 King James Drive

City

Green Bay

State

WI

Zip Code

54311

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WI CN 40

Occupation

SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.00

Date of Receipt

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

Transaction ID: SA11AI.153949

Amount of Each Receipt this Period

62.00

C.

Full Name (Last, First, Middle Initial)

MARY M. GOULDING

Mailing Address 2183 King James Drive

City

Green Bay

State

WI

Zip Code

54311

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WI CN 40

Occupation

SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

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

Transaction ID: SA11AI.153982

Amount of Each Receipt this Period

62.00

SUBTOTAL of Receipts This Page (optional)

163.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 41 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

STEPHEN M. GRAHAM

Mailing Address 10105 Baltimore Avenue
Apt. 3407

City State Zip Code
College Park MD 20740

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, ACCOUNTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.15

Date of Receipt

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

Transaction ID: SA11AI.153154

Amount of Each Receipt this Period

43.23

B.

Full Name (Last, First, Middle Initial)

STEPHEN M. GRAHAM

Mailing Address 10105 Baltimore Avenue
Apt. 3407

City State Zip Code
College Park MD 20740

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, ACCOUNTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.38

Date of Receipt

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

Transaction ID: SA11AI.153257

Amount of Each Receipt this Period

43.23

C.

Full Name (Last, First, Middle Initial)

R. SEAN GRAYSON

Mailing Address 10201 Galena Pointe Drive

City State Zip Code
Galena OH 43021

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH CN 8

Occupation

GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.54

Date of Receipt

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

Transaction ID: SA11AI.153777

Amount of Each Receipt this Period

103.18

SUBTOTAL of Receipts This Page (optional)

189.64

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 42 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

JONATHAN GREBNER

Mailing Address 840 Randolph Avenue

City

Saint Paul

State

MN

Zip Code

55126

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14

Occupation

POLITICAL DIRECTOR

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

207.71

Date of Receipt

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

Transaction ID: SA11AI.155588

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

RONALD J. GREEN

Mailing Address 531 Park Shadow Court

City

Baldwin Park

State

CA

Zip Code

90706

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME CA CN 36/Local 3634

Occupation

TRANSIT SUPERVISOR

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: SA11AI.153834

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

DANIEL GROVE

Mailing Address 131 Scanlon Dirve

City

Franklin

State

PA

Zip Code

16323

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153368

Amount of Each Receipt this Period

68.30

SUBTOTAL of Receipts This Page (optional)

288.30

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 43 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

YVONNE J. HARGROVE

Mailing Address 12832 Evansport PI

City

Woodbridge

State

VA

Zip Code

22192

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ADMINISTRATIVE ASSISTANT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.52

Date of Receipt

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

Transaction ID: SA11AI.153264

Amount of Each Receipt this Period

33.42

B.

Full Name (Last, First, Middle Initial)

LOUIS HARRIS

Mailing Address 1516 172nd Street East

City

Spanaway

State

WA

Zip Code

98387

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME CA CN 36

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.20

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.153835

Amount of Each Receipt this Period

65.70

C.

Full Name (Last, First, Middle Initial)

MICHAEL D. HATCHER

Mailing Address P. O. Box 231

City

Monticello

State

KY

Zip Code

42633

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

LEAD ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.54

Date of Receipt

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

Transaction ID: SA11AI.153267

Amount of Each Receipt this Period

38.09

SUBTOTAL of Receipts This Page (optional)

137.21

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 44 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

JIMMIE HEARNS

Mailing Address 18509 Mendota

City

Detroit

State

MI

Zip Code

48221

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MI CN 25

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.86

Date of Receipt

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

Transaction ID: SA11AI.153720

Amount of Each Receipt this Period

36.67

B.

Full Name (Last, First, Middle Initial)

PHILIP W. HELMS

Mailing Address 4108 Menton

City

Flint

State

MI

Zip Code

48507

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MI CN 25

Occupation

EDITOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.55

Date of Receipt

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

Transaction ID: SA11AI.153673

Amount of Each Receipt this Period

55.51

C.

Full Name (Last, First, Middle Initial)

PHILIP W. HELMS

Mailing Address 4108 Menton

City

Flint

State

MI

Zip Code

48507

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MI CN 25

Occupation

EDITOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.06

Date of Receipt

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

Transaction ID: SA11AI.153721

Amount of Each Receipt this Period

55.51

SUBTOTAL of Receipts This Page (optional)

147.69

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 45 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

SIDNEY L. HELSETH

Mailing Address 6554 Craig Avenue

City

Inver Grove Hgts.

State

MN

Zip Code

55076-1700

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.12

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.155306

Amount of Each Receipt this Period

71.12

B.

Full Name (Last, First, Middle Initial)

DAVID J. HENDERSON

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 ▼

330.42

Date of Receipt

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

Transaction ID: SA11AI.153371

Amount of Each Receipt this Period

110.14

C.

Full Name (Last, First, Middle Initial)

MARGARET HOAK

Mailing Address P.O. Box 264

City

Warren

State

PA

Zip Code

16365

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153373

Amount of Each Receipt this Period

68.30

SUBTOTAL of Receipts This Page (optional)

249.56

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 46 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

KARLA HODGE

Mailing Address 1212 N. 14th Street

City

Harrisburg

State

PA

Zip Code

17103

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153374

Amount of Each Receipt this Period

68.30

B.

Full Name (Last, First, Middle Initial)

DANNY J. HOMAN

Mailing Address 3000 Isabella

City

Sioux City

State

IA

Zip Code

51103-2134

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME IA CN 61

Occupation

PRESIDENT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.153892

Amount of Each Receipt this Period

80.00

C.

Full Name (Last, First, Middle Initial)

DANNY J. HOMAN

Mailing Address 3000 Isabella

City

Sioux City

State

IA

Zip Code

51103-2134

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME IA CN 61

Occupation

PRESIDENT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

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

Transaction ID: SA11AI.153862

Amount of Each Receipt this Period

56.00

SUBTOTAL of Receipts This Page (optional)

204.30

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 47 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

CHRISTINE R. HOSKINS

Mailing Address 8306 James Street

City

Upper Marlboro

State

MD

Zip Code

20772

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.90

Date of Receipt

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

Transaction ID: SA11AI.153269

Amount of Each Receipt this Period

36.15

B.

Full Name (Last, First, Middle Initial)

CARLA INSINGA-MINSER

Mailing Address 4287 South Carolina Drive

City

Blue Ridge

State

PA

Zip Code

17112

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.44

Date of Receipt

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

Transaction ID: SA11AI.153375

Amount of Each Receipt this Period

93.48

C.

Full Name (Last, First, Middle Initial)

WILLIAM ISLER

Mailing Address 7708 Quest Lane

City

Bowie

State

MD

Zip Code

20720

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASST DIRECTOR, GENERAL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.05

Date of Receipt

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

Transaction ID: SA11AI.153271

Amount of Each Receipt this Period

39.01

SUBTOTAL of Receipts This Page (optional)

168.64

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 48 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

EDWIN S. JAYNE

Mailing Address 3304 Alabama Avenue

City

Alexandria

State

VA

Zip Code

22305

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, LEGISLATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.35

Date of Receipt

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

Transaction ID: SA11AI.153168

Amount of Each Receipt this Period

53.67

B.

Full Name (Last, First, Middle Initial)

EDWIN S. JAYNE

Mailing Address 3304 Alabama Avenue

City

Alexandria

State

VA

Zip Code

22305

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, LEGISLATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.02

Date of Receipt

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

Transaction ID: SA11AI.153272

Amount of Each Receipt this Period

53.67

C.

Full Name (Last, First, Middle Initial)

PAMELA L. JENKINS

Mailing Address 47604 Sandbank Square

City

Sterling

State

VA

Zip Code

20165

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.60

Date of Receipt

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

Transaction ID: SA11AI.153169

Amount of Each Receipt this Period

41.12

SUBTOTAL of Receipts This Page (optional)

148.46

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 49 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

PAMELA L. JENKINS

Mailing Address 47604 Sandbank Square

City

Sterling

State

VA

Zip Code

20165

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

EXECUTIVE OFFICE ASSISTANT

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.72

Date of Receipt

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

Transaction ID: SA11AI.153273

Amount of Each Receipt this Period

41.12

B.

Full Name (Last, First, Middle Initial)

FRANK X. JEREZ

Mailing Address 460 Center Street
Apt. #3

City

Nutley

State

NJ

Zip Code

07110-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

LEAD ORGANIZER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.47

Date of Receipt

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

Transaction ID: SA11AI.153274

Amount of Each Receipt this Period

37.07

C.

Full Name (Last, First, Middle Initial)

GEORGE T. JOHNSON

Mailing Address 3853 Fairfax Square

City

Fairfax

State

VA

Zip Code

22031-4200

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.05

Date of Receipt

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

Transaction ID: SA11AI.153171

Amount of Each Receipt this Period

43.61

SUBTOTAL of Receipts This Page (optional)

121.80

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 50 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

GEORGE T. JOHNSON

Mailing Address 3853 Fairfax Square

City

Fairfax

State

VA

Zip Code

22031-4200

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.66

Date of Receipt

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

Transaction ID: SA11AI.153275

Amount of Each Receipt this Period

43.61

B.

Full Name (Last, First, Middle Initial)

JUDY A. JONES

Mailing Address 115 S Oak Street

City

Falls Church

State

VA

Zip Code

22046

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSOC. DIRECTOR, INFORMATION SYSTEMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.35

Date of Receipt

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

Transaction ID: SA11AI.153172

Amount of Each Receipt this Period

53.67

C.

Full Name (Last, First, Middle Initial)

JUDY A. JONES

Mailing Address 115 S Oak Street

City

Falls Church

State

VA

Zip Code

22046

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSOC. DIRECTOR, INFORMATION SYSTEMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.02

Date of Receipt

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

Transaction ID: SA11AI.153276

Amount of Each Receipt this Period

53.67

SUBTOTAL of Receipts This Page (optional)

150.95

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 51 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

LISA HARRIS KELLY

Mailing Address 9800 Muirfield Drive

City

Upper Marlboro

State

MD

Zip Code

20772

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

SENIOR SPEECH WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.45

Date of Receipt

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

Transaction ID: SA11AI.153174

Amount of Each Receipt this Period

49.49

B.

Full Name (Last, First, Middle Initial)

LISA HARRIS KELLY

Mailing Address 9800 Muirfield Drive

City

Upper Marlboro

State

MD

Zip Code

20772

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

SENIOR SPEECH WRITER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.94

Date of Receipt

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

Transaction ID: SA11AI.153278

Amount of Each Receipt this Period

49.49

C.

Full Name (Last, First, Middle Initial)

JILL KIELBLOCK

Mailing Address 581 Gotzian Street

City

Saint Paul

State

MN

Zip Code

55106

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.12

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.155309

Amount of Each Receipt this Period

71.12

SUBTOTAL of Receipts This Page (optional)

170.10

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 52 / 178

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

JILL KIELBLOCK

Mailing Address 581 Gotzian Street

City

Saint Paul

State

MN

Zip Code

55106

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.12

Date of Receipt

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

Transaction ID: SA11AI.155655

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

GREGORY J. KING

Mailing Address 147 W Linvale Street

City

Baltimore

State

MD

Zip Code

21217

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, PUBLIC AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.35

Date of Receipt

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

Transaction ID: SA11AI.153176

Amount of Each Receipt this Period

53.67

C.

Full Name (Last, First, Middle Initial)

GREGORY J. KING

Mailing Address 147 W Linvale Street

City

Baltimore

State

MD

Zip Code

21217

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, PUBLIC AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.02

Date of Receipt

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

Transaction ID: SA11AI.153279

Amount of Each Receipt this Period

53.67

SUBTOTAL of Receipts This Page (optional)

127.34

TOTAL This Period (last page this line number only)

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

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

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

R. MICHAEL KIRKPATRICK

Mailing Address 6131 Mifflin Avenue

City

Harrisburg

State

PA

Zip Code

17111-4259

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

DIRECTOR, GRIEVANCE DEPT.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.44

Date of Receipt

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

Transaction ID: SA11AI.153377

Amount of Each Receipt this Period

93.48

B.

Full Name (Last, First, Middle Initial)

CHRISTINE E. KISTNER

Mailing Address 501 High Street

City

Colfax

State

WI

Zip Code

54730

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WI CN 40

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

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

Transaction ID: SA11AI.153985

Amount of Each Receipt this Period

60.00

C.

Full Name (Last, First, Middle Initial)

JOSEPH KLEMAN

Mailing Address 4031 Executive Park Drive

City

Harrisburg

State

PA

Zip Code

17111-1599

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.46

Date of Receipt

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

Transaction ID: SA11AI.153378

Amount of Each Receipt this Period

90.82

SUBTOTAL of Receipts This Page (optional)

244.30

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 54 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

CAROLYN KLINGLESMTIH

Mailing Address 2812 Windsor Forest Drive

City

Louisville

State

KY

Zip Code

40272

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

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

Transaction ID: SA11AI.153177

Amount of Each Receipt this Period

44.80

B.

Full Name (Last, First, Middle Initial)

CAROLYN KLINGLESMTIH

Mailing Address 2812 Windsor Forest Drive

City

Louisville

State

KY

Zip Code

40272

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.03

Date of Receipt

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

Transaction ID: SA11AI.153280

Amount of Each Receipt this Period

46.03

C.

Full Name (Last, First, Middle Initial)

NANCY KNEPP

Mailing Address 22 Edgewood Drive

City

Mechanicsburg

State

PA

Zip Code

17055

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153379

Amount of Each Receipt this Period

68.30

SUBTOTAL of Receipts This Page (optional)

159.13

TOTAL This Period (last page this line number only)

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

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

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

MARCIA R. KNOX

Mailing Address 1660 Newton Avenue

City

Dayton

State

OH

Zip Code

45406-4110

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.03

Date of Receipt

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

Transaction ID: SA11AI.153782

Amount of Each Receipt this Period

86.01

B.

Full Name (Last, First, Middle Initial)

MARCIA R. KNOX

Mailing Address 1660 Newton Avenue

City

Dayton

State

OH

Zip Code

45406-4110

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.03

Date of Receipt

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

Transaction ID: SA11AI.153821

Amount of Each Receipt this Period

5.00

C.

