

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

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

FOR LINE NUMBER: PAGE 151 OF 822

(check only one)

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

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

NAME OF COMMITTEE (In Full)

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

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

A. CONATY, TRACEY, , ,

Mailing Address 3525 Quebec Street NW

City
Washington

State
DC

Zip Code
20016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AFSCME INT'L

Occupation (for Individual)

ASSISTANT DIRECTOR, NEW MEDIA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

946.24

Date of Receipt

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

Transaction ID : SA11AI.231542

Amount of Each Receipt this Period

59.14

☐ Memo Item

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

B. CONDO, JEFFREY, A., ,

Mailing Address 59 N Kenwood Avenue

City
Georgetown

State
OH

Zip Code
45121

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
CUSTODIAL WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 02 / 2019

Transaction ID : SA11AI.232481

Amount of Each Receipt this Period

18.50

☐ Memo Item

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

C. CONDO, JEFFREY, A., ,

Mailing Address 59 N Kenwood Avenue

City
Georgetown

State
OH

Zip Code
45121

FEC ID number of contributing
federal political committee.

C

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

Occupation (for Individual)
CUSTODIAL WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

314.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 16 / 2019

Transaction ID : SA11AI.232672

Amount of Each Receipt this Period

18.50

☐ Memo Item

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

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

96.14