

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

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

FOR LINE NUMBER: PAGE 120 OF 822

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CAREY, DAMETRA, , ,

Mailing Address P.O. Box 1222

City
Columbus

State
OH

Zip Code
43216

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME OH LOC 11/STATE OF OH

Occupation (for Individual)
CORRECTION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

558.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2019

Transaction ID : SA11AI.232856

Amount of Each Receipt this Period

31.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CAREY, DAVID, , ,

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 (for Individual)
AFSCME PA CN 13

Occupation (for Individual)
STAFF REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.52

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 14 / 2019

Transaction ID : SA11AI.232114

Amount of Each Receipt this Period

48.94

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARPENTER, ADDO, , , JR.

Mailing Address 9212a S Halsted Avenue

City
Chicago

State
IL

Zip Code
60620

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
AFSCME IL CN 31/STATE OF IL

Occupation (for Individual)
CHILD WELFARE SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 05 / 2019

Transaction ID : SA11AI.231895

Amount of Each Receipt this Period

63.00

☐ Memo Item

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

142.94

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