Full Name (Last, First, Middle Initial)

STEVE KOFFROTH

Mailing Address 17824 Autry Ct

City

Chino Hills

State

CA

Zip Code

91709

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME CA CN 36

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.40

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.153836

Amount of Each Receipt this Period

62.40

SUBTOTAL of Receipts This Page (optional)

153.41

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

STEVEN KREISBERG

Mailing Address 9954 Whitewater Drive

City

Burke

State

VA

Zip Code

22015

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, RESEARCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.35

Date of Receipt

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

Transaction ID: SA11AI.153178

Amount of Each Receipt this Period

53.67

B.

Full Name (Last, First, Middle Initial)

STEVEN KREISBERG

Mailing Address 9954 Whitewater Drive

City

Burke

State

VA

Zip Code

22015

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, RESEARCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.02

Date of Receipt

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

Transaction ID: SA11AI.153281

Amount of Each Receipt this Period

53.67

C.

Full Name (Last, First, Middle Initial)

BARBARA KREMP

Mailing Address 302 Donnelly Avenue

City

Aston

State

PA

Zip Code

19014

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153380

Amount of Each Receipt this Period

68.30

SUBTOTAL of Receipts This Page (optional)

175.64

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 57 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

THOMAS E. KULIKOSKY

Mailing Address 400 Old Dominion Avenue

City

Herndon

State

VA

Zip Code

20170

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

AUDITING MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.46

Date of Receipt

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

Transaction ID: SA11AI.153179

Amount of Each Receipt this Period

49.49

B.

Full Name (Last, First, Middle Initial)

THOMAS E. KULIKOSKY

Mailing Address 400 Old Dominion Avenue

City

Herndon

State

VA

Zip Code

20170

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

AUDITING MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.95

Date of Receipt

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

Transaction ID: SA11AI.153282

Amount of Each Receipt this Period

49.49

C.

Full Name (Last, First, Middle Initial)

ELIZABETH LARSEN

Mailing Address 900 Grant Street SW

City

Tumwater

State

WA

Zip Code

98512-6335

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WA CN 28

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.00

Date of Receipt

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

Transaction ID: SA11AI.154043

Amount of Each Receipt this Period

82.00

SUBTOTAL of Receipts This Page (optional)

180.98

TOTAL This Period (last page this line number only)

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

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(check only one)

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

ERIC N. LEHTO

Mailing Address 2122 West 2nd Street
Apt. #2City State Zip Code
Duluth MN 55086FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14Occupation
DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

309.66

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 0 | 9 | / | 2 | 0 | 1 | 0 |

Transaction ID: SA11AI.155311

Amount of Each Receipt this Period

103.22

B.

Full Name (Last, First, Middle Initial)

SUSAN T. LEVITAN

Mailing Address 2650 Worrell Court

City State Zip Code
Crofton MD 21114FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'LOccupation
ASSISTANT DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.40

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 1 | 5 | / | 2 | 0 | 1 | 0 |

Transaction ID: SA11AI.153180

Amount of Each Receipt this Period

42.08

C.

Full Name (Last, First, Middle Initial)

SUSAN T. LEVITAN

Mailing Address 2650 Worrell Court

City State Zip Code
Crofton MD 21114FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'LOccupation
ASSISTANT DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.48

Date of Receipt

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

Transaction ID: SA11AI.153283

Amount of Each Receipt this Period

42.08

SUBTOTAL of Receipts This Page (optional)

187.38

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

DEBRA I. LEY

Mailing Address 4692 Wyngate Way

City

Forest Lake

State

MN

Zip Code

55025

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

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

Transaction ID: SA11AI.155687

Amount of Each Receipt this Period

240.00

B.

Full Name (Last, First, Middle Initial)

DEBRA I. LEY

Mailing Address 4692 Wyngate Way

City

Forest Lake

State

MN

Zip Code

55025

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.00

Date of Receipt

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

Transaction ID: SA11AI.155688

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

MICHAEL LINDHOLT

Mailing Address 2752 Randolph Street NE

City

Minneapolis

State

MN

Zip Code

55418-2622

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/STATE OF
MN

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

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

Transaction ID: SA11AI.155359

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)

380.00

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

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

Mailing Address P.O. Box 22

City State Zip Code
Benton PA 17814

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153384

Amount of Each Receipt this Period

68.30

B.

Full Name (Last, First, Middle Initial)
LISABETH LONG

Mailing Address P.O. Box 82

City State Zip Code
Falls Creek PA 15840-0082

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation
EDUCATION DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.44

Date of Receipt

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

Transaction ID: SA11AI.153385

Amount of Each Receipt this Period

93.48

C.

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

Mailing Address 947 Bunker Hill Road

City State Zip Code
Watertown CT 06795-3231

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME CT CN 4

Occupation
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.00

Date of Receipt

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

Transaction ID: SA11AI.153863

Amount of Each Receipt this Period

14.00

SUBTOTAL of Receipts This Page (optional)

175.78

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 61 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

WILLIAM LUCY

Mailing Address 1831 Sudbury Lane NW

City

Washington

State

DC

Zip Code

20012-2202

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

SECRETARY TREASURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.30

Date of Receipt

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

Transaction ID: SA11AI.153181

Amount of Each Receipt this Period

133.06

B.

Full Name (Last, First, Middle Initial)

WILLIAM LUCY

Mailing Address 1831 Sudbury Lane NW

City

Washington

State

DC

Zip Code

20012-2202

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

SECRETARY TREASURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

798.36

Date of Receipt

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

Transaction ID: SA11AI.153284

Amount of Each Receipt this Period

133.06

C.

Full Name (Last, First, Middle Initial)

JOHN A. LYALL

Mailing Address 383 Ashmoore Circle East

City

Powell

State

OH

Zip Code

43065

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH CN 8

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.98

Date of Receipt

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

Transaction ID: SA11AI.153785

Amount of Each Receipt this Period

125.66

SUBTOTAL of Receipts This Page (optional)

391.78

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 62 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

JOHN A. LYALL

Mailing Address 383 Ashmoore Circle East

City

Powell

State

OH

Zip Code

43065

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH CN 8

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.98

Date of Receipt

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

Transaction ID: SA11AI.153864

Amount of Each Receipt this Period

14.00

B.

Full Name (Last, First, Middle Initial)

ROBERTA LYNCH

Mailing Address 4650 N. Hermitage Street

City

Chicago

State

IL

Zip Code

60640

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME IL CN 31

Occupation

DEPUTY DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.04

Date of Receipt

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

Transaction ID: SA11AI.155951

Amount of Each Receipt this Period

102.52

C.

Full Name (Last, First, Middle Initial)

ROBERTA LYNCH

Mailing Address 4650 N. Hermitage Street

City

Chicago

State

IL

Zip Code

60640

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME IL CN 31

Occupation

DEPUTY DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.04

Date of Receipt

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

Transaction ID: SA11AI.153865

Amount of Each Receipt this Period

14.00

SUBTOTAL of Receipts This Page (optional)

130.52

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

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

A.

Full Name (Last, First, Middle Initial)

KATHRYN S. MALONE

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

DIRECTOR, POLITICAL ACTION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

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

Transaction ID: SA11AI.153623

Amount of Each Receipt this Period

38.50

B.

Full Name (Last, First, Middle Initial)

LARRY MALONE

Mailing Address 5185 Horseshoe Falls Drive

City

Dublin

State

OH

Zip Code

43016

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

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

Transaction ID: SA11AI.153624

Amount of Each Receipt this Period

38.50

C.

Full Name (Last, First, Middle Initial)

MICHAEL MANN

Mailing Address 15103 Hunter Mountain Lane

City

Silver Spring

State

MD

Zip Code

20906

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, AUDITING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.35

Date of Receipt

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

Transaction ID: SA11AI.153182

Amount of Each Receipt this Period

53.67

SUBTOTAL of Receipts This Page (optional)

130.67

TOTAL This Period (last page this line number only)

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

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

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

A.

Full Name (Last, First, Middle Initial)

MICHAEL MANN

Mailing Address 15103 Hunter Mountain Lane

City

Silver Spring

State

MD

Zip Code

20906

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, AUDITING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.02

Date of Receipt

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

Transaction ID: SA11AI.153285

Amount of Each Receipt this Period

53.67

B.

Full Name (Last, First, Middle Initial)

TED MANNA

Mailing Address 510 45th Street

City

Altoona

State

PA

Zip Code

16601-9788

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.30

Date of Receipt

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

Transaction ID: SA11AI.153387

Amount of Each Receipt this Period

81.66

C.

Full Name (Last, First, Middle Initial)

LARA L. MANZIONE

Mailing Address 1201 East West Hwy.
Unit #432

City

Silver Spring

State

MD

Zip Code

20910

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, PUBLIC AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.12

Date of Receipt

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

Transaction ID: SA11AI.153183

Amount of Each Receipt this Period

48.17

SUBTOTAL of Receipts This Page (optional)

183.50

TOTAL This Period (last page this line number only)

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

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

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

A.

Full Name (Last, First, Middle Initial)

LARA L. MANZIONE

Mailing Address 1201 East West Hwy.
Unit #432

City State Zip Code
Silver Spring MD 20910

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation
ASSISTANT DIRECTOR, PUBLIC AFFAIRS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.29

Date of Receipt

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

Transaction ID: SA11AI.153286

Amount of Each Receipt this Period

48.17

B.

Full Name (Last, First, Middle Initial)

STEPHEN MARINCEL

Mailing Address 247 Kennard Street

City State Zip Code
Saint Paul MN 55106

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14

Occupation
BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.12

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.155313

Amount of Each Receipt this Period

71.12

C.

Full Name (Last, First, Middle Initial)

ALIXETTA M. MARLOW

Mailing Address 3937 Blueberry Hollow Road

City State Zip Code
Gahanna OH 43230

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation
ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

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

Transaction ID: SA11AI.153625

Amount of Each Receipt this Period

38.50

SUBTOTAL of Receipts This Page (optional)

157.79

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.Full Name (Last, First, Middle Initial)
GARY MARTIN

Mailing Address 255 Trail East

| | | |
|-----------|-------|----------|
| City | State | Zip Code |
| Pataskala | OH | 43062 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4Occupation
ASSOCIATE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11AI.153626

Amount of Each Receipt this Period

40.00

B.Full Name (Last, First, Middle Initial)
KIMBERLY A. MASSENGILL-BERNARDIN

Mailing Address 8000 Brookpoint Place

| | | |
|-------------|-------|----------|
| City | State | Zip Code |
| Westerville | OH | 43081 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH CN 8Occupation
ASSOCIATE COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.44

Date of Receipt

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

Transaction ID: SA11AI.153787

Amount of Each Receipt this Period

69.48

C.Full Name (Last, First, Middle Initial)
CLYDE F. MAUK

Mailing Address 5580 Spoonbill Court

| | | |
|---------------|-------|----------|
| City | State | Zip Code |
| Huber Heights | OH | 45424 |

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4Occupation
REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11AI.153627

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

149.48

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 67 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

BOYD B. MCCAMISH

Mailing Address 1004 Woodtown Drive

City

Gahanna

State

OH

Zip Code

43230

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.40

Date of Receipt

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

Transaction ID: SA11AI.153184

Amount of Each Receipt this Period

42.08

B.

Full Name (Last, First, Middle Initial)

BOYD B. MCCAMISH

Mailing Address 1004 Woodtown Drive

City

Gahanna

State

OH

Zip Code

43230

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.48

Date of Receipt

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

Transaction ID: SA11AI.153287

Amount of Each Receipt this Period

42.08

C.

Full Name (Last, First, Middle Initial)

GARY MCCAULLEY

Mailing Address 84 Mic Nan Drive

City

Londonberry

State

PA

Zip Code

17057

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

ASSISTANT DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.44

Date of Receipt

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

Transaction ID: SA11AI.153388

Amount of Each Receipt this Period

93.48

SUBTOTAL of Receipts This Page (optional)

177.64

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
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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

JENNIFER A. MCCULLEY

Mailing Address 509 Ashton Drive

City

Fitchburg

State

WI

Zip Code

53593

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WI CN 40

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: SA11AI.153989

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)

PETER M. MCLINDEN

Mailing Address 935 Pamela Road

City

Cincinnati

State

OH

Zip Code

45255

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH CN 8

Occupation

ASSOCIATE COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.89

Date of Receipt

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

Transaction ID: SA11AI.153790

Amount of Each Receipt this Period

84.76

C.

Full Name (Last, First, Middle Initial)

ORAN MCMICHAEL

Mailing Address 2777 Northtowne Lane
Apt. #2088S

City

Reno

State

NV

Zip Code

89512

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.05

Date of Receipt

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

Transaction ID: SA11AI.153186

Amount of Each Receipt this Period

43.61

SUBTOTAL of Receipts This Page (optional)

183.37

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 69 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

ORAN MCMICHAEL

Mailing Address 2777 Northtowne Lane
Apt. #2088S

City State Zip Code
Reno NV 89512

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation
AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.66

Date of Receipt

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

Transaction ID: SA11AI.153289

Amount of Each Receipt this Period

43.61

B.

Full Name (Last, First, Middle Initial)

EDWARD MCNEIL

Mailing Address 2546 Edison

City State Zip Code
Detroit MI 48206

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MI CN 25

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.55

Date of Receipt

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

Transaction ID: SA11AI.153680

Amount of Each Receipt this Period

41.91

C.

Full Name (Last, First, Middle Initial)

EDWARD MCNEIL

Mailing Address 2546 Edison

City State Zip Code
Detroit MI 48206

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MI CN 25

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.46

Date of Receipt

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

Transaction ID: SA11AI.153729

Amount of Each Receipt this Period

41.91

SUBTOTAL of Receipts This Page (optional)

127.43

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 70 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

JONATHAN D. MELEGRITO

Mailing Address 1625 L. Street NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

PUBLICATIONS ASSOCIATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.92

Date of Receipt

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

Transaction ID: SA11AI.153290

Amount of Each Receipt this Period

36.32

B.

Full Name (Last, First, Middle Initial)

LAURIE MERTA

Mailing Address 9829 59th Street, Court W

City

Tacoma

State

WA

Zip Code

98467-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WA CN 28

Occupation

CONVENTION FUNDRAISER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

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

Transaction ID: SA11AI.154046

Amount of Each Receipt this Period

130.00

C.

Full Name (Last, First, Middle Initial)

GLEN MIDDLETON

Mailing Address 5108 Yellowwood Ave

City

Baltimore

State

MD

Zip Code

21209-4611

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MD CN 67

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

568.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 0 | 8 | / | 2 | 0 | 1 | 0 |

Transaction ID: SA11AI.153904

Amount of Each Receipt this Period

180.00

SUBTOTAL of Receipts This Page (optional)

346.32

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 71 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

GLEN MIDDLETON

Mailing Address 5108 Yellowwood Ave

City

Baltimore

State

MD

Zip Code

21209-4611

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MD CN 67

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

582.00

Date of Receipt

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

Transaction ID: SA11AI.153866

Amount of Each Receipt this Period

14.00

B.

Full Name (Last, First, Middle Initial)

TIMOTHY MILLER

Mailing Address 2724 Pine Avenue

City

Altoona

State

PA

Zip Code

16601

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153392

Amount of Each Receipt this Period

68.30

C.

Full Name (Last, First, Middle Initial)

HAROLD F. MITCHELL

Mailing Address 3999 Kensingwood Drive

City

Columbus

State

OH

Zip Code

43230

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH CN 8

Occupation

ASSISTANT ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.22

Date of Receipt

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

Transaction ID: SA11AI.153793

Amount of Each Receipt this Period

111.74

SUBTOTAL of Receipts This Page (optional)

194.04

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 72 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

HARRY MOBLEY

Mailing Address 2635 Cranberry Circle

City

Harrisburg

State

PA

Zip Code

17110

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153393

Amount of Each Receipt this Period

68.30

B.

Full Name (Last, First, Middle Initial)

KAREN MOMBERGER

Mailing Address 102 Manor Road

City

New Kensington

State

PA

Zip Code

15068

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.98

Date of Receipt

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

Transaction ID: SA11AI.153394

Amount of Each Receipt this Period

81.66

C.

Full Name (Last, First, Middle Initial)

RICHARD MORAWSKI

Mailing Address 1606 Walnut Street
2nd Floor

City

Philadelphia

State

PA

Zip Code

19103

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 47

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.154061

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

189.96

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 73 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

JEANNE MORRIS

Mailing Address 2315 Reddings Run Road

City

State

Zip Code

Home

PA

15747

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.88

Date of Receipt

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

Transaction ID: SA11AI.153396

Amount of Each Receipt this Period

72.96

B.

Full Name (Last, First, Middle Initial)

MICHELLE MULHERIN

Mailing Address 2462 Cleveland Avenue

City

State

Zip Code

Reading

PA

19609

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153398

Amount of Each Receipt this Period

68.30

C.

Full Name (Last, First, Middle Initial)

STEVEN C. MULLEN

Mailing Address 544 Clermont Drive

City

State

Zip Code

Harrisburg

PA

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 ▼

224.52

Date of Receipt

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

Transaction ID: SA11AI.153399

Amount of Each Receipt this Period

74.84

SUBTOTAL of Receipts This Page (optional)

216.10

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 74 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

STEVEN L. MYERS

Mailing Address 696 Hull Road

City

Mansfield

State

OH

Zip Code

44907

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11AI.153635

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

JAMES NEBLETT

Mailing Address 17635 Greenview

City

Detroit

State

MI

Zip Code

48219-3588

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MI CN 25

Occupation

ADMINISTRATIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.45

Date of Receipt

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

Transaction ID: SA11AI.153731

Amount of Each Receipt this Period

38.25

C.

Full Name (Last, First, Middle Initial)

CYNTHIA NELSON

Mailing Address 2648 Garfield Street, N.E.

City

Minneapolis

State

MN

Zip Code

55418

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.18

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.155316

Amount of Each Receipt this Period

71.14

SUBTOTAL of Receipts This Page (optional)

149.39

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 75 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

CYNTHIA NELSON

Mailing Address 2648 Garfield Street, N.E.

City

Minneapolis

State

MN

Zip Code

55418

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.18

Date of Receipt

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

Transaction ID: SA11AI.155748

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

JESSE NEWCOMER, IV

Mailing Address 2109 Circle Road

City

Carlisle

State

PA

Zip Code

17013

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.24

Date of Receipt

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

Transaction ID: SA11AI.153400

Amount of Each Receipt this Period

73.08

C.

Full Name (Last, First, Middle Initial)

JAMES B. NILAND

Mailing Address 2728 Pleasant Ave

City

Minneapolis

State

MN

Zip Code

55408

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.155318

Amount of Each Receipt this Period

160.00

SUBTOTAL of Receipts This Page (optional)

253.08

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 76 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

TRAVIS OHM

Mailing Address 8 Highland Road

City

Seven Valleys

State

PA

Zip Code

17360

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.62

Date of Receipt

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

Transaction ID: SA11AI.153401

Amount of Each Receipt this Period

78.54

B.

Full Name (Last, First, Middle Initial)

RUSSELL K. OKATA

Mailing Address 1015 Wilder Avenue #203

City

Honolulu

State

HI

Zip Code

96822-2655

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME HI LOC 152

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.153512

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

CURT A. OSTRANDER

Mailing Address 25 J. Braden Thompson Road

City

Forestdale

State

MA

Zip Code

02644-0000

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 ▼

229.65

Date of Receipt

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

Transaction ID: SA11AI.153191

Amount of Each Receipt this Period

45.93

SUBTOTAL of Receipts This Page (optional)

224.47

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 77 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

CURT A. OSTRANDER

Mailing Address 25 J. Braden Thompson Road

City

Forestdale

State

MA

Zip Code

02644-0000

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 ▼

275.58

Date of Receipt

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

Transaction ID: SA11AI.153294

Amount of Each Receipt this Period

45.93

B.

Full Name (Last, First, Middle Initial)

GERALD OTTEN

Mailing Address 2905 Evergreen Way

City

Ellicott City

State

MD

Zip Code

21042

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

BENEFITS MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.40

Date of Receipt

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

Transaction ID: SA11AI.153192

Amount of Each Receipt this Period

40.08

C.

Full Name (Last, First, Middle Initial)

GERALD OTTEN

Mailing Address 2905 Evergreen Way

City

Ellicott City

State

MD

Zip Code

21042

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

BENEFITS MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.48

Date of Receipt

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

Transaction ID: SA11AI.153295

Amount of Each Receipt this Period

40.08

SUBTOTAL of Receipts This Page (optional)

126.09

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 78 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

HAROLD A. PALMER

Mailing Address 7565 Liddesdale Blvd.

City

Blacklick

State

OH

Zip Code

43004

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11AI.153637

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

CHERYL PARISI

Mailing Address 1932 Walcott Way

City

Los Angeles

State

CA

Zip Code

90039

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME CA CN 36

Occupation

BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 0 | 8 | / | 2 | 0 | 1 | 0 |

Transaction ID: SA11AI.153837

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

BARRY PEARCE

Mailing Address 130 N. Wilson Street

City

Bellefonte

State

PA

Zip Code

16823

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153403

Amount of Each Receipt this Period

68.30

SUBTOTAL of Receipts This Page (optional)

178.30

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 79 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

JOANNE M. PELS

Mailing Address 6987 County 38 NW

City

Walker

State

MN

Zip Code

56484

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.22

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.155319

Amount of Each Receipt this Period

81.74

B.

Full Name (Last, First, Middle Initial)

JOANNE M. PELS

Mailing Address 6987 County 38 NW

City

Walker

State

MN

Zip Code

56484

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.22

Date of Receipt

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

Transaction ID: SA11AI.155780

Amount of Each Receipt this Period

34.00

C.

Full Name (Last, First, Middle Initial)

JOANNE M. PELS

Mailing Address 6987 County 38 NW

City

Walker

State

MN

Zip Code

56484

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.22

Date of Receipt

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

Transaction ID: SA11AI.155781

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

135.74

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 80 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

PAMELA PERILLO

Mailing Address 9270 Billingsley Road

City

White Plains

State

MD

Zip Code

20695

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.52

Date of Receipt

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

Transaction ID: SA11AI.153296

Amount of Each Receipt this Period

33.42

B.

Full Name (Last, First, Middle Initial)

RANDOLPH P. PERREIRA

Mailing Address 1044 Mokuhanoo 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 ▼

328.00

Date of Receipt

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

Transaction ID: SA11AI.153516

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

RANDOLPH P. PERREIRA

Mailing Address 1044 Mokuhanoo 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 ▼

342.00

Date of Receipt

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

Transaction ID: SA11AI.153872

Amount of Each Receipt this Period

14.00

SUBTOTAL of Receipts This Page (optional)

147.42

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 81 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

ELIZABETH PERROW

Mailing Address 958 N. Harrison Street

City

Arlington

State

VA

Zip Code

22205

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSISTANT TO JUD. PANEL CHAIRPERSON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.40

Date of Receipt

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

Transaction ID: SA11AI.153194

Amount of Each Receipt this Period

40.08

B.

Full Name (Last, First, Middle Initial)

ELIZABETH PERROW

Mailing Address 958 N. Harrison Street

City

Arlington

State

VA

Zip Code

22205

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSISTANT TO JUD. PANEL CHAIRPERSON

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.48

Date of Receipt

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

Transaction ID: SA11AI.153297

Amount of Each Receipt this Period

40.08

C.

Full Name (Last, First, Middle Initial)

JANE ANN PETERSON

Mailing Address 2179 Shoreham Road

City

Upper Arlington

State

OH

Zip Code

43220

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

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

Transaction ID: SA11AI.153638

Amount of Each Receipt this Period

38.50

SUBTOTAL of Receipts This Page (optional)

118.66

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 82 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

LESLIE H. PETERSON

Mailing Address 2179 Shoreham Road

City

Columbus

State

OH

Zip Code

43220

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH CN 8

Occupation

ACCOUNTING SUPERVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.52

Date of Receipt

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

Transaction ID: SA11AI.153796

Amount of Each Receipt this Period

70.84

B.

Full Name (Last, First, Middle Initial)

NICOLE R. POLLARD

Mailing Address 9404 Nicklaus Lane

City

Laurel

State

MD

Zip Code

20708

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSOCIATE GENERAL COUNSEL I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.55

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 1 | 5 | | 2 | 0 | 1 | 0 |

Transaction ID: SA11AI.153197

Amount of Each Receipt this Period

54.31

C.

Full Name (Last, First, Middle Initial)

NICOLE R. POLLARD

Mailing Address 9404 Nicklaus Lane

City

Laurel

State

MD

Zip Code

20708

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSOCIATE GENERAL COUNSEL I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.86

Date of Receipt

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

Transaction ID: SA11AI.153300

Amount of Each Receipt this Period

54.31

SUBTOTAL of Receipts This Page (optional)

179.46

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 83 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

GREGORY POWELL

Mailing Address 11505 Circle Drive

City

Austin

State

TX

Zip Code

78748

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME TX LOC 1624

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.153839

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

GREGORY POWELL

Mailing Address 11505 Circle Drive

City

Austin

State

TX

Zip Code

78748

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME TX LOC 1624

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 0

Transaction ID: SA11AI.153840

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)

GREGORY POWELL

Mailing Address 11505 Circle Drive

City

Austin

State

TX

Zip Code

78748

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME TX LOC 1624

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: SA11AI.153874

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 84 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

SALLY A. POWLESS

Mailing Address 2410 Westbrook Drive

City

Toledo

State

OH

Zip Code

43613-3921

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH CN 8

Occupation

LEAD STAFF ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.28

Date of Receipt

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

Transaction ID: SA11AI.153798

Amount of Each Receipt this Period

84.76

B.

Full Name (Last, First, Middle Initial)

STEVE PREBLE

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 ▼

200.92

Date of Receipt

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

Transaction ID: SA11AI.153935

Amount of Each Receipt this Period

90.46

C.

Full Name (Last, First, Middle Initial)

JANET PULLEN

Mailing Address 8003 Alcoa Drive

City

Fort Washington

State

MD

Zip Code

20744

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ADMINISTRATIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.52

Date of Receipt

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

Transaction ID: SA11AI.153302

Amount of Each Receipt this Period

33.42

SUBTOTAL of Receipts This Page (optional)

208.64

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 85 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

LLOYD L. RAINS

Mailing Address 15829 Narraganset Oval

City

Middleburg Hts

State

OH

Zip Code

44130

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11AI.153639

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

PAMELA L. RAY

Mailing Address 1625 L. Street NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

INT'L UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.20

Date of Receipt

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

Transaction ID: SA11AI.153200

Amount of Each Receipt this Period

42.44

C.

Full Name (Last, First, Middle Initial)

PAMELA L. RAY

Mailing Address 1625 L. Street NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

INT'L UNION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.64

Date of Receipt

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

Transaction ID: SA11AI.153303

Amount of Each Receipt this Period

42.44

SUBTOTAL of Receipts This Page (optional)

124.88

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 86 / 178

(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.

Full Name (Last, First, Middle Initial)

ZOLLIE RAYNER

Mailing Address P.O. Box 51

City

Albion

State

PA

Zip Code

16401

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153406

Amount of Each Receipt this Period

68.30

B.

Full Name (Last, First, Middle Initial)

TERRY M. REED

Mailing Address 2737 Yellowoak Place

City

Hilliard

State

OH

Zip Code

43026

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH CN 8

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

286.86

Date of Receipt

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

Transaction ID: SA11AI.153799

Amount of Each Receipt this Period

95.62

C.

Full Name (Last, First, Middle Initial)

DEAN REYNOLDS, III

Mailing Address 1025 Delaware Avenue

City

Crawford

State

PA

Zip Code

17740

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153407

Amount of Each Receipt this Period

68.30

SUBTOTAL of Receipts This Page (optional)

232.22

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

SHAWN E. RICHARDSON

Mailing Address 6688 Markwood Street

City

Worthington

State

OH

Zip Code

43085

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 11/STATE OF
OHIO

Occupation

TRANSPORTATION TECHN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11AI.155191

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

MICHELLE RIDER

Mailing Address 4031 Executive Park Drive

City

Harrisburg

State

PA

Zip Code

17111

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.38

Date of Receipt

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

Transaction ID: SA11AI.153409

Amount of Each Receipt this Period

83.46

C.

Full Name (Last, First, Middle Initial)

THOMAS J. RITCHIE, Sr.

Mailing Address 1644 Spaulding Road

City

Dayton

State

OH

Zip Code

45432

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH CN 8

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.61

Date of Receipt

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

Transaction ID: SA11AI.153801

Amount of Each Receipt this Period

96.87

SUBTOTAL of Receipts This Page (optional)

220.33

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 88 / 178

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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)

GLADYS RIVERA

Mailing Address P.O. Box 1414

City

Lancaster

State

PA

Zip Code

17608-1414

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13/STATE OF
PA

Occupation

INSPECTION SAFETY PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.153454

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

YVONNE T. ROBINSON

Mailing Address 501 Pulliam Street NW

City

Atlanta

State

GA

Zip Code

30312

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 ▼

222.48

Date of Receipt

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

Transaction ID: SA11AI.153304

Amount of Each Receipt this Period

37.08

C.

Full Name (Last, First, Middle Initial)

LYNN ANN RODENHUIS

Mailing Address 9135 Cowenton Avenue

City

Perry Hall

State

MD

Zip Code

21128

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.40

Date of Receipt

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

Transaction ID: SA11AI.153202

Amount of Each Receipt this Period

46.88

SUBTOTAL of Receipts This Page (optional)

183.96

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

LYNN ANN RODENHUIS

Mailing Address 9135 Cowenton Avenue

City

Perry Hall

State

MD

Zip Code

21128

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

AREA ORGANIZING DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.28

Date of Receipt

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

Transaction ID: SA11AI.153305

Amount of Each Receipt this Period

46.88

B.

Full Name (Last, First, Middle Initial)

LAWRENCE ROEHRIG

Mailing Address 13084 Lia Court

City

Lindon

State

MI

Zip Code

48451

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MI CN 25

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

686.15

Date of Receipt

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

Transaction ID: SA11AI.153687

Amount of Each Receipt this Period

109.23

C.

Full Name (Last, First, Middle Initial)

LAWRENCE ROEHRIG

Mailing Address 13084 Lia Court

City

Lindon

State

MI

Zip Code

48451

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MI CN 25

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

795.38

Date of Receipt

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

Transaction ID: SA11AI.153736

Amount of Each Receipt this Period

109.23

SUBTOTAL of Receipts This Page (optional)

265.34

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

LAWRENCE ROEHRIG

Mailing Address 13084 Lia Court

City

Lindon

State

MI

Zip Code

48451

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MI CN 25

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

865.38

Date of Receipt

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

Transaction ID: SA11AI.153877

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

CHARLES ROGINSKI

Mailing Address 6124 Crystal Valley Drive

City

Galena

State

OH

Zip Code

43021

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

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

Transaction ID: SA11AI.153640

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

JOSEPH K. ROWE

Mailing Address 34 Lakeside Drive

City

Honesdale

State

PA

Zip Code

18431

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.44

Date of Receipt

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

Transaction ID: SA11AI.153410

Amount of Each Receipt this Period

93.48

SUBTOTAL of Receipts This Page (optional)

203.48

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

JOSEPH P. RUGOLA

Mailing Address 4771 Powderhorn Lane

City

Westerville

State

OH

Zip Code

43081

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.153582

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

JOSEPH P. RUGOLA

Mailing Address 4771 Powderhorn Lane

City

Westerville

State

OH

Zip Code

43081

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

628.00

Date of Receipt

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

Transaction ID: SA11AI.153641

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

JOSEPH P. RUGOLA

Mailing Address 4771 Powderhorn Lane

City

Westerville

State

OH

Zip Code

43081

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

642.00

Date of Receipt

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

Transaction ID: SA11AI.153878

Amount of Each Receipt this Period

14.00

SUBTOTAL of Receipts This Page (optional)

214.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

GEORGE SACHARIAN

Mailing Address 126 S. Lynn Blvd.

City

Upper Darby

State

PA

Zip Code

19082

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153411

Amount of Each Receipt this Period

68.30

B.

Full Name (Last, First, Middle Initial)

WILLIAM SAMS

Mailing Address 17 South Plains Road

City

The Plains

State

OH

Zip Code

45780

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.28

Date of Receipt

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

Transaction ID: SA11AI.153803

Amount of Each Receipt this Period

84.76

C.

Full Name (Last, First, Middle Initial)

MARIANNE SAUNDERS

Mailing Address 48 Mullen Street

City

Uniontown

State

PA

Zip Code

15401-4060

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153412

Amount of Each Receipt this Period

68.30

SUBTOTAL of Receipts This Page (optional)

221.36

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

ALBERT SCHNAUFER

Mailing Address 400 South Flower
#65

City State Zip Code
Orange CA 92868

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME CA CN 36

Occupation
BUSINESS REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.44

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.153838

Amount of Each Receipt this Period

70.24

B.

Full Name (Last, First, Middle Initial)

MARY SCHWANGER

Mailing Address 419 Valley Street

City State Zip Code
Marysville PA 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 ▼

330.42

Date of Receipt

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

Transaction ID: SA11AI.153415

Amount of Each Receipt this Period

110.14

C.

Full Name (Last, First, Middle Initial)

SHELLEY K. SEEBERG

Mailing Address 13096 Charlston Way

City State Zip Code
Rosemount MN 55068

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation
AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.20

Date of Receipt

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

Transaction ID: SA11AI.153204

Amount of Each Receipt this Period

42.44

SUBTOTAL of Receipts This Page (optional)

222.82

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

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

A.

Full Name (Last, First, Middle Initial)

SHELLEY K. SEEBERG

Mailing Address 13096 Charlston Way

City

Rosemount

State

MN

Zip Code

55068

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.64

Date of Receipt

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

Transaction ID: SA11AI.153307

Amount of Each Receipt this Period

42.44

B.

Full Name (Last, First, Middle Initial)

ELIOT A. SEIDE

Mailing Address 300 Hardman Avenue South

City

South St. Paul

State

MN

Zip Code

55075

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.46

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.155322

Amount of Each Receipt this Period

92.82

C.

Full Name (Last, First, Middle Initial)

ELIOT A. SEIDE

Mailing Address 300 Hardman Avenue South

City

South St. Paul

State

MN

Zip Code

55075

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.46

Date of Receipt

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

Transaction ID: SA11AI.155836

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

155.26

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

ELIOT A. SEIDE

Mailing Address 300 Hardman Avenue South

City

South St. Paul

State

MN

Zip Code

55075

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.46

Date of Receipt

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

Transaction ID: SA11AI.153880

Amount of Each Receipt this Period

14.00

B.

Full Name (Last, First, Middle Initial)

DOMINIC SGRO

Mailing Address 144 Stormer Road

City

Indiana

State

PA

Zip Code

15701-0144

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.42

Date of Receipt

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

Transaction ID: SA11AI.153416

Amount of Each Receipt this Period

110.14

C.

Full Name (Last, First, Middle Initial)

TIMOTHY P. SHAFER

Mailing Address P. O. Box 322

City

Waverly

State

OH

Zip Code

45690

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 11

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.155289

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

174.14

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

DONALD G. SHAFFER

Mailing Address R. D. #5, Box 82

City

Brookeville

State

PA

Zip Code

15825-9501

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153417

Amount of Each Receipt this Period

68.30

B.

Full Name (Last, First, Middle Initial)

JASON T. SIDENER

Mailing Address 5583 Bantry Lane
#1

City

Madison

State

WI

Zip Code

53717

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WI CN 40

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: SA11AI.153996

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)

ROBERTA J. SKOK

Mailing Address 775 Township Road
#2204

City

Perrysville

State

OH

Zip Code

44864

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH CN 8

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.28

Date of Receipt

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

Transaction ID: SA11AI.153807

Amount of Each Receipt this Period

84.76

SUBTOTAL of Receipts This Page (optional)

208.06

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)
BETTY SMITH

Mailing Address 19292 Archer

City State Zip Code
Detroit MI 48219

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MI CN 25

Occupation
ASSISTANT TO THE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.94

Date of Receipt

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

Transaction ID: SA11AI.153741

Amount of Each Receipt this Period

33.99

B.

Full Name (Last, First, Middle Initial)
SHARON SOBER

Mailing Address 212 5th Street

City State Zip Code
Catawissa PA 17820

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.42

Date of Receipt

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

Transaction ID: SA11AI.153420

Amount of Each Receipt this Period

110.14

C.

Full Name (Last, First, Middle Initial)
DARRIN SPANN

Mailing Address 6130 Springford Drive
#C6

City State Zip Code
Harrisburg PA 17111

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.46

Date of Receipt

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

Transaction ID: SA11AI.153421

Amount of Each Receipt this Period

90.82

SUBTOTAL of Receipts This Page (optional)

234.95

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

BEVERLY J. SPETZ

Mailing Address 112 Elmwood Street

City

Delta

State

OH

Zip Code

43515

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation

ORGANIZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.88

Date of Receipt

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

Transaction ID: SA11AI.153644

Amount of Each Receipt this Period

38.48

B.

Full Name (Last, First, Middle Initial)

KAMALA B. SRIKAR

Mailing Address 9908 Colebrook Avenue

City

Potomac

State

MD

Zip Code

20854

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

MANAGER, CONFERENCE & TRAVEL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.34

Date of Receipt

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

Transaction ID: SA11AI.153206

Amount of Each Receipt this Period

44.42

C.

Full Name (Last, First, Middle Initial)

KAMALA B. SRIKAR

Mailing Address 9908 Colebrook Avenue

City

Potomac

State

MD

Zip Code

20854

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

MANAGER, CONFERENCE & TRAVEL SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.76

Date of Receipt

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

Transaction ID: SA11AI.153309

Amount of Each Receipt this Period

44.42

SUBTOTAL of Receipts This Page (optional)

127.32

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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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)

MARIANNE STEGER

Mailing Address 2930 Woodson Drive

City

Hilliard

State

OH

Zip Code

43026-1925

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH CN 8

Occupation

DIRECTOR OF ADMINISTRATIVE SERVICES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.92

Date of Receipt

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

Transaction ID: SA11AI.153810

Amount of Each Receipt this Period

86.64

B.

Full Name (Last, First, Middle Initial)

MARSHALL K. STENERSEN

Mailing Address 16 E 5th Street

City

Duluth

State

MN

Zip Code

55805

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.04

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.155323

Amount of Each Receipt this Period

68.40

C.

Full Name (Last, First, Middle Initial)

MARSHALL K. STENERSEN

Mailing Address 16 E 5th Street

City

Duluth

State

MN

Zip Code

55805

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.04

Date of Receipt

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

Transaction ID: SA11AI.155877

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

175.04

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

MITCHELL STILLE

Mailing Address 4320 NW Second Avenue

City

Des Moines

State

IA

Zip Code

50313

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME IA CN 61

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.153894

Amount of Each Receipt this Period

84.00

B.

Full Name (Last, First, Middle Initial)

WILLIAM STOUFFER

Mailing Address 29B - 2nd Street

City

North Irwin

State

PA

Zip Code

15642

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153422

Amount of Each Receipt this Period

68.30

C.

Full Name (Last, First, Middle Initial)

TIMOTHY J. STRECKER

Mailing Address 1603 E Street, SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

PROJECT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.85

Date of Receipt

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

Transaction ID: SA11AI.153209

Amount of Each Receipt this Period

48.17

SUBTOTAL of Receipts This Page (optional)

200.47

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)
TIMOTHY J. STRECKER

Mailing Address 1603 E Street, SE

City State Zip Code
Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation
PROJECT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.02

Date of Receipt

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

Transaction ID: SA11AI.153312

Amount of Each Receipt this Period

48.17

B.

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

Mailing Address 61 Woodside Drive

City State Zip Code
Albany NY 12208-1157

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

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

Transaction ID: SA11AI.153841

Amount of Each Receipt this Period

25.00

C.

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

Mailing Address 61 Woodside Drive

City State Zip Code
Albany NY 12208-1157

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 ▼

350.00

Date of Receipt

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

Transaction ID: SA11AI.153842

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

98.17

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

MARY E. SULLIVAN

Mailing Address 61 Woodside Drive

City

Albany

State

NY

Zip Code

12208-1157

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME NY LOC 1000

Occupation

EXECUTIVE VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

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

Transaction ID: SA11AI.153843

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

MARY E. SULLIVAN

Mailing Address 61 Woodside Drive

City

Albany

State

NY

Zip Code

12208-1157

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME NY LOC 1000

Occupation

EXECUTIVE VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

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

Transaction ID: SA11AI.153881

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

YVONNE J. SYPHAX

Mailing Address 1625 L. Street, NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.15

Date of Receipt

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

Transaction ID: SA11AI.153212

Amount of Each Receipt this Period

45.63

SUBTOTAL of Receipts This Page (optional)

170.63

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

YVONNE J. SYPHAX

Mailing Address 1625 L. Street, NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.78

Date of Receipt

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

Transaction ID: SA11AI.153315

Amount of Each Receipt this Period

45.63

B.

Full Name (Last, First, Middle Initial)

JEFFREY M. TAGGART

Mailing Address 12001 Market Street
Unit 450

City

Reston

State

VA

Zip Code

20190

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, ACCOUNTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

536.70

Date of Receipt

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

Transaction ID: SA11AI.153213

Amount of Each Receipt this Period

107.34

C.

Full Name (Last, First, Middle Initial)

JEFFREY M. TAGGART

Mailing Address 12001 Market Street
Unit 450

City

Reston

State

VA

Zip Code

20190

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSOCIATE DIRECTOR, ACCOUNTING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

644.04

Date of Receipt

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

Transaction ID: SA11AI.153316

Amount of Each Receipt this Period

107.34

SUBTOTAL of Receipts This Page (optional)

260.31

TOTAL This Period (last page this line number only)

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

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

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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)

MOHAMMED TEHRANI

Mailing Address 1424 Wakeforest Drive

City

Gaithersburg

State

MD

Zip Code

20879

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.70

Date of Receipt

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

Transaction ID: SA11AI.153214

Amount of Each Receipt this Period

43.23

B.

Full Name (Last, First, Middle Initial)

MOHAMMED TEHRANI

Mailing Address 1424 Wakeforest Drive

City

Gaithersburg

State

MD

Zip Code

20879

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.93

Date of Receipt

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

Transaction ID: SA11AI.153317

Amount of Each Receipt this Period

43.23

C.

Full Name (Last, First, Middle Initial)

ROBERT L. THOMPSON

Mailing Address 927 Gibbs Avenue, NE

City

Canton

State

OH

Zip Code

44705-1074

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH CN 8

Occupation

REGIONAL DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.28

Date of Receipt

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

Transaction ID: SA11AI.153815

Amount of Each Receipt this Period

84.76

SUBTOTAL of Receipts This Page (optional)

171.22

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

JOHN THORSON

Mailing Address 555 Selby Avenue

City

Saint Paul

State

MN

Zip Code

55102

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14

Occupation

POLITICAL ACTION REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.18

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.155324

Amount of Each Receipt this Period

71.14

B.

Full Name (Last, First, Middle Initial)

LEIGH TOMLINSON

Mailing Address 930 Stag Thicket Lane

City

Mason

State

MI

Zip Code

48854-1400

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MI CN 25

Occupation

ACCTG. /HUMAN RESOURCE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.60

Date of Receipt

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

Transaction ID: SA11AI.153745

Amount of Each Receipt this Period

39.10

C.

Full Name (Last, First, Middle Initial)

DOROTHY TOWNSEND

Mailing Address 6837 SW 39th Drive

City

Miramar

State

FL

Zip Code

33023

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.10

Date of Receipt

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

Transaction ID: SA11AI.153215

Amount of Each Receipt this Period

44.42

SUBTOTAL of Receipts This Page (optional)

154.66

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)
DOROTHY TOWNSEND

Mailing Address 6837 SW 39th Drive

City State Zip Code
Miramar FL 33023

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation
AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.52

Date of Receipt

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

Transaction ID: SA11AI.153318

Amount of Each Receipt this Period

44.42

B.

Full Name (Last, First, Middle Initial)
KAREN VALENTINE

Mailing Address 154 Stoney Drive

City State Zip Code
Dover DE 19904

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME DE CN 81

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.82

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.153902

Amount of Each Receipt this Period

134.87

C.

Full Name (Last, First, Middle Initial)
DAVID WARRICK

Mailing Address 2638 Jay Court

City State Zip Code
Indianapolis IN 46229

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME IN CN 62

Occupation
EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

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

Transaction ID: SA11AI.153888

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)

239.29

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

DAVID WARRICK

Mailing Address 2638 Jay Court

City

Indianapolis

State

IN

Zip Code

46229

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME IN CN 62

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: SA11AI.153889

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

DAVID WARRICK

Mailing Address 2638 Jay Court

City

Indianapolis

State

IN

Zip Code

46229

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME IN CN 62

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

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

Transaction ID: SA11AI.153884

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

FRANK W. WASHINGTON

Mailing Address 1713 Crimson Place

City

Mitchellville

State

MD

Zip Code

20721

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

SPECIAL AIDE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.86

Date of Receipt

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

Transaction ID: SA11AI.153320

Amount of Each Receipt this Period

36.81

SUBTOTAL of Receipts This Page (optional)

136.81

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

JANA WEAVER

Mailing Address 451 London Road

City

Deerfield

State

WI

Zip Code

53531

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME WI CN 24

Occupation

ASSISTANT DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.18

Date of Receipt

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

Transaction ID: SA11AI.154217

Amount of Each Receipt this Period

69.06

B.

Full Name (Last, First, Middle Initial)

BRIAN V. WEEKS

Mailing Address 8033 Exceisior Drive
Apt. A

City

Madison

State

WI

Zip Code

53717

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

POLITICAL ACTION COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.10

Date of Receipt

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

Transaction ID: SA11AI.153218

Amount of Each Receipt this Period

44.42

C.

Full Name (Last, First, Middle Initial)

BRIAN V. WEEKS

Mailing Address 8033 Exceisior Drive
Apt. A

City

Madison

State

WI

Zip Code

53717

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

POLITICAL ACTION COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.52

Date of Receipt

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

Transaction ID: SA11AI.153321

Amount of Each Receipt this Period

44.42

SUBTOTAL of Receipts This Page (optional)

157.90

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 109 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

SUSAN R. WELSH

Mailing Address 4909 Rees Lane

City

Bowie

State

MD

Zip Code

20715

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ADVANTAGE COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.20

Date of Receipt

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

Transaction ID: SA11AI.153219

Amount of Each Receipt this Period

42.44

B.

Full Name (Last, First, Middle Initial)

SUSAN R. WELSH

Mailing Address 4909 Rees Lane

City

Bowie

State

MD

Zip Code

20715

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ADVANTAGE COORDINATOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.64

Date of Receipt

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

Transaction ID: SA11AI.153322

Amount of Each Receipt this Period

42.44

C.

Full Name (Last, First, Middle Initial)

JOHN P. WESTMORELAND

Mailing Address 4678 West Road

City

Moose Lake

State

MN

Zip Code

55767

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14

Occupation

BUSINESS AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.56

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.155326

Amount of Each Receipt this Period

72.28

SUBTOTAL of Receipts This Page (optional)

157.16

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

JOHN P. WESTMORELAND

Mailing Address 4678 West Road

City

Moose Lake

State

MN

Zip Code

55767

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/CN14

Occupation

BUSINESS AGENT

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

234.56

Date of Receipt

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

Transaction ID: SA11AI.155925

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)

JAMES R. WESTON

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

DIRECTOR, POLITICAL ACTION

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 0 | 8 | / | 2 | 0 | 1 | 0 |

Transaction ID: SA11AI.153590

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

JAMES R. WESTON

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

DIRECTOR, POLITICAL ACTION

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.153649

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

YVONNE F. WHEELER

Mailing Address 1625 L. Street, NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.05

Date of Receipt

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

Transaction ID: SA11AI.153220

Amount of Each Receipt this Period

43.61

B.

Full Name (Last, First, Middle Initial)

YVONNE F. WHEELER

Mailing Address 1625 L. Street, NW

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

AREA FIELD SERVICES DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.66

Date of Receipt

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

Transaction ID: SA11AI.153323

Amount of Each Receipt this Period

43.61

C.

Full Name (Last, First, Middle Initial)

BRYCE WICKSTROM

Mailing Address 1267 Matilda Street

City

St. Paul

State

MN

Zip Code

55117-4473

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MN CN 5/STATE OF
MN

Occupation

RECORDING SECRETARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.155386

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

187.22

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 112 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

GUY WIEDERHOLD

Mailing Address 906 Laurel Boulevard

City

Pottsville

State

PA

Zip Code

17901-2324

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153431

Amount of Each Receipt this Period

68.30

B.

Full Name (Last, First, Middle Initial)

WILLIAM WILKINSON

Mailing Address 5272 Bradgen Court

City

Springfield

State

VA

Zip Code

22151

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, RESEARCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.85

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 1 | 5 | / | 2 | 0 | 1 | 0 |

Transaction ID: SA11AI.153222

Amount of Each Receipt this Period

48.17

C.

Full Name (Last, First, Middle Initial)

WILLIAM WILKINSON

Mailing Address 5272 Bradgen Court

City

Springfield

State

VA

Zip Code

22151

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ASSISTANT DIRECTOR, RESEARCH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

289.02

Date of Receipt

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

Transaction ID: SA11AI.153325

Amount of Each Receipt this Period

48.17

SUBTOTAL of Receipts This Page (optional)

164.64

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)

MARION L. WILLIAMS

Mailing Address 12904 Clearfield Drive

City

Bowie

State

MD

Zip Code

20715

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

ADMINISTRATIVE ASSISTANT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.52

Date of Receipt

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

Transaction ID: SA11AI.153326

Amount of Each Receipt this Period

35.42

B.

Full Name (Last, First, Middle Initial)

MICHAEL B. WILLIAMS

Mailing Address 6800 Fleetwood Rd.
Apt. #1118

City

McLean

State

VA

Zip Code

22101

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

SPECIAL ASST. TO SECY-TREASURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.40

Date of Receipt

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

Transaction ID: SA11AI.153224

Amount of Each Receipt this Period

43.08

C.

Full Name (Last, First, Middle Initial)

MICHAEL B. WILLIAMS

Mailing Address 6800 Fleetwood Rd.
Apt. #1118

City

McLean

State

VA

Zip Code

22101

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME INT'L

Occupation

SPECIAL ASST. TO SECY-TREASURER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.48

Date of Receipt

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

Transaction ID: SA11AI.153327

Amount of Each Receipt this Period

43.08

SUBTOTAL of Receipts This Page (optional)

121.58

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)
SAUNDRA WILLIAMS

Mailing Address 16218 Braile

City State Zip Code
Detroit MI 48219-4727

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MI CN 25

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.25

Date of Receipt

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

Transaction ID: SA11AI.153699

Amount of Each Receipt this Period

41.25

B.

Full Name (Last, First, Middle Initial)
SAUNDRA WILLIAMS

Mailing Address 16218 Braile

City State Zip Code
Detroit MI 48219-4727

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME MI CN 25

Occupation
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.50

Date of Receipt

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

Transaction ID: SA11AI.153748

Amount of Each Receipt this Period

41.25

C.

Full Name (Last, First, Middle Initial)
ALLAN WINEY

Mailing Address 765 Mount Airy Road

City State Zip Code
Lewisburg PA 17339

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation
ASSISTANT BUSINESS MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.84

Date of Receipt

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

Transaction ID: SA11AI.153432

Amount of Each Receipt this Period

101.28

SUBTOTAL of Receipts This Page (optional)

183.78

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

MARY BETH WISHON

Mailing Address 5823 Mink Street

City

Pataskala

State

OH

Zip Code

43062

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 4

Occupation

FIELD REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

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

Transaction ID: SA11AI.153651

Amount of Each Receipt this Period

38.50

B.

Full Name (Last, First, Middle Initial)

KRISTIE WOLF-MALONEY

Mailing Address 4923C Haverford Road

City

Harrisburg

State

PA

Zip Code

17109

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME PA CN 13

Occupation

STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.90

Date of Receipt

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

Transaction ID: SA11AI.153433

Amount of Each Receipt this Period

68.30

C.

Full Name (Last, First, Middle Initial)

BRUCE WYNGAARD

Mailing Address 1310 Hunter Avenue

City

Columbus

State

OH

Zip Code

43201

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 11

Occupation

OPERATIONS DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.70

Date of Receipt

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

Transaction ID: SA11AI.155269

Amount of Each Receipt this Period

66.20

SUBTOTAL of Receipts This Page (optional)

173.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 116 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

BRUCE WYNGAARD

Mailing Address 1310 Hunter Avenue

City

Columbus

State

OH

Zip Code

43201

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME OH LOC 11

Occupation

OPERATIONS DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.90

Date of Receipt

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

Transaction ID: SA11AI.155291

Amount of Each Receipt this Period

66.20

B.

Full Name (Last, First, Middle Initial)

JEANETTE WYNN

Mailing Address 1642 W. MLK Blvd

City

Quicny

State

FL

Zip Code

32351

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME FL CN 79

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.68

Date of Receipt

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

Transaction ID: SA11AI.153887

Amount of Each Receipt this Period

77.56

C.

Full Name (Last, First, Middle Initial)

JEANETTE WYNN

Mailing Address 1642 W. MLK Blvd

City

Quicny

State

FL

Zip Code

32351

FEC ID number of contributing
federal political committee.

C

Name of Employer
AFSCME FL CN 79

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.68

Date of Receipt

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

Transaction ID: SA11AI.153885

Amount of Each Receipt this Period

14.00

SUBTOTAL of Receipts This Page (optional)

157.76

TOTAL This Period (last page this line number only)

21036.00

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

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

FOR LINE NUMBER: PAGE 117 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

DISTRICT COUNCIL 37-AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY

Mailing Address 125 Barclay Street

City

New York

State

NY

Zip Code

10007

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

104170.75

Date of Receipt

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

Transaction ID: SA12.153112

Amount of Each Receipt this Period

8111.67

Transfer

SUBTOTAL of Receipts This Page (optional)

8111.67

TOTAL This Period (last page this line number only)

8111.67

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

FOR LINE NUMBER: PAGE 118 / 178

(check only one)

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

THE CAMPAIGN GROUP

Mailing Address 1600 Locust Street

City

Philadelphia

State

PA

Zip Code

19103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐
☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

85.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 1 | 9 | | 2 | 0 | 1 | 0 |

Transaction ID: SA15.153110

Amount of Each Receipt this Period

85.00

Refund

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

85.00

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

FOR LINE NUMBER: PAGE 119 / 178

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

AMALGAMATED BANK

Mailing Address 275 7th Avenue

City

New York

State

NY

Zip Code

10001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1250.41

Date of Receipt

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

Transaction ID: SA17.153111

Amount of Each Receipt this Period

534.29

Interest Income 3/31/10

SUBTOTAL of Receipts This Page (optional)

534.29

TOTAL This Period (last page this line number only)

534.29

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)

PAGE 120 / 178

| | | | | | |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

A.

Full Name (Last, First, Middle Initial)

AMALGAMATED BANK

Mailing Address 275 7th Avenue

City
New York

State
NY

Zip Code
10001

Purpose of Disbursement
Bank Fees/Returned checks

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.153113

Date of Disbursement

03 / 17 / 2010

Amount of Each Disbursement this Period

20.00

B.

Full Name (Last, First, Middle Initial)

AMALGAMATED BANK

Mailing Address 275 7th Avenue

City
New York

State
NY

Zip Code
10001

Purpose of Disbursement
Bank Fees/Returned check

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.153114

Date of Disbursement

03 / 19 / 2010

Amount of Each Disbursement this Period

10.00

C.

Full Name (Last, First, Middle Initial)

AMERICAN EXPRESS

Mailing Address P.O. Box 53852

City
Phoenix

State
AZ

Zip Code
85072-3852

Purpose of Disbursement
Merchant Service Charges 3/15/10

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.153115

Date of Disbursement

03 / 15 / 2010

Amount of Each Disbursement this Period

8.62

SUBTOTAL of Disbursements This Page (optional)

38.62

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 121 / 178

| | | | | | |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

| | | | | | | | | | | | | | | | | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS | Transaction ID: SB21B.153116 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address P.O. Box 53852 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 1 | 8 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 1 | 8 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Phoenix State AZ Zip Code 85072-3852 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Merchant Service Charges 3/18/10 Candidate Name | <table border="1"> <tr> <td colspan="10">2.59</td> </tr> </table> | 2.59 | | | | | | | | | | | | | | | | | | | |
| 2.59 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS | Transaction ID: SB21B.153117 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address P.O. Box 53852 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 1 | 9 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 1 | 9 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Phoenix State AZ Zip Code 85072-3852 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Merchant Service Charges 3/19/10 Candidate Name | <table border="1"> <tr> <td colspan="10">2.59</td> </tr> </table> | 2.59 | | | | | | | | | | | | | | | | | | | |
| 2.59 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) BART GROUP | Transaction ID: SB21B.153118 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 171 Main Street | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 0 | 4 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 0 | 4 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Port Washington State NY Zip Code 11050 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Merchant Service Charges 3/4/10 Candidate Name | <table border="1"> <tr> <td colspan="10">80.40</td> </tr> </table> | 80.40 | | | | | | | | | | | | | | | | | | | |
| 80.40 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

85.58

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 122 / 178

| | | | | | |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

A.

Full Name (Last, First, Middle Initial)

DC TREASURER

Mailing Address P.O. Box 679

City
Washington

State
DC

Zip Code
20044-0679

Purpose of Disbursement
Income Taxes Paid

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.153121

Date of Disbursement

03 / 08 / 2010

Amount of Each Disbursement this Period

484.00

B.

Full Name (Last, First, Middle Initial)

US TREASURY

Mailing Address Internal Revenue Service Center

City
Ogden

State
UT

Zip Code
84201-0027

Purpose of Disbursement
Income Taxes Paid

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.153120

Date of Disbursement

03 / 08 / 2010

Amount of Each Disbursement this Period

1507.00

SUBTOTAL of Disbursements This Page (optional)

1991.00

TOTAL This Period (last page this line number only)

2115.20

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

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

FOR LINE NUMBER:
(check only one)

PAGE 123 / 178

| | | | | | |
|------------------------------|----------------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

A. Full Name (Last, First, Middle Initial)
AFSCME PEOPLE- Non Federal Account

Mailing Address 1625 L Street NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Tfr non-fed acct for non-fed activity

Candidate Name

008
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB22.153122

Date of Disbursement

MM / DD / YYYY
03 / 09 / 2010

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

500.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 124 / 178

| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

A.

Full Name (Last, First, Middle Initial)

AFL-CIO COPE PCC

Mailing Address 815 16th Street NW

City
Washington

State
DC

Zip Code
20006

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

PAC

Transaction ID: SB23.152937

Date of Disbursement

03 / 09 / 2010

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

ALAN MOLLOHAN FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 1343

City
Fairmont

State
WV

Zip Code
26554-1343

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: WV District: 01

Transaction ID: SB23.153067

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

4000.00

C.

Full Name (Last, First, Middle Initial)

AMERICA WORKS COMMITTEE

Mailing Address 607 14th Street NW
Suite 800

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

PAC

Transaction ID: SB23.152941

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

11500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 125 / 178

| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

A. Full Name (Last, First, Middle Initial)
AMERIPAC: THE FUND FOR A GREATER AMERICA

Mailing Address 607 14th Street NW
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District: Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼ PAC

Transaction ID: SB23.152939

Date of Disbursement

03 / 22 / 2010

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
ANDRE CARSON FOR CONGRESS

Mailing Address 2527 N. Alabama Street

City Indianapolis State IN Zip Code 46205

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
State: IN District: 07 Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153071

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
ANDREWS FOR CONGRESS

Mailing Address P.O. Box 295

City Oaklyn State NJ Zip Code 08107

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
State: NJ District: 01 Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.153016

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

| | | | | | | | | | | | |
|--|-----|--|-----|---|-----|--|-----|--|----|--|-----|
| | 21b | | 22 | X | 23 | | 24 | | 25 | | 26 |
| | 27 | | 28a | | 28b | | 28c | | 29 | | 30b |

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

1000.00

1000.00

1000.00

FEC Schedule B (Form 3X) (Revised 02/2003)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 127 / 178

| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

| | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) BARBARA LEE FOR CONGRESS</p> <p>Mailing Address 1736 Franklin Street Suite 550</p> <p>City Oakland State CA Zip Code 94612</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 09</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB23.153044</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) BECERRA FOR CONGRESS</p> <p>Mailing Address P.O. Box 261060</p> <p>City Los Angeles State CA Zip Code 90026</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 31</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB23.152991</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) BENNET FOR COLORADO</p> <p>Mailing Address P.O. Box 3078</p> <p>City Denver State CO Zip Code 80201</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB23.152956</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p> |

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

| | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A. Full Name (Last, First, Middle Initial) BERA FOR CONGRESS Mailing Address P.O. Box 582496 | Transaction ID: SB23.152973 Date of Disbursement <div> <div>03</div> <div>23</div> <div>2010</div> </div> |
| City Elk Grove State CA Zip Code 95758 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 03 | Amount of Each Disbursement this Period <div>3000.00</div> <div>011</div> Category/Type |
| B. Full Name (Last, First, Middle Initial) BERKLEY FOR CONGRESS Mailing Address 7500 W. Lake Mead Blvd. Box 9-306 City Las Vegas State NV Zip Code 89128 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NV District: 01 | Transaction ID: SB23.153088 Date of Disbursement <div> <div>03</div> <div>29</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>1000.00</div> <div>011</div> Category/Type |
| C. Full Name (Last, First, Middle Initial) BERMAN FOR CONGRESS Mailing Address 6380 Wilshire Blvd. #1612 City Los Angeles State CA Zip Code 90048 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 28 | Transaction ID: SB23.153077 Date of Disbursement <div> <div>03</div> <div>29</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>1000.00</div> <div>011</div> Category/Type |

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

| | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) BETTY SUTTON FOR CONGRESS</p> <p>Mailing Address 1700 West Market #155</p> <p>City Akron State OH Zip Code 44313</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 13</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB23.153007</p> <p>Date of Disbursement 03 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) BETTY SUTTON FOR CONGRESS</p> <p>Mailing Address 1700 West Market #155</p> <p>City Akron State OH Zip Code 44313</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 13</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB23.153046</p> <p>Date of Disbursement 03 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) BILL OWENS FOR CONGRESS</p> <p>Mailing Address P.O. Box 1575</p> <p>City Plattsburgh State NY Zip Code 12901</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB23.152988</p> <p>Date of Disbursement 03 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p> |

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

BLUMENTHAL FOR SENATE

Mailing Address 777 Summmer Street

City State Zip Code
Stamford CT 06901

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
State: CT District: 00
Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼
Convention

Transaction ID: SB23.152954

Date of Disbursement

03 / 23 / 2010

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

BOB BRADY FOR CONGRESS

Mailing Address P.O. Box 22471

City State Zip Code
Philadelphia PA 19110-2471

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
State: PA District: 01
Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153066

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

3000.00

C.

Full Name (Last, First, Middle Initial)

BOB ETHERIDGE FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 28001

City State Zip Code
Raleigh NC 27611

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
State: NC District: 02
Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153037

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

BORN FIGHTING PAC

Mailing Address 426 C Street NE

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

PAC

Transaction ID: SB23.152936

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

BOYD FOR CONGRESS

Mailing Address P.O. Box 15703

City
Tallahassee

State
FL

Zip Code
32317-5703

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 02

Transaction ID: SB23.153070

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

BRAD MILLER CONGRESSIONAL CAMPAIGN

Mailing Address P.O. Box 10322

City
Raleigh

State
NC

Zip Code
27605

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 13

Transaction ID: SB23.153083

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

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

PAGE 132 / 178

| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

A.

Full Name (Last, First, Middle Initial)

BRALEY FOR CONGRESS

Mailing Address P.O. Box 390

City
WaterlooState
IAZip Code
50704Purpose of Disbursement
Contribution

Candidate Name

011

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IA District: 01

Transaction ID: SB23.153081

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 9 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

BRIAN HIGGINS FOR CONGRESS

Mailing Address P.O. Box 28

City
BuffaloState
NYZip Code
14220Purpose of Disbursement
Contribution

Candidate Name

011

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 27

Transaction ID: SB23.153093

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 9 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

BRIDGE PAC

Mailing Address 499 S. Capitol Street SW
Suite 412City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

Candidate Name

011

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: PAC

Transaction ID: SB23.152945

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

A. BUTTERFIELD FOR CONGRESS

Full Name (Last, First, Middle Initial)

BUTTERFIELD FOR CONGRESS

Mailing Address P.O. Box 2571

City
Wilson

State
NC

Zip Code
27894

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 01

Transaction ID: SB23.153082

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

B. CAPUANO FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

CAPUANO FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 440305

City
Somerville

State
MA

Zip Code
02144

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 08

Transaction ID: SB23.153036

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

C. CEDRIC RICHMOND FOR CONGRESS

Full Name (Last, First, Middle Initial)

CEDRIC RICHMOND FOR CONGRESS

Mailing Address 1631 Elysian Fields Avenue

City
New Orleans

State
LA

Zip Code
70117

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District: 02

Transaction ID: SB23.153060

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

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

PAGE 134 / 178

| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

A.

Full Name (Last, First, Middle Initial)

CHC/BOLD PAC

Mailing Address 1831 Bay Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
 Disbursement For: 2010 ☐ Primary ☐ General
☒ Other (specify) ▼
 State: District: PAC

Transaction ID: SB23.152948

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 9 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

CITIZENS FOR ARLEN SPECTER

Mailing Address 255 S. 17th Street
Suite 603

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
 Disbursement For: 2010 ☐ Primary ☒ General
☐ Other (specify) ▼
 State: PA District: 00

Transaction ID: SB23.152960

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

CITIZENS TO ELECT RICK LARSEN

Mailing Address P.O. Box 326

City Everett State WA Zip Code 98206

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
 Disbursement For: 2010 ☒ Primary ☐ General
☐ Other (specify) ▼
 State: WA District: 02

Transaction ID: SB23.153043

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

| | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| A. Full Name (Last, First, Middle Initial) CLAY, JR. FOR CONGRESS | Transaction ID: SB23.153059 Date of Disbursement |
| Mailing Address P.O. Box 4544 | <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 1 0</div> </div> |
| City Saint Louis State MO Zip Code 63108 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Contribution Candidate Name | <div> <div>2500.00</div> <div>011 Category/ Type</div> </div> |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 01 | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT CHRIS MURPHY | Transaction ID: SB23.153000 Date of Disbursement |
| Mailing Address P.O. Box 127 | <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 1 0</div> </div> |
| City Cheshire State CT Zip Code 06410 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Contribution Candidate Name | <div> <div>5000.00</div> <div>011 Category/ Type</div> </div> |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 05 | Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT GARY L. ACKERMAN | Transaction ID: SB23.153023 Date of Disbursement |
| Mailing Address P.O. Box 95 | <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 1 0</div> </div> |
| City Flushing Meadows State NY Zip Code 11365 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Contribution Candidate Name | <div> <div>1000.00</div> <div>011 Category/ Type</div> </div> |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 05 | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

A. Full Name (Last, First, Middle Initial)
COMMITTEE TO RE-ELECT LINDA SANCHEZ

Mailing Address P.O. Box 6162

City Lakewood State CA Zip Code 90714

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
 Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼
 State: CA District: 39

Transaction ID: SB23.152993

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
COMMITTEE TO RE-ELECT LORETTA SANCHEZ

Mailing Address 604 S. Harbor Blvd.

City Santa Ana State CA Zip Code 92704

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
 Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼
 State: CA District: 47

Transaction ID: SB23.153003

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
COMMITTEE TO RE-ELECT NYDIA M. VELAZQUEZ

Mailing Address 315 Inspiration Lane

City Gaithersburg State MD Zip Code 20878

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
 Disbursement For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼
 State: NY District: 12

Transaction ID: SB23.153090

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)

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

| | | | | | | | | | | | | | | | | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) CONGRESSIONAL BLACK CAUCUS - PAC | Transaction ID: SB23.152951 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 227 Massachusetts Avenue NW | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 2 | 9 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 9 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Washington State DC Zip Code 20002 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution | <table border="1"> <tr> <td>5000.00</td> </tr> </table> | 5000.00 | | | | | | | | | | | | | | | | | | | |
| 5000.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | <table border="1"> <tr> <td>011</td> </tr> </table> Category/Type | 011 | | | | | | | | | | | | | | | | | | | |
| 011 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ PAC | | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) COURTNEY FOR CONGRESS | Transaction ID: SB23.153004 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address P.O. Box 1372 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Vernon State CT Zip Code 06066 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution | <table border="1"> <tr> <td>5000.00</td> </tr> </table> | 5000.00 | | | | | | | | | | | | | | | | | | | |
| 5000.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | <table border="1"> <tr> <td>011</td> </tr> </table> Category/Type | 011 | | | | | | | | | | | | | | | | | | | |
| 011 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) CROWLEY FOR CONGRESS | Transaction ID: SB23.153024 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 84-56 Grand Avenue | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Elmhurst State NY Zip Code 11373 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution | <table border="1"> <tr> <td>1000.00</td> </tr> </table> | 1000.00 | | | | | | | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | <table border="1"> <tr> <td>011</td> </tr> </table> Category/Type | 011 | | | | | | | | | | | | | | | | | | | |
| 011 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 07 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

| | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| A. Full Name (Last, First, Middle Initial) CUMMINGS FOR CONGRESS | Transaction ID: SB23.153021 Date of Disbursement |
| Mailing Address 2901 Druid Park Drive Suite 203 | <div> <div>MM / DD / YY</div> <div>03 / 26 / 2010</div> </div> |
| City Baltimore State MD Zip Code 21215 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Contribution Candidate Name | <div> <div>1000.00</div> <div>011</div> <div>Category/Type</div> </div> |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 07 | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) DAN SEALS FOR CONGRESS | Transaction ID: SB23.152977 Date of Disbursement |
| Mailing Address P.O. Box 584 | <div> <div>MM / DD / YY</div> <div>03 / 23 / 2010</div> </div> |
| City Wilmette State IL Zip Code 60091 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Contribution - (Debt) Candidate Name | <div> <div>5000.00</div> <div>011</div> <div>Category/Type</div> </div> |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) DAVE WU FOR CONGRESS | Transaction ID: SB23.152981 Date of Disbursement |
| Mailing Address 818 SW 3rd Avenue #1182 | <div> <div>MM / DD / YY</div> <div>03 / 26 / 2010</div> </div> |
| City Portland State OR Zip Code 97204 | Amount of Each Disbursement this Period |
| Purpose of Disbursement Contribution Candidate Name | <div> <div>500.00</div> <div>011</div> <div>Category/Type</div> </div> |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 01 | Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

A.

Full Name (Last, First, Middle Initial)

DAVE WU FOR CONGRESS

Mailing Address 818 SW 3rd Avenue
#1182

City Portland State OR Zip Code 97204

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: OR District: 01

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153020

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

DAVID PRICE FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 1986

City Raleigh State NC Zip Code 27602

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: NC District: 04

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153102

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

DAVID SCOTT FOR CONGRESS

Mailing Address 225 Peachtree Street NE

City Atlanta State GA Zip Code 30303

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: GA District: 13

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153080

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A. Full Name (Last, First, Middle Initial)
DEBBIE WASSERMAN SCHULTZ FOR CONGRESS

Mailing Address P.O. Box 71147

City Washington State DC Zip Code 20024

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: FL District: 20

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.153006

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
DEFAZIO FOR CONGRESS

Mailing Address P.O. Box 1316

City Springfield State OR Zip Code 97477

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: OR District: 04

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153027

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
DELBENE FOR CONGRESS

Mailing Address P.O. Box 1406

City Bellevue State WA Zip Code 98009

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: WA District: 08

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.152974

Date of Disbursement

03 / 23 / 2010

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

DEMOCRATS WIN SEATS PAC

Mailing Address 1071 Twin Branch Lane

City
Weston

State
FL

Zip Code
33326

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: PAC

Transaction ID: SB23.152940

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

DIANA DEGETTE FOR US CONGRESS

Mailing Address P.O. Box 61337

City
Denver

State
CO

Zip Code
80206-8337

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 01

Transaction ID: SB23.153097

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

DINGELL FOR CONGRESS

Mailing Address 19855 W. Outer Drive
Suite 103A-E

City
Dearborn

State
MI

Zip Code
48124-0000

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 15

Transaction ID: SB23.153013

Date of Disbursement

03 / 29 / 2010

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)

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

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

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NAME OF COMMITTEE (In Full)

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

A. Full Name (Last, First, Middle Initial)
DONNA CHRISTENSEN CAMPAIGN

Mailing Address P.O. Box 5197

City Christiansted State VI Zip Code 00823

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: VI District: 00

Transaction ID: SB23.153042

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
DONNELLY FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 1961

City South Bend State IN Zip Code 46634

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District: 02

Transaction ID: SB23.152998

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
DOYLE FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 17426

City Pittsburgh State PA Zip Code 15235

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 14

Transaction ID: SB23.153069

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

DUTCH RUPPERSBERGER FOR CONGRESS COMMITTEE

Mailing Address 22 West Padonia Road
Suite C-141

City Timonium State MD Zip Code 21093

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: MD District: 02

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.152980

Date of Disbursement

03 / 25 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

EARL POMEROY FOR CONGRESS

Mailing Address P.O. Box 9336

City Fargo State ND Zip Code 58106

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: ND District: 01

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.153001

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

ELLIOTT FOR CONGRESS

Mailing Address 124 W. Capitol
Suite 1630

City Little Rock State AR Zip Code 72201

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: AR District: 02

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.152978

Date of Disbursement

03 / 23 / 2010

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

ELLSWORTH FOR INDIANA

Mailing Address P.O. Box 62

City
Evansville

State
IN

Zip Code
47708

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

State: IN District: 08

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.152962

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

ENGEL FOR CONGRESS

Mailing Address 462 California Road

City
Bronxville

State
NY

Zip Code
10708

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: NY District: 17

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153025

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

FATTAH FOR CONGRESS

Mailing Address 3900 Ford Road
Suite 12-O

City
Philadelphia

State
PA

Zip Code
19131

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: PA District: 02

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153041

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

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

PAGE 145 / 178

| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

| | | | | | | | | | | | | | | | | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) FEINGOLD SENATE COMMITTEE | Transaction ID: SB23.152958 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address P.O. Box 620062 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Middleton State WI Zip Code 53562 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution Candidate Name | <table border="1"> <tr> <td colspan="10">3000.00</td> </tr> </table> | 3000.00 | | | | | | | | | | | | | | | | | | | |
| 3000.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 00 | Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) FRIENDS OF BENNIE THOMPSON | Transaction ID: SB23.152984 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 236 Massachusetts Avenue NE Suite 508 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Washington State DC Zip Code 20002 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution Candidate Name | <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table> | 1000.00 | | | | | | | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 02 | Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) FRIENDS OF CAROLYN MCCARTHY | Transaction ID: SB23.153089 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address P.O. Box 190 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 2 | 9 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 9 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Mineola State NY Zip Code 11501 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution Candidate Name | <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table> | 1000.00 | | | | | | | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 04 | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

A. Full Name (Last, First, Middle Initial)
FRIENDS OF CHARLIE WILSON

Mailing Address 252 West Main Street

City Saint Clairsville State OH Zip Code 43950

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
 Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼
 State: OH District: 06

Transaction ID: SB23.153018

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF CHARLIE WILSON

Mailing Address 252 West Main Street

City Saint Clairsville State OH Zip Code 43950

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
 Disbursement For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼
 State: OH District: 06

Transaction ID: SB23.153094

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
FRIENDS OF CONGRESSMAN GEORGE MILLER

Mailing Address P.O. Box 5864

City Concord State CA Zip Code 94524

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
 Disbursement For: 2010 ☐ Primary ☒ General ☐ Other (specify) ▼
 State: CA District: 07

Transaction ID: SB23.152989

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

| | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| A. Full Name (Last, First, Middle Initial) FRIENDS OF FARR Mailing Address P.O. Box 122 | Transaction ID: SB23.153075 Date of Disbursement <div> <div>03</div> <div>29</div> <div>2010</div> </div> |
| City Monterey State CA Zip Code 93942 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 17 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Amount of Each Disbursement this Period <div>1000.00</div> <div>011</div> Category/ Type |
| B. Full Name (Last, First, Middle Initial) FRIENDS OF LOIS CAPPs Mailing Address P.O. Box 23940 City Santa Barbara State CA Zip Code 93121 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 23 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB23.153076 Date of Disbursement <div> <div>03</div> <div>29</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>1000.00</div> <div>011</div> Category/ Type |
| C. Full Name (Last, First, Middle Initial) FRIENDS OF MAURICE HINCHEY Mailing Address P.O. Box 4497 City Kingston State NY Zip Code 12402 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 22 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB23.153092 Date of Disbursement <div> <div>03</div> <div>29</div> <div>2010</div> </div> Amount of Each Disbursement this Period <div>1000.00</div> <div>011</div> Category/ Type |

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

A. Full Name (Last, First, Middle Initial)
FRIENDS OF MAZIE HIRONO

Mailing Address P.O. Box 677

City Honolulu State HI Zip Code 96809

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: HI District: 02

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.152983

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF ROSA DELAURO

Mailing Address 12 Trumbull Street

City New Haven State CT Zip Code 06511

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: CT District: 03

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.152995

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

2500.00

C. Full Name (Last, First, Middle Initial)
FRIENDS OF STEVE POUINET

Mailing Address 100 S. Sunrise Way
Suite A #194

City Palm Springs State CA Zip Code 92262

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 45

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.152972

Date of Disbursement

03 / 23 / 2010

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)

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

A.Full Name (Last, First, Middle Initial)
FRIENDS OF TARRYL CLARK

Mailing Address P.O. Box 489

City State Zip Code
Saint Cloud MN 56302Purpose of Disbursement
Contribution

Candidate Name

011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: MN District: 06

Transaction ID: SB23.153009

Date of Disbursement

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

Amount of Each Disbursement this Period

5000.00

B.Full Name (Last, First, Middle Initial)
GARAMENDI FOR CONGRESSMailing Address 1661 Botelho Drive
Suite 100City State Zip Code
Walnut Creek CA 94596Purpose of Disbursement
Contribution

Candidate Name

011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 10

Transaction ID: SB23.153101

Date of Disbursement

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 0

Amount of Each Disbursement this Period

2500.00

C.Full Name (Last, First, Middle Initial)
GREEN MOUNTAIN PAC

Mailing Address P.O. Box 1142

City State Zip Code
Montpelier VT 05601Purpose of Disbursement
Contribution

Candidate Name

011
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

State: District: PAC

Transaction ID: SB23.152946

Date of Disbursement

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 0

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 150 / 178

| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

| | | | | | | | | | | | | | | | | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) GWEN PAC | Transaction ID: SB23.152933 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 1831 Bay Street SE | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Washington State DC Zip Code 20003 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution Candidate Name | <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table> | 1000.00 | | | | | | | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: PAC | Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) HALTER FOR US SENATE | Transaction ID: SB23.152952 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 902 W. 2nd Street Suite 3 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 0 | 2 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 0 | 2 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Little Rock State AR Zip Code 72201 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution Candidate Name | <table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table> | 5000.00 | | | | | | | | | | | | | | | | | | | |
| 5000.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 00 | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) HANABUSA 2010 | Transaction ID: SB23.152965 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address P.O. Box 1416 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 0 | 5 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 0 | 5 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Honolulu State HI Zip Code 96806 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution Candidate Name | <table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table> | 5000.00 | | | | | | | | | | | | | | | | | | | |
| 5000.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 01 | Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

HASTINGS FOR CONGRESS

Mailing Address P.O. Box 100277

City State Zip Code
Fort Lauderdale FL 33310

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: FL District: 23

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153033

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

HILLIARD FOR CONGRESS

Mailing Address P.O. Box 12804

City State Zip Code
Birmingham AL 35202

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: AL District: 07

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153068

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

4000.00

C.

Full Name (Last, First, Middle Initial)

HOUSE BACK PAC

Mailing Address P.O. Box 30344

City State Zip Code
Bethesda MD 20824

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

PAC

Transaction ID: SB23.152949

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 152 / 178

| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

| | | | | | | | | | | | | | | | | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) ISRAEL FOR CONGRESS | Transaction ID: SB23.153054 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address P.O. Box 777 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City State Zip Code Deer Park NY 11729 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution Candidate Name | <table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table> | 2000.00 | | | | | | | | | | | | | | | | | | | |
| 2000.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 02 | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) JACKIE FOR CONGRESS | Transaction ID: SB23.153073 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address P.O. Box 112 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 2 | 9 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 9 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City State Zip Code Burlingame CA 94011 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution Candidate Name | <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table> | 1000.00 | | | | | | | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 12 | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) JANE DYER FOR CONGRESS | Transaction ID: SB23.152967 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address P.O. Box 1000 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 2 | 3 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 3 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City State Zip Code Easley SC 29641 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution Candidate Name | <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table> | 1000.00 | | | | | | | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 03 | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

JIM COSTA FOR CONGRESS

Mailing Address 2037 West Bullard
Suite 355

City Fresno State CA Zip Code 93711-1200

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
 Disbursement For: 2010 ☒ Primary ☐ General
☐ Other (specify) ▼
 State: CA District: 20

Transaction ID: SB23.153030

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

JOHN BOCCIERI FOR CONGRESS

Mailing Address P.O. Box 3016

City Alliance State OH Zip Code 44601

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
 Disbursement For: 2010 ☐ Primary ☒ General
☐ Other (specify) ▼
 State: OH District: 16

Transaction ID: SB23.152997

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

JOHN CALLAHAN FOR CONGRESS

Mailing Address P.O. Box 1386

City Bethlehem State PA Zip Code 18016

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
 Disbursement For: 2010 ☐ Primary ☒ General
☐ Other (specify) ▼
 State: PA District: 15

Transaction ID: SB23.153008

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

| | | | | | | | | | | | | | | | | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) JOHN CARNEY FOR CONGRESS | Transaction ID: SB23.153005 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address P.O. Box 2162 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Wilmington State DE Zip Code 19899-2162 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution Candidate Name | <table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table> | 5000.00 | | | | | | | | | | | | | | | | | | | |
| 5000.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DE District: 01 | Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) JOHN HALL FOR CONGRESS | Transaction ID: SB23.153055 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address P.O. Box 469 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Beacon State NY Zip Code 12508 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution Candidate Name | <table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table> | 2000.00 | | | | | | | | | | | | | | | | | | | |
| 2000.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19 | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) JOHN LEWIS FOR CONGRESS | Transaction ID: SB23.153056 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address P.O. Box 2323 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Atlanta State GA Zip Code 30301 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Contribution Candidate Name | <table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table> | 2000.00 | | | | | | | | | | | | | | | | | | | |
| 2000.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 05 | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

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

PAGE 155 / 178

| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

A.

Full Name (Last, First, Middle Initial)

JOHN SALAZAR FOR CONGRESS

Mailing Address P.O. Box 534

City
PuebloState
COZip Code
81002Purpose of Disbursement
Contribution

Candidate Name

011

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 03

Transaction ID: SB23.153051

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

JOHN SARBANES FOR CONGRESS

Mailing Address P.O. Box 6854

City
BaltimoreState
MDZip Code
21285Purpose of Disbursement
Contribution

Candidate Name

011

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 03

Transaction ID: SB23.153052

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

KAPTUR FOR CONGRESS

Mailing Address P.O. Box 899

City
ToledoState
OHZip Code
43697Purpose of Disbursement
Contribution

Candidate Name

011

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 09

Transaction ID: SB23.153040

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

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

PAGE 156 / 178

| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

A.

Full Name (Last, First, Middle Initial)

KAPTUR FOR CONGRESS

Mailing Address P.O. Box 899

City
ToledoState
OHZip Code
43697Purpose of Disbursement
Contribution

Candidate Name

011

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 09

Transaction ID: SB23.153095

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 9 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

KEEP NICK RAHALL IN CONGRESS COMMITTEE

Mailing Address P.O. Box 64

City
BeckleyState
WVZip Code
25801-0000Purpose of Disbursement
Contribution

Candidate Name

011

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: WV District: 03

Transaction ID: SB23.153104

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 9 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

3000.00

C.

Full Name (Last, First, Middle Initial)

KILDEE FOR CONGRESS

Mailing Address P.O. Box 317

City
FlintState
MIZip Code
48501-0000Purpose of Disbursement
Contribution

Candidate Name

011

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 05

Transaction ID: SB23.153098

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 9 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

A. Full Name (Last, First, Middle Initial)
KILPATRICK FOR UNITED STATES CONGRESS

Mailing Address P.O. Box 32175

City State Zip Code
Detroit MI 48232-0000

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: MI District: 13

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153022

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
KLEIN FOR CONGRESS

Mailing Address 21301 Powerline Road
Suite 204

City State Zip Code
Boca Raton FL 33433

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: FL District: 22

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.153015

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

2500.00

C. Full Name (Last, First, Middle Initial)
KOSMAS FOR CONGRESS

Mailing Address 920 3rd Avenue

City State Zip Code
New Smyrna Beach FL 32170

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: FL District: 24

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.152996

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A. Full Name (Last, First, Middle Initial)
LAURA RICHARDSON FOR CONGRESS

Mailing Address 1212 S. Victory Blvd.

City Burbank State CA Zip Code 91502

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 37

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153079

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
LEAHY FOR U.S. SENATOR COMMITTEE

Mailing Address P.O. Box 1042

City Montpelier State VT Zip Code 05601

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☒ Senate
☐ President

State: VT District: 00

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.152961

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
LENTZ FOR CONGRESS

Mailing Address P.O. Box 1846

City Media State PA Zip Code 19063

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: PA District: 07

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.152975

Date of Disbursement

03 / 23 / 2010

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
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| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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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)

LEVIN FOR CONGRESS

Mailing Address P.O. Box 37

City
Roseville

State
MI

Zip Code
48066

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: MI District: 12

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.153019

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

LOEBSACK FOR CONGRESS

Mailing Address P.O. Box 1457

City
Iowa City

State
IA

Zip Code
52244

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: IA District: 02

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153057

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

LOFGREN FOR CONGRESS

Mailing Address P.O. Box 55804

City
Sherman Oaks

State
CA

Zip Code
91413

Purpose of Disbursement
Contribution - voided ck from prior report

Candidate Name

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 16

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153108

Date of Disbursement

03 / 31 / 2010

Amount of Each Disbursement this Period

-1000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

LORI EDWARDS CAMPAIGN COMMITTEE

Mailing Address P.O. Box 280

City
Eagle Lake

State
FL

Zip Code
33839

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 12

Transaction ID: SB23.153064

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

3000.00

B.

Full Name (Last, First, Middle Initial)

LOUISE SLAUGHTER RE-ELECTION COMMITTEE

Mailing Address P.O. Box 730

City
Honeoye

State
NY

Zip Code
14471

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 28

Transaction ID: SB23.152999

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

MALONEY FOR CONGRESS

Mailing Address 24 East 93rd Street
Suite 1B

City
New York

State
NY

Zip Code
10128

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 14

Transaction ID: SB23.153011

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 161 / 178

| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
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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)
MARK CRITZ FOR CONGRESS

Mailing Address 657 Main Street
Suite 110

City Johnstown State PA Zip Code 15901

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: PA District: 12

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼
Special-General

Transaction ID: SB23.153106

Date of Disbursement

03 / 30 / 2010

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
MARKEY FOR CONGRESS

Mailing Address P.O. Box 1333

City Fort Collins State CO Zip Code 80522-1333

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: CO District: 04

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.152994

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

2500.00

C. Full Name (Last, First, Middle Initial)
MATSUI FOR CONGRESS

Mailing Address 122 C Street NW
Suite 505

City Washington State DC Zip Code 20001

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 05

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153026

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

A.

Full Name (Last, First, Middle Initial)
MCCOLLUM FOR CONGRESS

Mailing Address P.O. Box 14131

City State Zip Code
Saint Paul MN 55114

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: MN District: 04

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153099

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)
MEL WATT FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 36831

City State Zip Code
Charlotte NC 28236

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: NC District: 12

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153038

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
MICHAUD FOR CONGRESS

Mailing Address 213 Lisbon Street

City State Zip Code
Lewiston ME 04240

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: ME District: 02

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153045

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
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| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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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)

MOORE FOR CONGRESS

Mailing Address P.O. Box 16646

City
Milwaukee

State
WI

Zip Code
53216

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: WI District: 04

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153028

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

MOORE FOR CONGRESS

Mailing Address P.O. Box 16646

City
Milwaukee

State
WI

Zip Code
53216

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: WI District: 04

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153105

Date of Disbursement

03 / 30 / 2010

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

NAPOLITANO FOR CONGRESS

Mailing Address 555 Capitol Mall
Suite 1425

City
Sacramento

State
CA

Zip Code
95814

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 38

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153032

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

NEW YORK JOBS PAC

Mailing Address P.O. Box 763

City
Deer Park

State
NY

Zip Code
11729

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

PAC

Transaction ID: SB23.152947

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

NITA LOWEY FOR CONGRESS

Mailing Address P.O. Box 271

City
White Plains

State
NY

Zip Code
10605

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 18

Transaction ID: SB23.153091

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

NORM DICKS FOR CONGRESS

Mailing Address P.O. Box 1663

City
Tacoma

State
WA

Zip Code
98401

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: WA District: 06

Transaction ID: SB23.153100

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

A. Full Name (Last, First, Middle Initial) **OPPORTUNITY AND RENEWAL PAC**

Mailing Address 122 C Street NW
Suite 505

City Washington State DC Zip Code 20001

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: PAC

Transaction ID: SB23.152943

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial) **ORTIZ FOR CONGRESS CAMPAIGN**

Mailing Address P.O. Box 7806

City Corpus Christi State TX Zip Code 78467

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 27

Transaction ID: SB23.153012

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial) **PAC TO THE FUTURE**

Mailing Address 607 14th Street
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2010 ☐ Primary ☐ General
☒ Other (specify) ▼

State: District: PAC

Transaction ID: SB23.152938

Date of Disbursement

03 / 22 / 2010

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

| | | | | | | | | | | | |
|--|-----|--|-----|---|-----|--|-----|--|----|--|-----|
| | 21b | | 22 | X | 23 | | 24 | | 25 | | 26 |
| | 27 | | 28a | | 28b | | 28c | | 29 | | 30b |

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

FEC Schedule B (Form 3X) (Revised 02/2003)

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

PAGE 167 / 178

| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

A. Full Name (Last, First, Middle Initial)
PATRICK MURPHY FOR CONGRESS

Mailing Address P.O. Box 868

City Levittown State PA Zip Code 19058-0868

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 08

Transaction ID: SB23.153002

Date of Disbursement

M M / D D / Y Y Y Y
03 / 26 / 2010

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
PATRICK MURPHY FOR CONGRESS

Mailing Address P.O. Box 868

City Levittown State PA Zip Code 19058-0868

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 08

Transaction ID: SB23.153063

Date of Disbursement

M M / D D / Y Y Y Y
03 / 26 / 2010

Amount of Each Disbursement this Period

3000.00

C. Full Name (Last, First, Middle Initial)
PAULA BROOKS FOR CONGRESS

Mailing Address 550 E. Walnut Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 12

Transaction ID: SB23.153065

Date of Disbursement

M M / D D / Y Y Y Y
03 / 26 / 2010

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

PAGE 168 / 178

| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

A. Full Name (Last, First, Middle Initial)
PAUL TONKO FOR CONGRESSMailing Address 911 Central Avenue
#221

City Albany State NY Zip Code 12206-1350

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 21

Transaction ID: SB23.152987

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
PENNSYLVANIANS FOR KANJORSKI

Mailing Address 126 South Franklin Street

City Wilkes Barre State PA Zip Code 18701

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 11

Transaction ID: SB23.153049

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

1500.00

C. Full Name (Last, First, Middle Initial)
PERLMUTTER FOR CONGRESSMailing Address 3440 Youngfield Street
#264

City Wheat Ridge State CO Zip Code 80033

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 07

Transaction ID: SB23.153062

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 169 / 178

| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
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| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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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)
PETE STARK RE-ELECTION COMMITTEE

Mailing Address P.O. Box 8331

City State Zip Code
Freemont CA 94537

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 13

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153029

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
PIKE FOR CONGRESS

Mailing Address P.O. Box 467

City State Zip Code
Ardmore PA 19003

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: PA District: 06

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.152969

Date of Disbursement

03 / 23 / 2010

Amount of Each Disbursement this Period

2500.00

C. Full Name (Last, First, Middle Initial)
RAJ FOR CONGRESS

Mailing Address P.O. Box 780971

City State Zip Code
Wichita KS 67278

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: KS District: 04

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.152971

Date of Disbursement

03 / 23 / 2010

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

| | | | | | | | | | | | |
|--|-----|--|-----|---|-----|--|-----|--|----|--|-----|
| | 21b | | 22 | X | 23 | | 24 | | 25 | | 26 |
| | 27 | | 28a | | 28b | | 28c | | 29 | | 30b |

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 171 / 178

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

A. Full Name (Last, First, Middle Initial)
RUSH HOLT FOR CONGRESS

Mailing Address P.O. Box 782

City Pennington State NJ Zip Code 08534

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
 Disbursement For: 2010 ☒ Primary ☐ General
☐ Other (specify) ▼
 State: NJ District: 12

Transaction ID: SB23.153087

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
RUSS CARNAHAN FOR CONGRESS COMMITTEE

Mailing Address 7370 Manchester
Suite 20

City Saint Louis State MO Zip Code 63143

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
 Disbursement For: 2010 ☒ Primary ☐ General
☐ Other (specify) ▼
 State: MO District: 03

Transaction ID: SB23.153048

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1500.00

C. Full Name (Last, First, Middle Initial)
SCHAKOWSKY FOR CONGRESS

Mailing Address P.O. Box 5130

City Evanston State IL Zip Code 60204

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House ☐ Senate ☐ President
 Disbursement For: 2010 ☐ Primary ☒ General
☐ Other (specify) ▼
 State: IL District: 09

Transaction ID: SB23.152966

Date of Disbursement

03 / 16 / 2010

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 172 / 178

| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

A.

Full Name (Last, First, Middle Initial)

SCHIFF FOR CONGRESS

Mailing Address 15 S. Raymond Avenue
Suite 204

City Pasadena State CA Zip Code 91105

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 29

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153078

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

SCOTT FOR CONGRESS

Mailing Address P.O. Box 251

City Newport News State VA Zip Code 23607

Purpose of Disbursement
Contribution - voided ck from prior report

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: VA District: 03

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153109

Date of Disbursement

03 / 31 / 2010

Amount of Each Disbursement this Period

-1000.00

C.

Full Name (Last, First, Middle Initial)

SCOTT MURPHY FOR CONGRESS

Mailing Address 615 Glen Street

City Glens Falls State NY Zip Code 12801

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: NY District: 20

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.153017

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

SECURE PAC

Mailing Address P.O. Box 675

City
Bolton

State
MS

Zip Code
39041

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

PAC

Transaction ID: SB23.152942

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

SHERMAN FOR CONGRESS

Mailing Address 4570 Van Nuys Blvd.
#270

City
Sherman Oaks

State
CA

Zip Code
91403

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: CA District: 27

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153031

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

SIRES FOR CONGRESS

Mailing Address P.O. Box 300

City
West New York

State
NJ

Zip Code
07093

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 13

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153039

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 174 / 178

| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

A.

Full Name (Last, First, Middle Initial)

SNOWE FOR SENATE

Mailing Address P.O. Box 2012

City
PortlandState
MEZip Code
04104Purpose of Disbursement
Contribution

Candidate Name

011

Category/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: ME District: 00

Transaction ID: SB23.152959

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

SPRATT FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 10986

City
Rock HillState
SCZip Code
29731Purpose of Disbursement
Contribution

Candidate Name

011

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: SC District: 05

Transaction ID: SB23.153050

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

1500.00

C.

Full Name (Last, First, Middle Initial)

STEVE ROTHMAN FOR NEW JERSEY INC.

Mailing Address P.O. Box 714

City
HackensackState
NJZip Code
07602Purpose of Disbursement
Contribution

Candidate Name

011

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 09

Transaction ID: SB23.153086

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 9 | | 2 | 0 | 1 | 0 |

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)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)

STUPAK FOR CONGRESS

Mailing Address P.O. Box 156

City
Menominee

State
MI

Zip Code
49858

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: MI District: 01

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153053

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

TAKING THE HILL PAC

Mailing Address 499 South Capitol Street SW
Suite 404

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

PAC

Transaction ID: SB23.152932

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

TEXANS FOR HENRY CUELLAR CONGRESSIONAL CAMPAIGN

Mailing Address 1519 Washington Street
Suite 200

City
Laredo

State
TX

Zip Code
78042

Purpose of Disbursement
Contribution

Candidate Name

011

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: TX District: 28

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.153014

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 176 / 178

| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <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

A.

Full Name (Last, First, Middle Initial)

THE COMMITTEE TO RE-ELECT CONGRESSMAN HANK JOHNSON

Mailing Address 6440 Old Hillandale Drive
Suite 262

City Lithonia State GA Zip Code 30058

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: GA District: 04

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153047

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

THE MESABI FUND

Mailing Address P.O. Box 7853

City Washington State DC Zip Code 20044-7853

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

PAC

Transaction ID: SB23.152944

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

THE NIKI TSONGAS COMMITTEE

Mailing Address P.O. Box 1454

City Lowell State MA Zip Code 01853

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: MA District: 05

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.153103

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A. Full Name (Last, First, Middle Initial)
TIM WALZ FOR US CONGRESS

Mailing Address P.O. Box 938

City Mankato State MN Zip Code 56002

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: MN District: 01

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: SB23.152982

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
TOM PAC

Mailing Address P.O. Box 752

City Des Moines State IA Zip Code 50311

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2010
☐ Primary ☐ General
☒ Other (specify) ▼

PAC

Transaction ID: SB23.152950

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
TOM WHITE FOR CONGRESS

Mailing Address P.O. Box 241555

City Omaha State NE Zip Code 68124-1555

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: NE District: 02

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.152976

Date of Disbursement

03 / 23 / 2010

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

A.

Full Name (Last, First, Middle Initial)

WELCH FOR CONGRESS

Mailing Address P.O. Box 1086

City
Montpelier

State
VT

Zip Code
05601

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: VT District: 00

Transaction ID: SB23.153096

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

YARMUTH FOR CONGRESS

Mailing Address 1815 Brownsboro Road

City
Louisville

State
KY

Zip Code
40206

Purpose of Disbursement
Contribution

Candidate Name

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 03

Transaction ID: SB23.153034

Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

379000.00